



## The Prevention and Recovery Care Exit Survey

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## **Acknowledgements**

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- The area managers and service managers of the relevant PARCs,
- All PARC staff who were involved in ensuring consumers gained access to the survey, and
- The PARC consumers who completed the Exit survey.

## Executive Summary

This report outlines the process and outcomes of conducting an exit survey over a nine month period by four participating Mind Australia Prevention and Recovery Care (PARC) services.

The Exit Survey was devised following participation of senior PARC staff in a program logic activity which recognised the importance of evaluating the recovery orientation of their service. The previous report *The Prevention and Recovery Care Exit Survey 2012*<sup>1</sup> was based on exit survey data collected between September and December 2011 during a three month trial. The results presented in the 2012 report demonstrated a high level of satisfaction, particularly with interactions and relationships with staff but also revealed some areas for development in addressing consumers' cultural and spiritual needs and how the consumers experience having an influence on the service at the PARC.

The response rate for the data collected between January and September 2012 is 55%. This is a lower response rate than the previous report which was at 58%. The findings from the current survey response data were once again very informative and shared common themes to the 2012 report.

- Endorsement of the quality of staff interactions with consumers at PARC;
- Very positive comments about the value of the service to consumers;
- PARCs generally provide a safe and comfortable environment.

The findings included some challenges for PARCs in relation to:

- Meeting the cultural and spiritual needs of consumers;
- Consumers having more opportunity to influence how the services are run;
- Having more meaningful and purposeful activities;
- Access to staff, communication and the discharge process.

This report recommends once again that the PARCs continue to use the exit survey and that other Mind PARCs are also invited to join in completing the surveys. It is also suggested that the process of providing access to the survey for consumers during their exit should be either via a hardcopy of the survey or the person can input directly into a survey monkey or online version and subsequently act on the findings in collaboration with the partner public mental health agencies as suggested in the previous report. It finally suggests that PARCs explore other evaluation opportunities, in particular through the use of suitable outcome measures. Also to consider having consistency of feedback from family/carers through the current family and carer exit survey. This report contains the first consumer **results with a youth perspective. This has given a point of comparison to the results from the adult** PARCs which will be discussed in this report. A second youth PARC will be providing exit surveys for consumers, this will give an even broader youth perspective.

<sup>1</sup>Brophy, L. and Loh, M., (2012). The Prevention and Recovery Care Exit Survey 2012. Mind Australia.

## Introduction

The Prevention and Recovery Care (PARC) Exit Survey forms part of the current evaluation strategy being developed and implemented within Mind Australia's PARC services.

This report details and discusses the results from responses provided by the four participating PARC services in 2012. The exit surveys continue to enable consumers to provide feedback and contribute to service development. It represents an important component in evaluation of the PARC services in relation to the level of satisfaction with the service provided and the degree to which the service is recovery orientated.

## Prevention and Recovery Care

The aims of PARCs are:

- To improve mental health outcomes of people with a severe mental illness, who become acutely unwell, and
- To prevent avoidable admissions to acute units, and avoidable re-admissions following an acute episode.

PARCs are step-up or step-down ten bed short term residential services that are run in partnership with Area Mental Health Services (AMHS). During this period Mind has three adult PARCs with three different clinical services and one youth PARC. Mind will be operating another four PARCs, with AMHS in 2013.

Mind has been providing PARC services since 2008 when the first Mind PARC opened in Bendigo and has now developed significant experience in providing recovery focused support in this environment.

## Rationale

Undertaking an evaluation strategy at PARC was considered an important opportunity in context of an active period of service development. It was acknowledged that current activities were locally developed and inconsistent but there was a lot of interest and enthusiasm. Anecdotally PARC staff believed that clients were benefiting from their stay but it was difficult to quantify or refer to evidence of this.

In response Mind PARC managers met to work through a logic model and developed a discussion paper where all relevant information relating to evaluation was retrieved and collated.

The logic model process included the following:

- Applying a logic model
  - Inputs/resources (what we put in)
  - Activities/Outputs (what we do)
  - Outcomes (what did we achieve?)
    - Person's recovery goals (ie. Individual Recovery Plan)
    - Change (ie. Outcome measure such as HoNOS)
    - **Recovery orientation of the service (ie. satisfaction or exit survey)**
- Environmental context (ie. Partnership, short stay)

Some key questions from the program logic discussion were:

- Who comes to PARC?
- How did they come to us?

- Where do they go?
- How are they when they leave?
- What supports will they have?
- Did they change while at PARC?
- Did they work on recovery goals?
- Did we contribute to recovery indicators?
- Was the service recovery orientated?

Although it may be contested as an outcome measure, measures of consumer satisfaction lie somewhere between ‘process’ and ‘outcome’ measures. When the concern is with the extent to which consumers are satisfied with the context, processes, and perhaps the costs of a treatment service or network, the relevant measures of satisfaction can be viewed as process measures. However, when the concern is with the extent to which consumers view the programme as having been helpful in resolving their problems, consumer satisfaction becomes a proxy outcome measure. Therefore in this case it formed part of a process or formative evaluation with a particular focus on the degree to which the service was able to demonstrate its underlying purpose to provide a recovery orientated service.

As discussed above there was considerable enthusiasm to engage in an evaluation activity but minimal resources to do so. It seemed encouraging to firstly build on current practice in the hope that this would increase confidence in undertaking more evaluation activities. While some piloting of validated measures such as the Inspire tool and the Recovery Self-Assessment (RSA) did take place, and the team also reviewed other possible tools, no consensus could be reached on a suitable tool. The problems with getting a good match appeared to be due to a number of factors including the short stay environment, having rostered staff and more than one service provider.

## **Method**

As with the previous survey, the PARC exit survey was offered to all consumers who were exiting the PARC as part of the routine exit process. In some cases consumers were offered the survey directly by staff or the survey was made available in communal areas. The consumer can complete the survey on line or as a hard copy. Completed hardcopy surveys were deposited into a collection box (rather than being handed back to the worker) then uploaded into survey monkey. The survey deliberately did not ask for demographic data so this kept it very brief, simple and as non-identifying as possible. Surveys were not collected on a daily basis and with many exits from PARC each week it would be difficult to identify individual consumers.

During the nine-month period from 1/1/2012 to 30/9/2012, a total of four hundred and twenty-one consumers exited the four PARCs. Two hundred and thirty-two of these consumers completed the exit survey; this is a response rate of 55%.

