



**Evaluation of the
Family Mediation Referral Project
Process Evaluation Report**

November 4, 2015

Prepared for:

The Legal Services Society of British Columbia

Table of Contents

Executive summary.....	i
1.0 Introduction.....	1
2.0 Brief overview of MED REF.....	1
2.1 Client and project profile	3
3.0 Methodology.....	7
3.1 Document and data review.....	7
3.2 Key informant interviews	7
3.3 Client interviews	7
4.0 Findings.....	8
4.1 Implementation	8
4.2 Early indications of outcomes.....	14
5.0 Conclusions.....	27
5.1 Conclusions on implementation of MED REF.....	27
5.2 Conclusions on early indications of outcomes.....	28
6.0 Recommendations to further enhance the implementation process.....	30
Appendix A — MED REF logic model	
Appendix B — MED REF evaluation matrix	
Appendix C — Interview guides	

Executive summary

This report presents the process evaluation findings for the Legal Services Society (LSS) of British Columbia's Family Mediation Referral (MED REF) pilot project. MED REF is a province-wide service that refers low-income people to family mediation services, and provides six hours of LSS funding for pre-mediation meetings and mediation sessions. The project focusses on clients who are financially eligible, willing to mediate, and have legal issues that are ineligible for referral to legal representation — including property, debt, asset division, and spousal support — that could be resolved through mediation.

The evaluation looked at the implementation of the MED REF pilot project from late November 2014 to mid-June 2015, assessing its effectiveness and efficiency during that period. The lines of evidence included a review of key documents and the project database; interviews with key informants (LSS personnel and external stakeholders); and interviews with clients whose matters were referred to the mediation project.

The process evaluation led to several conclusions regarding the implementation of the MED REF pilot project.

Conclusions on implementation of MED REF

Efficiency and effectiveness at the mediation coordinator stage. Most clients spend more than a month at the mediation coordinator stage. LSS is responding to this challenge by adopting a 90-day limit on getting clients from intake to mediation. The coordinator position is also being moved internally to LSS. It remains unclear how these changes will balance efficiency with the need to educate and encourage parties to participate in mediation — a process that is delicate and time consuming.

Low intake levels. Project intake was lower than planned and may be hampered by several factors, including the launch of LSS's new information system and a lack of referrals from some local agent offices. Based on its current performance, the project would need to increase intake four-fold to meet its target of 160 mediations per year, which does not seem likely.

Uncertainty over sufficiency of LSS funding for mediation. Six out of seven clients who completed mediation used all of their hours. In four of these cases, all issues were resolved. Mediators find six hours to be barely sufficient, leading them to provide services or prep time at no cost to clients who would otherwise have to pay for services.

Undefined partnership. Mediate BC and LSS have different understandings of the project partnership. Mediate BC is keen to play a larger role in strategic oversight as a subject matter expert.

Lack of support for independent legal advice and agreement drafting. Clients are advised to receive independent legal advice (ILA) on agreements reached during mediation. If court orders are required, clients need to seek agreement drafting services. Neither of these services is available through Family Duty Counsel or Family LawLINE.

Conclusions on early indications of outcomes

The intent of the process evaluation in considering early progress toward the achievement of outcomes was primarily to assist in identifying any potential pilot improvements and ongoing quality assurance. As such, conclusions on the early indications of outcomes are briefly summarized below in point form:

- ▶ Legal issues referred to the project are within the project mandate, and clients find the application process quick and easy.
- ▶ Clients find the information provided easy to understand, and they appreciate plain language explanations. Clients feel supported, and mediators observed that clients have a good understanding of the mediation process.
- ▶ Most clients (68%) received at least one referral to another family law resource. Most commonly, clients were referred to LSS's Family Law website, Family LawLINE, or another government agency.
- ▶ Clients who are undecided for long periods of time tend not to proceed to mediation. Cases that did not proceed to mediation took double the amount of time at the mediation coordinator stage (64 days), compared to those that proceeded to mediation (30 days). LSS's 90-day limit between intake and referral to a mediator is more than adequate.
- ▶ Longer term data are needed to determine whether there has been increased access to mediation. So far, there has also been insufficient use of the sliding scale to determine whether or not it is perceived as an affordable means of continuing mediation beyond LSS funding. Also concerning is the lack of data on client satisfaction.

