

A proposal for a best-evidence model of care and program logic for supported accommodation for people released from prison

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Background: Release from prison often presents multiple and reinforcing challenges: substance use issues, poor mental and physical health, barriers to employment, and unstable housing. Supported accommodation (SA) seeks to address these co-occurring issues; however, there is a lack of methodologically rigorous evidence to guide service delivery. One way to increase utility of evidence is to co-design a model of SA which is both standardised by best-evidence and able to be tailored to suit services circumstances. We describe the development of a proposed best-evidence model of care (MoC) and program logic for SA for people released from prison.

Description of Model of Care/Intervention: Evidence from a systematic review, interviews with clients of an SA service, and consultation with service providers was synthesised to develop a draft MoC that was embedded into a program logic. Both the MoC and program logic were refined in a workshop with SA providers and researchers.

Effectiveness/Acceptability/Implementation: The MoC comprised 5 best-evidence core components that could be standardised across any SA service, each operationalised by service-specific activities to suit their own circumstances. The program logic comprised key client needs that the SA service is targeting, a clear rationale for why core components would be effective (mechanism of change) and measures to assess processes and outcomes.

Conclusion and Next Steps: The development and uptake of a best-evidence model of SA positioned within a clearly defined program logic may help engender a larger and more rigorous evidence-base for SA, in turn improving outcomes for people released from prison.

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