## Findings

**Chart 1:** Number of responses to the Consumer Exit survey by Mind PARCs (n=232)

(Period: January to September 2012)

# YPARC 1 period commenced on 28 May 2012

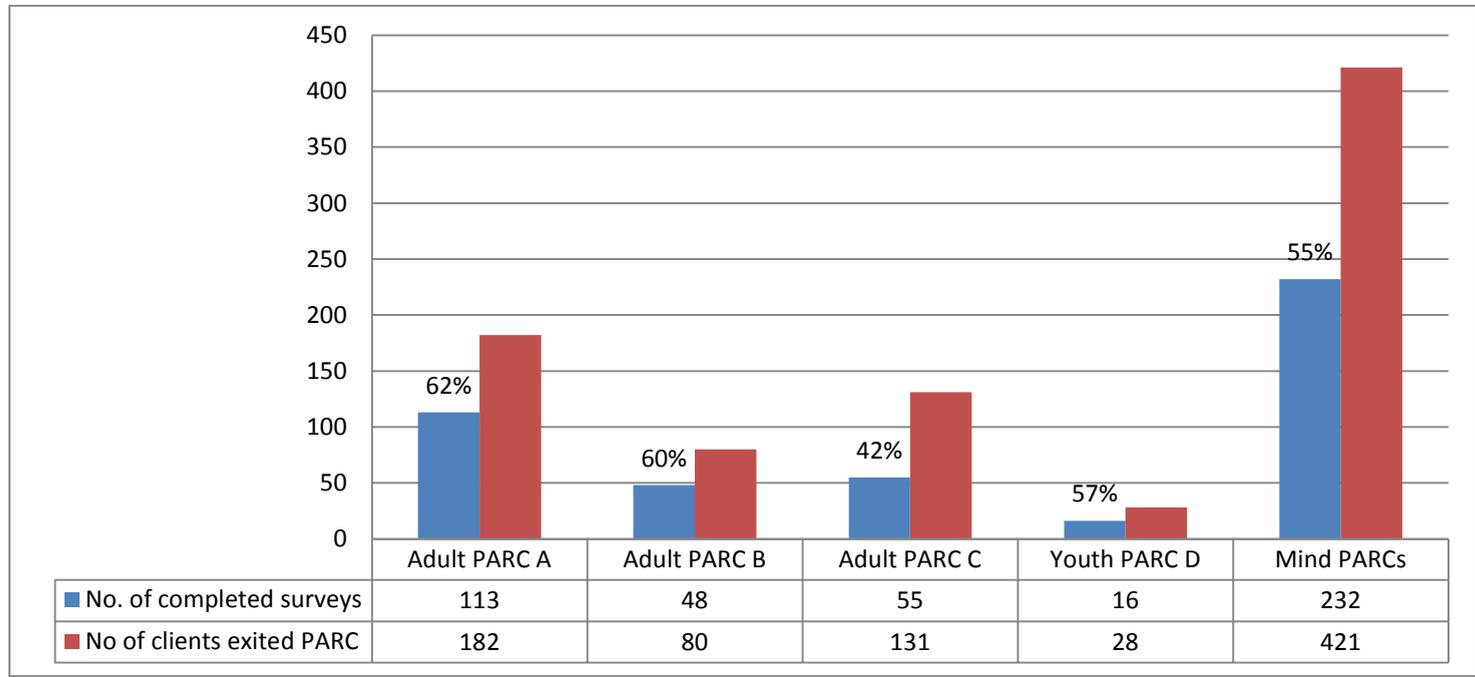
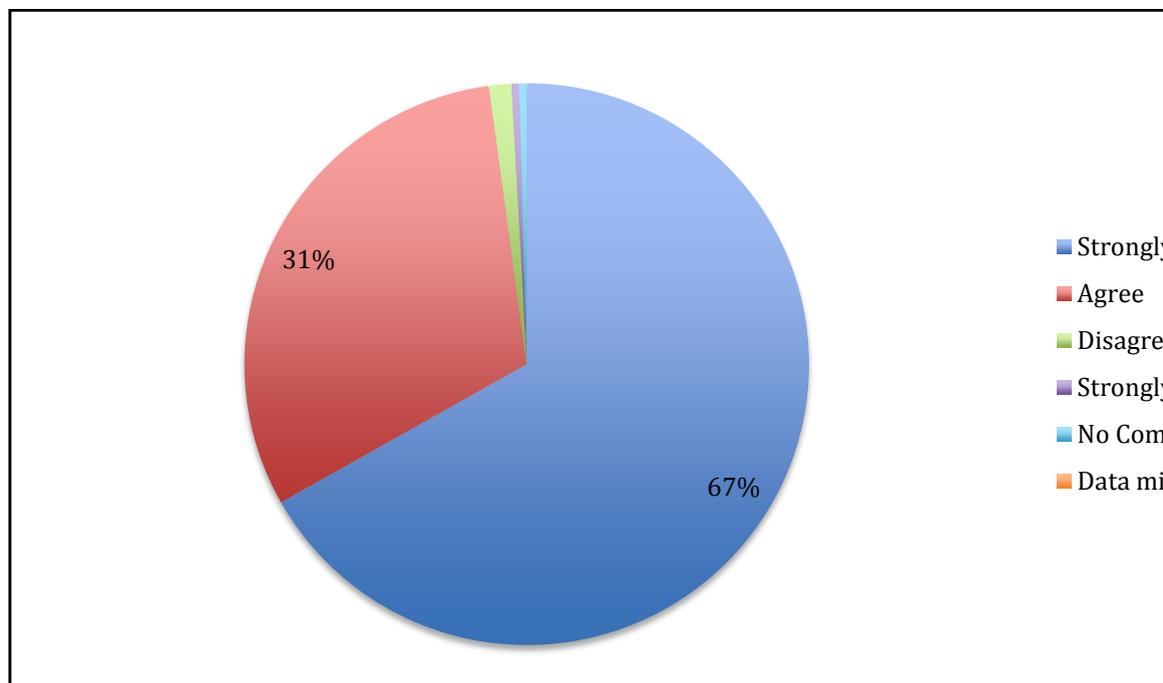


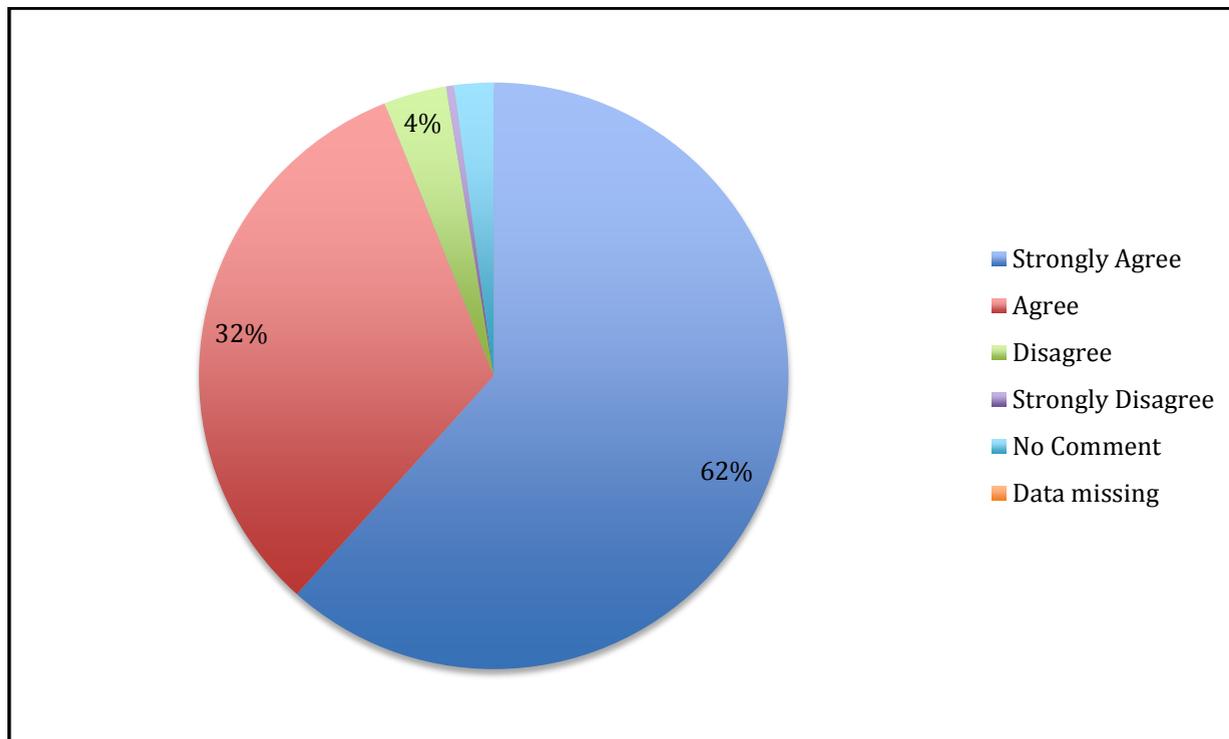
Chart 1 indicates that the overall response rate from all the four PARCs was 55 per cent, with the Adult PARC A having the highest survey return of 62 per cent.

**Question 1: I feel that staff in the service have respected me and treated me with dignity**



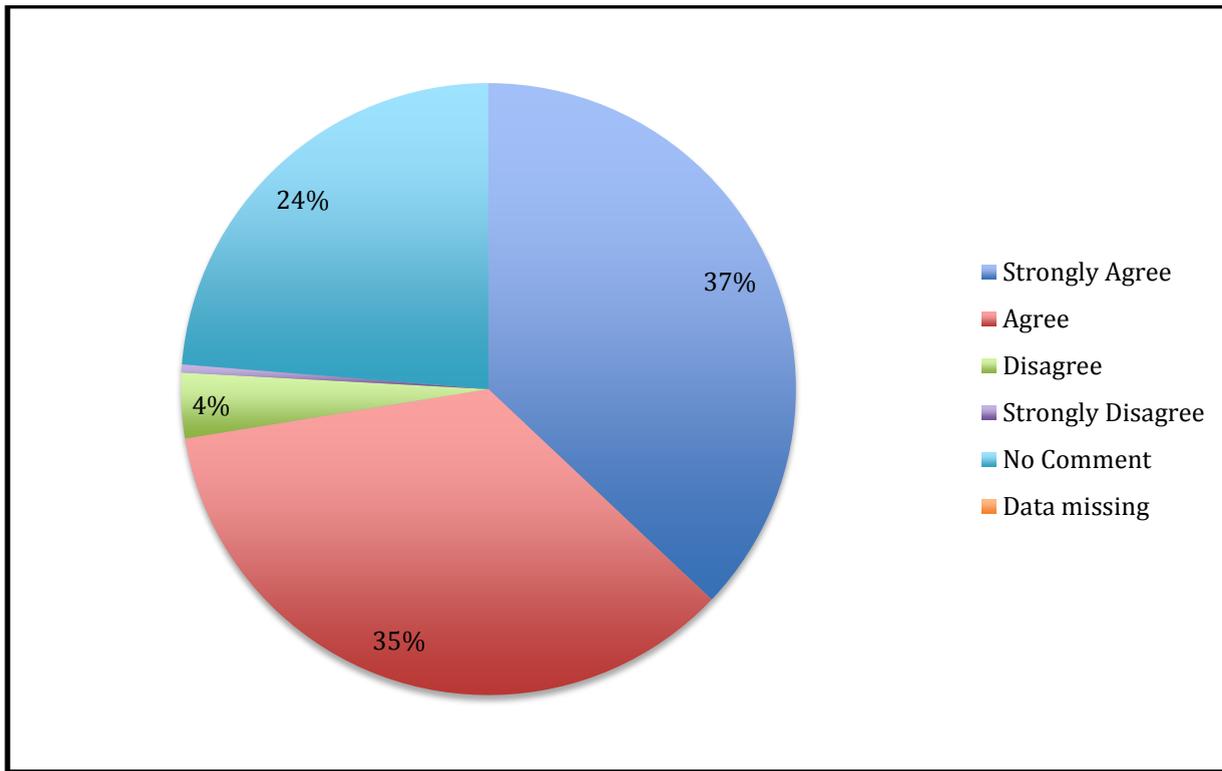
	Strongly agree	Agree	Disagree	Strongly disagree	No comment	Data missing
n	155	72	3	1	1	0
%	67%	31%	1%	0%	0%	0%

**Question 2: I feel that I have been listened to by staff in the service**



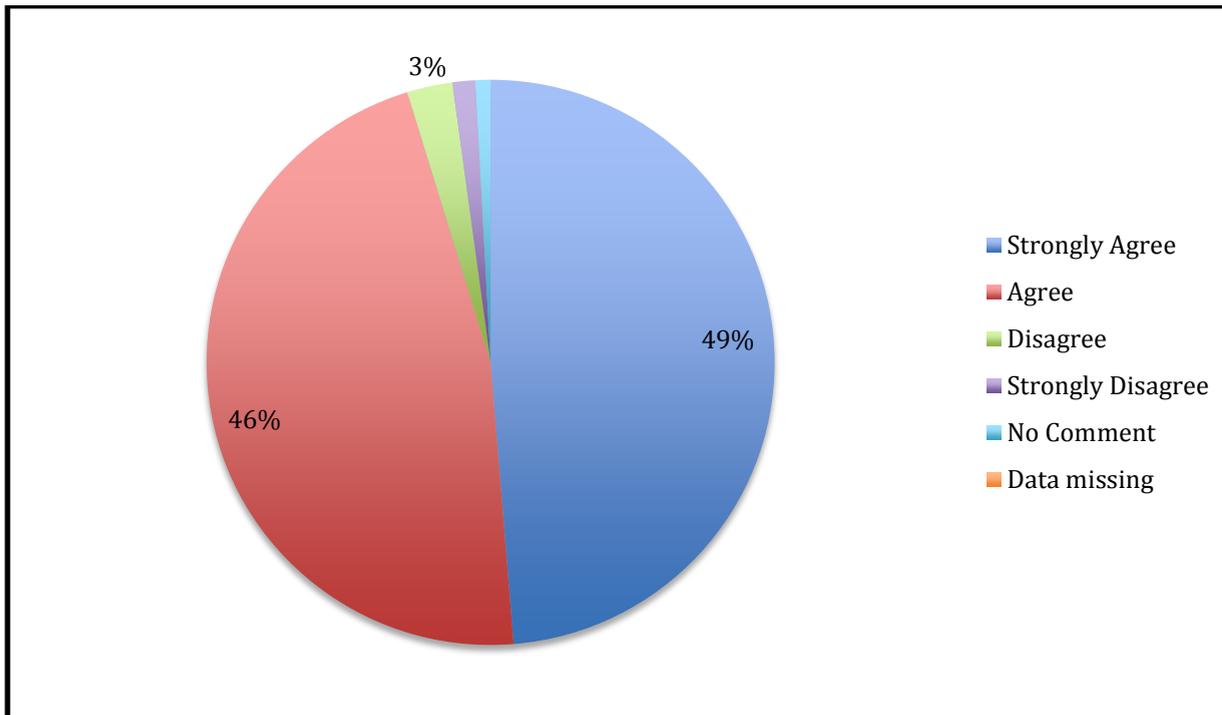
	Strongly agree	Agree	Disagree	Strongly disagree	No comment	Data missing
n	143	75	8	1	5	0
%	62%	32%	3%	0%	2%	0%

**Question 3: My cultural and spiritual needs have been met.**



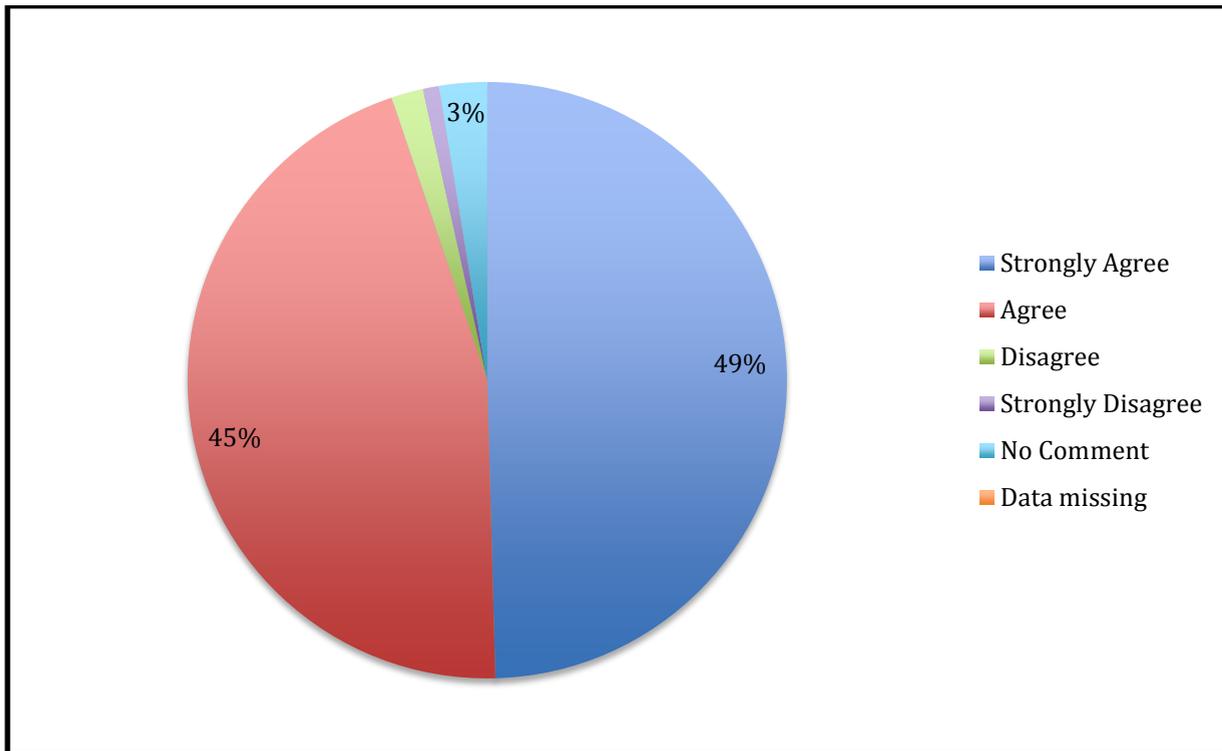
	Strongly agree	Agree	Disagree	Strongly disagree	No comment	Data missing
n	86	82	8	1	55	0
%	37%	35%	3%	0%	24%	0%

**Question 4: I have been given relevant and sufficient information about the service.**



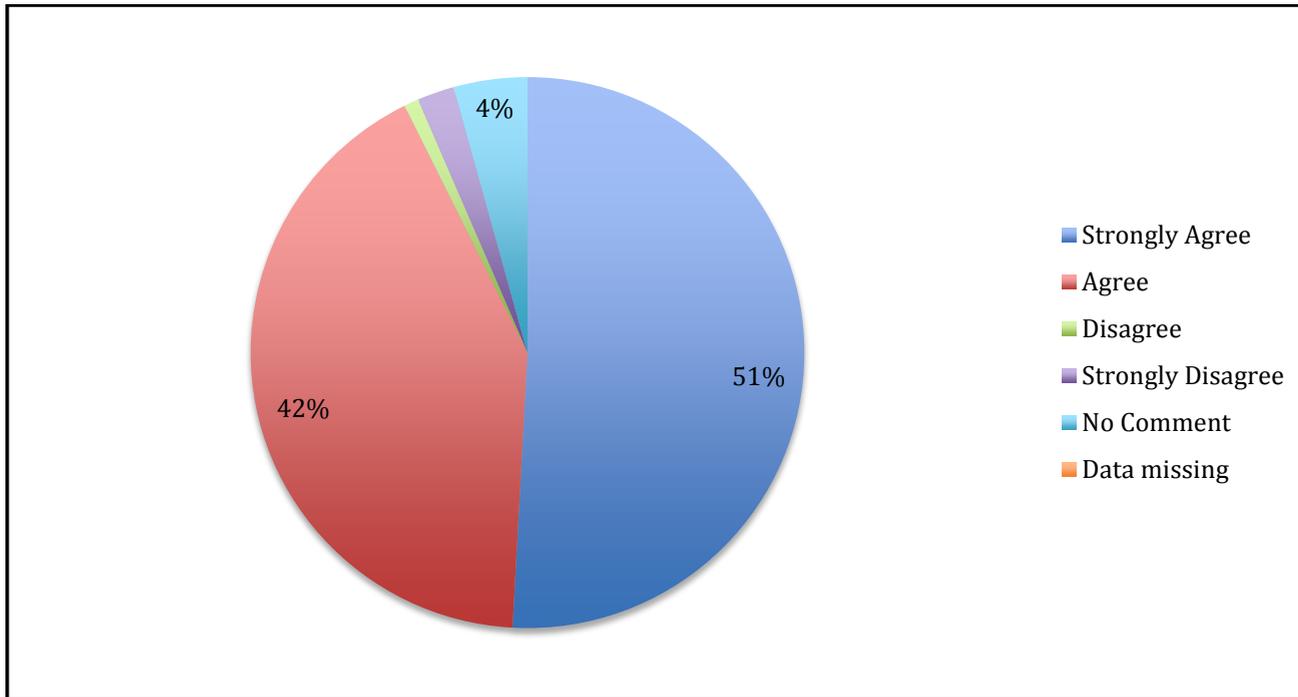
	Strongly agree	Agree	Disagree	Strongly disagree	No comment	Data missing
n	113	108	6	3	2	0
%	49%	47%	3%	1%	1%	0%

**Question 5: I have been involved in deciding on the support that I have been given.**



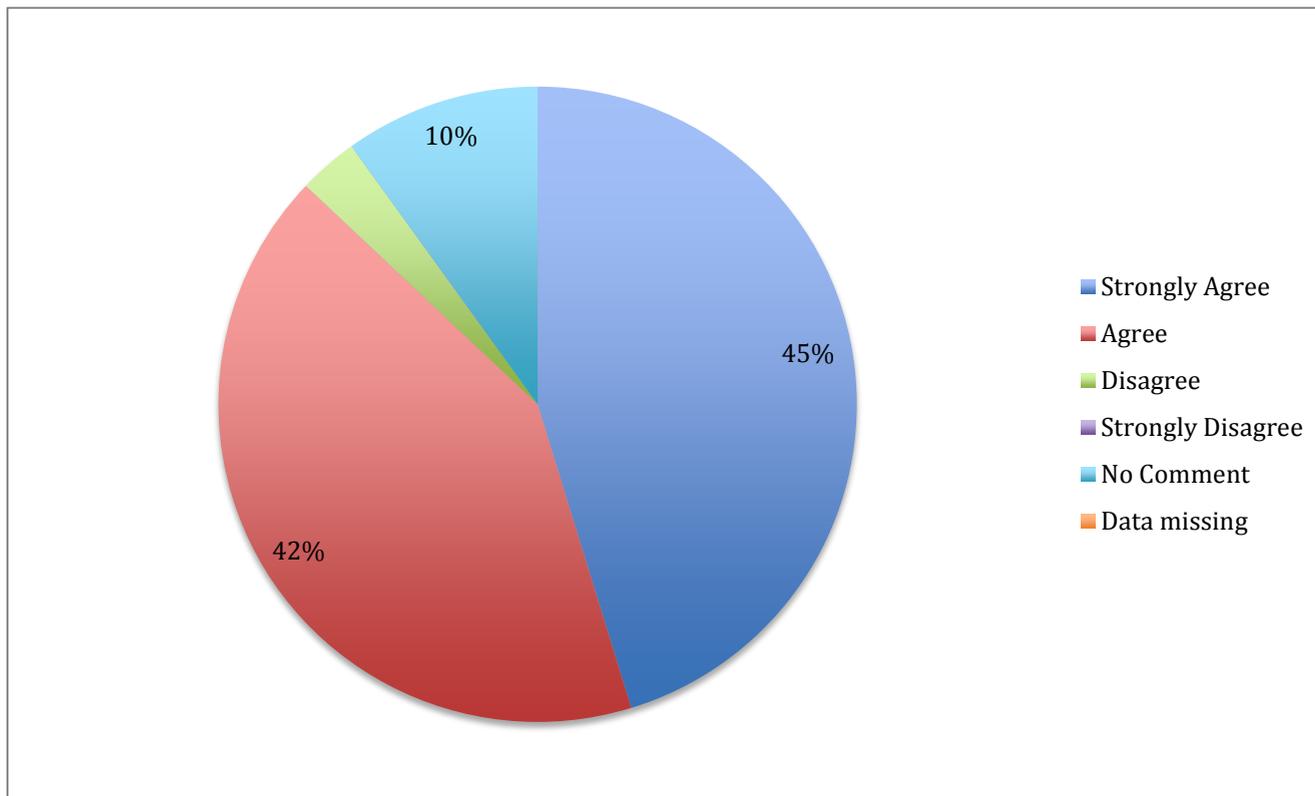
	Strongly agree	Agree	Disagree	Strongly disagree	No comment	Data missing
n	115	105	4	2	6	0
%	50%	45%	2%	1%	3%	0%

**Question 6: I have been given the right kind of support from the service.**



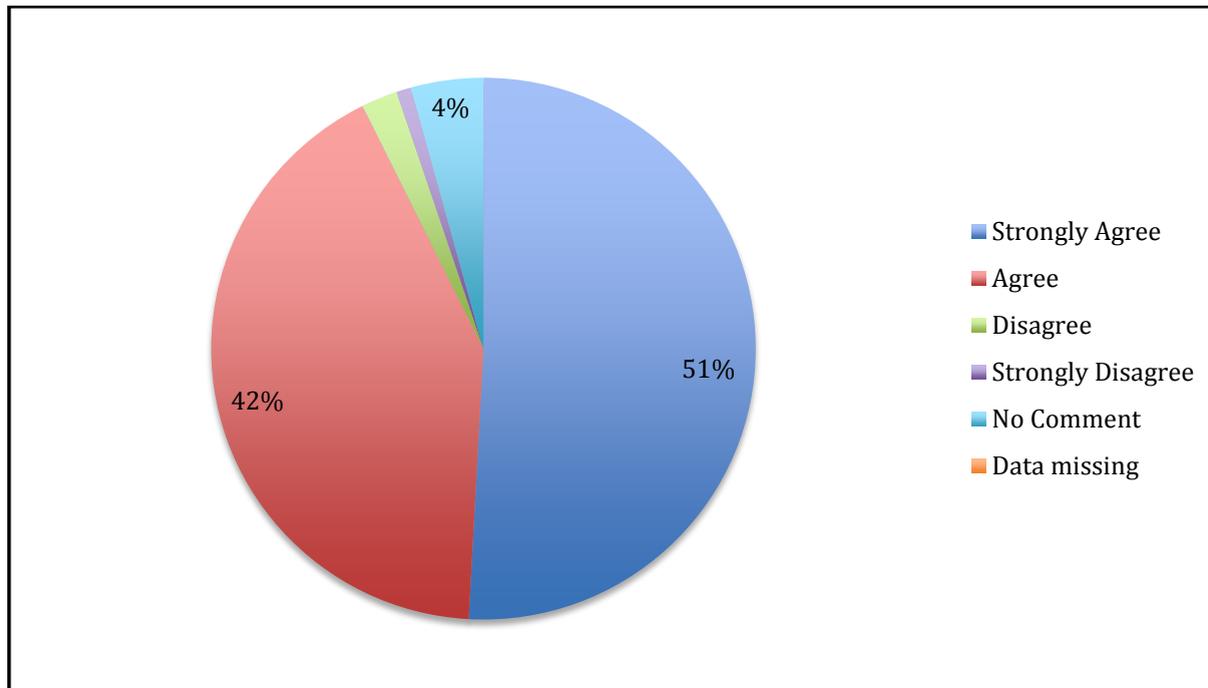
	Strongly agree	Agree	Disagree	Strongly disagree	No comment	Data missing
n	118	97	2	5	10	0
%	51%	42%	1%	2%	4%	0%

**7. The service has supported me towards achieving my goals**



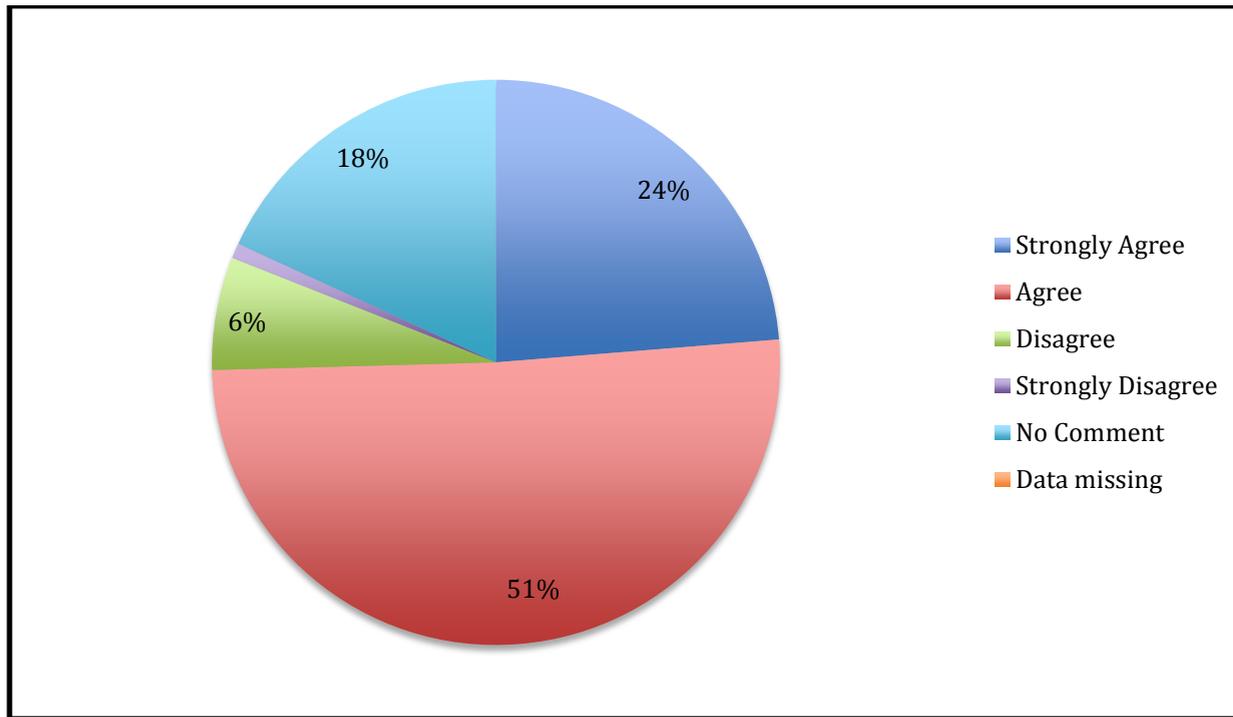
	Strongly agree	Agree	Disagree	Strongly disagree	No comment	Data missing
n	105	97	7	0	23	0
%	45%	42%	3%	0%	10%	0%

**8. I feel safe and comfortable in the physical environment of the service**



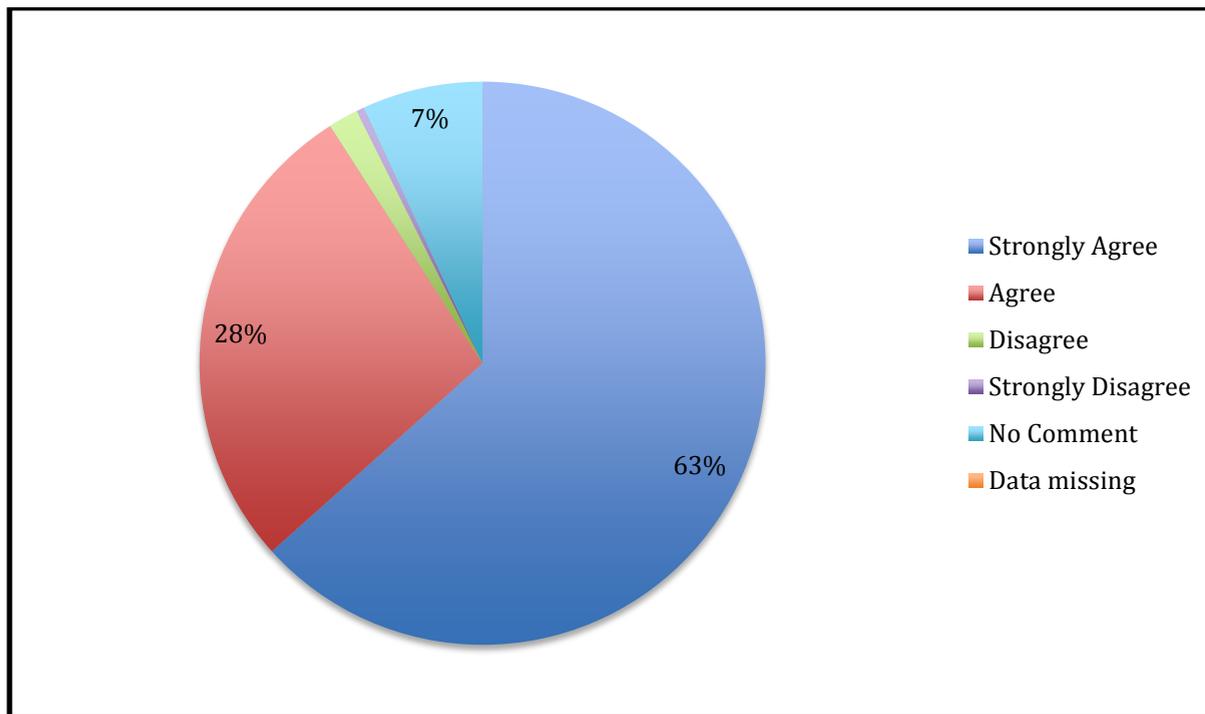
	Strongly agree	Agree	Disagree	Strongly disagree	No comment	Data missing
n	11	97	5	2	10	0
%	51%	42%	2%	1%	4%	0%

**Question 9: I have taken an active role to influence how the service is run.**



	Strongly agree	Agree	Disagree	Strongly disagree	No comment	Data missing
N	55	118	15	2	42	0
%	24%	51%	6%	1%	18%	0%

**Question 10: If I had a similar need for support in the future, I would use the service again.**



	Strongly agree	Agree	Disagree	Strongly disagree	No comment	Data missing
N	147	64	4	1	16	0
%	63%	28%	2%	0%	7%	0%

**Opened Ended Questions**

There were three opened ended questions in the survey. All the responses have been grouped into themes. Each theme is identified in relation to the numbers of references to this theme and some quotes or comments from the surveys that illustrate this theme are presented below.

**11. Comments regarding the most helpful thing about the consumers' stay at PARC:**

**What was the most helpful thing about your stay at PARC?**

The most common feedback was around the support provided by the PARC staff across all four services (over 130 comments contained this theme).

- The wonderful and supportive staff.
- The staff have been very kind and have assisted me in my recovery.

- Staff was very good at listening and understanding.
- I am absolutely happy with the staff they are amazing in the progress of my recovery. The staff and my key worker, I couldn't thank them enough for their ongoing support. I would recommend this place to anybody who is in need of respite.
- The staff don't tell me what to do. The psychiatrist was the BEST doctor I have had.
- The unconditional support from the staff.
- The understanding and respectful staff.
- The staff are very helpful and supportive. They have made me feel welcome and helped me when I've been having a bad time
- Having the staff listen to me and support me in working towards my goals
- The staff support and staff knowing how I'm feeling with little input from me.
- People supporting me to achieve my goals, to keep me going and encouraging me. I felt cared for here.

**The opportunity and environment for respite, time, rest and relaxation was another common theme (over 50 comments contained this theme):**

- R & R (Rest and Relaxation).
- Peaceful sleep.
- Getting away from the stress and being able to relax while I start getting well and start medication.
- Getting to relax.
- The support and comforting, safe environment provided to assist me with rest and re cooperation and getting back into the swing of things.
- Respite and able to re look at my situation.
- Time to think things through.
- Time away from home.
- The supportive staff and the time to work on myself.
- Time Out. Head Space.
- PARC has offered me a safe and nice environment where I could have respite. Much better than being in a psychiatric ward!

**Activities and education (over 25 comments contained this theme):**

- The CBT Groups. Being creative, use of shed!
- Participated in social activities.
- Daily walks.
- The activity sessions.
- Learning coping strategies.
- The talks in group sessions.
- Helpful staff activities.

**A safe and secure environment (over 10 comments contained this theme):**

- How safe I have been made to feel.
- No pressure, feel supported, safe.
- Feeling safe.
- People listened and believed in me, I have not felt this safe in a long time.

**General environment and facilities (over 10 comments contained this theme):**

- The feeling of privacy. ie; Own room, and setting of accommodation.
- Home like feel.
- The relaxing environment and helpful staff.

**Relationships with other clients (over 10 comments contained this theme):**

- The talks in group sessions. To talk to other people and not isolate myself.
- Being with the community and overcoming severe depression with the help of staff and fellow tenants.
- Meeting and engaging with new people.
- Talking to other clients and the relaxed environment.

**12. Comments about things consumers would like to change**

**PARC physical environment, equipment and practical issues (over 30 comments contained this theme):**

- Get a pet.
- More vegetarian meals.
- More room.
- More trees.
- Put pictures up in all the units. Bigger beds.
- Need a meditation garden area.
- Swimming pool.
- Having something to help with anger release (like a punching bag) and a new can opener.
- I would install exercise bicycle.

**Activities or having enough to do that is of interest (over 25 comments contained this theme):**

- Someone to come in on a weekly basis and do craft.
- Encourage group activities more.

- Needs constructive things to do to pass the spare time.
- Maybe more outings.

#### **Availability of Mind and medical staff (over 15 comments contained this theme):**

- Greater accessibility to staff! Depending on shifts some staff were more accessible than others.
- The frequency of check-ups by staff.
- More staff contact.
- More one on one catch up sessions with team worker.
- I would like to see more staff time 'on the floor' rather than office bound. Encouraging greater interaction between clients.
- See the doctors more often.

#### **Exit process and length of stay (9 comments contained this theme):**

- If a decision is made to discharge give more than one day's notice as most clients take time to adjust.
- The length of time you can stay.
- I'd make the stay time more flexible to reduce the stress of a deadline to be well.
- Making the exit process a little easier. Instead of being at Y-PARC for 28 days and then being discharged, perhaps slowly make going home not as rushed.

#### **Communication (7 comments contained this theme):**

- Better communication when the Communal Meeting time is and actually sticking to that time. Have an orientation day where possible, for new clients to show and explain things so people are not scared when coming in.
- More communication with families/carers
- To have the structure explained a little better at the initial meeting and to be informed at the start what PARC can and can't do!

#### **13. Other general comments and feedback?**

- I also felt supported by other clients here, there was a sense of family almost.
- Grateful my family have had some relief from caring for me. And had a break too. Terrific staff.
- I came in a caterpillar and I am leaving a butterfly!!!!
- Thank you all for your kind support. I know my Mum and Dad are grateful and me.
- Thank you all for providing me with a service. Opportunity of recovery period that wasn't an option in the past.
- I am deeply grateful for help I've received. Long life PARC!! Big thanks to everyone involved.

- Need more PARCS around Melbourne for other clients who need a place like this they can go to.
- Loved my stay at PARCs. Would rather come here than being put into hospital. A big thank you!!

## Comments about outcomes and achievements

Although not directly asked there were comments related to the consumer outcomes and achievements which is identified as another strongly represented theme.

Comments regarding outcomes and residents' achievements:

- Being able to beat my marijuana addiction. Being able to have good sleeping habits and eating properly again.
- My depression isn't as bad.
- It has helped me gain motivation and independence for myself.
- Detoxing my body from alcohol.
- Gaining the feeling of independence again.
- I have gained some self-esteem and met some great people.
- It has helped me get through another Christmas which is a very hard time for me.
- Making me realise life's not that bad.
- Less stressed-more confident.

## Some identified differences in responses from youth and adult PARCs

There were some apparent differences in responses between the youth and adult PARC exit surveys. Most notably were the comments regarding support from peers being most helpful about the youth's stay at PARC. 4 comments out of 15 mentioned this theme:

*Talking to people and having a chill.*

*Support from staff and other young people.*

*Meeting and engaging with new people.*

*Being around people who understand and are helpful.*

There were fewer responses from youth about the need for more activities when they were asked what they would change about their stay at PARC. This variation is represented by only 1 comment out of 13 mentioning the need for 'more things to do'.

## Discussion

The response rate of 55% has dropped by 3% from the 2012 report. As outlined in the method, the PARCs provide access to the completion of the surveys in different ways. This may be contributing to the number of surveys collected at the different PARCs but also may impact on the data. PARC A once again returned the highest response rate; however there was an 8% decrease in their returns, which could be attributed to the extended survey collection period. PARC C returned

the lowest response rate which indicates that this may be due to the process rather the language barriers as discussed in the previous report as PARC B provides the most services to consumers from a CALD background but does not have the lowest response rate.

The findings suggest that PARCs are still achieving high levels of consumer satisfaction, especially in relation to the attitudes and behaviour of the staff. Questions regarding staff suggested that in over 95% of cases staff were doing very well in providing support, demonstrating respect and building good relationships with consumers and that consumers felt they were being listened to. This was also represented in the qualitative comments about what was most helpful about their stay:

*Having the staff listen to me and support me in working towards my goals.*

*The understanding and respectful staff.*

*I am absolutely happy with the staff they are amazing in the progress of my recovery. The staff and my key worker, I couldn't thank them enough for their ongoing support. I would recommend this place to anybody who is in need of respite.*

Another common theme within the qualitative responses about what was most helpful was the opportunity for respite, rest and relaxation. This may relate to the positive outcomes found in both the 2012 and 2013 reports for question 8 '*I feel safe and comfortable in the physical environment of the service*'. If allowing consumers that 'time-out' to focus on recovery is something the PARCs is doing well, perhaps we could be asking why and what can we continue doing to provide this feeling.

The previous report raised the potential need for improvement in addressing the spiritual and cultural needs of the consumers at PARCs. These latest survey results have produced only a marginal difference, and once again produce a large proportion of 'no comment' responses demonstrating that this is an area which may need further exploration as to how the PARCs can better understand the consumers cultural and spiritual needs and if this is something that is of importance to the consumers.

Some survey response data has a decreased representation of positive (*strongly agree* or *agree*) responses by 5% or more. Question 7 '*The service has supported me towards achieving my goals*' saw a 5% decrease in positive responses due to a 6% increase in the response 'no comment'. Question 10 '*If I had a similar need for support in the future, I would use the service again*' has a positive response decrease of 7% with a 'no comment' increase of 6%. The most significant decrease in positive responses however, is Question 9 '*I have taken an active role to influence how the service is run*'. This question saw a positive response decrease of 10%, due to an 8% increase in the response *no comment*. The *disagree* responses to Question 9 had only raised 1%, suggesting possible ambiguity about what is meant by having an influence on the service. It may be useful to gain a better understanding from consumers about what this means to them, how they see they may be able to have an influence on the service and whether this is something of importance to them. The exit surveys in themselves are a tool for consumer influence and feedback. Providing the results to consumers to demonstrate their ability to have a voice must be a priority along with focus groups in order to build a broader understanding of the common results.

The greatest representation of comments regarding what consumers would change about their stay at PARC was aspects of the physical environment, practical issues and suggestions for additional equipment. This theme was also highly represented in the 2012 report data. There appears to be a slight reduction in the number of comments regarding the provision of activities in response to the qualitative question about what the consumer would change, however this still was once again strongly represented. Interestingly however, there are also many comments about the activities and education (such as CBT groups) being a helpful part of the stay at PARC, particularly from PARC A.

Another theme apparent in the qualitative data about what consumers would change, although not as prominent, was that of access to staff. The comments seem to relate more to clinical staff such as:

*I know that the doctors are busy but I would have preferred to see them more often, other than that, it's pretty good.*

*I would like to see more staff time 'on the floor' rather than office bound. Encouraging greater interaction between clients*

The comments regarding access to clinical staff were greatest from PARC A. The other comments relating to staff and organisational procedure were regarding the exit process, length of stay and communication, for example:

*To have the structure explained a little better at the initial meeting and to be informed at the start what PARC can and can't do!*

*Making the exit process a little easier. Instead of being at YPARC for 28 days and then being discharged, perhaps slowly make going home not as rushed.*

*Discharge planning was poor and not planned effectively. Poor communication between staff, client and family members.*

*I'd make the stay time more flexible to reduce the stress of a deadline to be well.*

The comments regarding communication do not correlate with the quantitative findings in question 4. 'I have been given relevant and sufficient information about the service' which found that 96% either agreed or strongly agreed to this statement. It may be beneficial to discuss discharge planning and communication further within a focus group.

The findings from the open-ended question tended to confirm the findings from the other questions. They are particularly positive about interactions with staff, for example:

*I would like to thank all staff for the support and encouragement that they have given me.*

*My heart felt gratitude and thank you for this program. I have created courage, endurance strength and power again. I am shining again and ready to face the world.*

*I cannot honestly say/write enough good things about PARC. Just a final thank you very much to everybody involved.*

*Thank you for your time and effort and I hope not to see you again. (In the nicest way) Hang on to the staff you have!!!*

### **Discussion about the differences in findings between youth and adult PARCs**

The difference in results between the adult and youth PARCs would indicate that the youth PARCs, which have a focus on and expectation around participation in activities, are meeting the needs of consumers in this area, whilst the adult PARCs may still need to place more emphasis on their activity programs. The other outstanding difference between the adult and youth PARC qualitative comments about what was most helpful was regarding relationships with other consumers. Although this was also a theme for the adults it was too much less of a degree. These results indicate the importance of providing ways for young people to build on peer support whilst in PARCs, a concept that makes sense considering their developmental stage and the importance of belonging amongst their peer group.

## Conclusion

The four Mind PARCs that participated in this trial can once again be very proud of the feedback they received from consumers via the exit survey. The responses expressed very strong support from these respondents about PARC providing a safe, relaxing and supportive environment for their recovery journey. This positive feedback received is important as it can highlight what is being done well and encourage learning about how the PARCs can continue to provide that level of service. Areas with potential for improvement can also be acknowledged and considered, to make the stay at PARC for consumers a positive experience which empowers the consumer to work towards their goals for recovery.

There have been limitations to this study. First it is important to recognise that evidence of positive consumer satisfaction is not, in itself, sufficient to establish the effectiveness or accessibility of treatment. Consumers with no base for comparison may be satisfied with services that are 'ineffective' as determined by more objective outcome evaluations.

Therefore the survey findings leave other evaluation questions unanswered. Especially those the commonwealth and state governments have recently identified as what community managed services need to demonstrate: Mental and emotional health, employment and training, housing and social inclusion<sup>2</sup>. Even so, the Exit survey has proved to be a relatively easy method to get involved in evaluation, receive timely feedback and see the benefits. It also has the potential to inform a more comprehensive outcome evaluation. It is important to also recognise the limitation the number of results being collected can place on the findings. At this stage, we are only capturing a little over half of the views of the consumers exiting the PARCs. Increasing this percentage should be a priority to obtain a complete overview of the consumer's experiences.

The findings from the 2013 exit survey reveal that there is a strong similarity in results to the 2012 survey. The areas highlighted as needing further feedback from consumers once again are the questions of whether the PARCs meet the cultural and spiritual needs of the consumer and whether the consumers feel they can take an active role in how the service is run.

Improving the degree to which consumers can influence services and achieve greater empowerment could be more readily addressed and would certainly be consistent with Mind's Model of Recovery Oriented Practice framework (Mind Australia, 2012). In order to effect change in this area we would need to consider the short stay nature of PARCs and the partnership roles. There is potentially an important role here for peer support.

The survey findings have raised the question of whether demographic questions should be included. Demographic questions were avoided in order to reduce the burden on the consumers in completing the survey and to encourage their confidence in its anonymity. Demographic data is also available elsewhere. But this does not mean that the survey cannot be linked with demographic data in future. However, at this stage it is recommended that the survey be kept simple to encourage a high response rate and consideration be given to on line availability in order to improve access and response rates.

Another consideration is the further development of the online survey. As the 16-25 year-old consumers are more likely have access to the internet or an email account a trial online exit survey could be rolled out with the Youth PARCs. It will be interesting to compare the data considering the differentials this may create due to the time lapse from exit to survey completion and increased anonymity.

The Youth PARC in Frankston continues to provide a Family and Carer survey by post and the data collected will be included in the next PARC exit survey report.

Consumer feedback posters have been created based on the findings in this report. These will be provided to the participating PARCs to display in a communal area for current consumers. Providing this feedback will hopefully provide consumers with a sense of being able to influence how the service is run and feel and to feel that they have a voice. This has

<sup>2</sup> Brophy, L. and Meoller-Saxone, K. (2012) Using outcome measures in Mind Australia: Discussion paper November 2012.

the opportunity to positively influence the response rate as people staying at PARCs know that the feedback is considered analysed and reported back to consumers.

Lastly, it is recommended that focus groups are organised at each of the PARCs, presenting this data to current or previous consumers to better understand the quantitative questions that are producing lower positive responses and the identified areas of PARCs services with potential for improvement identified within the qualitative data.

### **Next steps**

- Discuss methods of providing the exit survey to consumers and attempt to achieve uniformity across the PARCs with how these are made available.
- Continue to use the exit survey and expand to other PARCs with a regular summary being provided to staff, consumers and family/carers (6 monthly).
- Provide feedback to staff and PARC consumers on the survey, through the poster representation of findings in communal areas where they can encourage further feedback and discussion.
- Further development of the Family/Carer exit survey.
- Trial and potential development of the survey online and making this available as an alternative option to a paper based survey.
- The organisation of focus groups with PARC consumers to discuss areas of ambiguity within the survey results and identified areas for improvement such as:
  - consumers cultural and spiritual needs;
  - the consumer's influence on how the service is run;
  - what safety and security means to the consumer;
  - activities;
  - Discharge planning.
- Collaboration with public mental health service partners via a workshop to feedback findings, further develop recommendations and develop a joint action plan.
- Explore opportunities for extending evaluation activities, particularly in relation to using outcome measures focused on the overall aims of PARC.

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