Recommendations to further enhance the implementation process

Recommendation 1: LSS and Mediate BC are encouraged to meet and develop mutually acceptable terms for the project partnership.

Recommendation 2: The Client Information System (CIS) should be used to track whether or not intake staff are asking relevant cases if they are willing to try mediation, and recording client responses. Cases that are referred to intake by another organization should be recorded, and the organization that made the referral should be tracked. A refresher presentation and Q&A sessions with potential referral points should be conducted, with local agent offices, community partners, and Justice Access Centres (JACs). Potential local-level efforts to raise the awareness of MED REF services should be identified.

Recommendation 3: Other family mediation services with the goal of better informing the MED REF model and targets should be identified.

Recommendation 4: Performance monitoring and reporting on key indicators, such as the average time spent at the mediation coordinator stage, should be implemented.

Recommendation 5: There should be a follow up with MED REF mediators about the adequacy of funding for mediation, their experience with the sliding scale, and the effect of financial imbalance on the mediation process.

1.0 Introduction

This report presents the process evaluation findings for the Legal Services Society (LSS) of British Columbia's Family Mediation Referral (MED REF) pilot project. This evaluation is one of five evaluations of pilot projects implemented under the Justice Innovation and Transformation Initiatives (JITI) being conducted.

The MED REF evaluation includes a process evaluation, focussing on implementation and early progress toward achieving outcomes, and a summative evaluation, which will focus on the outcomes achieved. This report presents the findings of the process evaluation and covers the pilot project's activities from late November 2014 to mid-June 2015.

2.0 Brief overview of MED REF

This section provides a snapshot of MED REF, as it was implemented in November 2014, to provide further context for the process evaluation report. As a result, changes to the model that occurred in mid-2015 are not addressed here, but are discussed later in relation to responses to implementation challenges.

MED REF is a province-wide service that refers low-income people to family mediation services and provides six hours of LSS funding for pre-mediation meetings and mediation sessions. The project focusses on clients who are financially eligible, who are willing to mediate, and who have legal issues — including property, debt, asset division, and spousal support — that are ineligible for legal representation contract, and that could be resolved through mediation.

The project is delivered in partnership with Mediate BC. Under the initial project design, Mediate BC was responsible for assessing whether cases are or are not suitable for mediation, calculating a sliding scale rate that may be used by clients beyond the six hours of LSS funding, and arranging for a private mediator through Mediate BC's family roster. The project lists the following as its objectives/outcomes:

- ▶ increasing access to high-quality mediation services for people with low incomes
- ▶ ensuring that participants are satisfied with the process and the outcomes
- ▶ enabling participants to resolve their family issues without going to court
- ▶ helping clients to achieve timely and just resolutions to family disputes in a manner consistent with the best interests of children (if any)
- ▶ ensuring that the criteria for service is clear and consistent
- ▶ ensuring that clients are guided to the right service at the right time
- ▶ ensuring that clients are guided to the service with as few stops as possible
- ▶ ensuring that service will be complementary and not duplicative¹

¹ LSS, "Justice Innovation Initiatives - 04 MD REF - Mediation Referrals Project Charter - February 27, 2015."

As described below, the project is delivered through several stages, each involving different staff at LSS or Mediate BC. The following describes some of the key stages or operational aspects of the project during its first six months of operation²:

- ▶ **Intake.** The process begins when a potential client contacts LSS intake (through the LSS call centre in Vancouver, the regional centre in Terrace, or local agent assistants), and describes their family law situation. If the person is financially eligible for legal representation, but their issues do not fall within LSS coverage guidelines, the intake workers provide a general description of the mediation process and ask whether the individual is interested in trying mediation. If the client is interested, the intake worker sends the case to the provincial supervisor for exception review. Intake workers may also refer a matter to exception review if a client's eligibility is unclear.
- ▶ **Exception review.** The provincial supervisor is responsible for conducting the exception review to determine whether the client is eligible for six hours of LSS-funded mediation under the project. The provincial supervisor determines the urgency of the client's matter and considers individual issues, such as mental/physical disability, the ability to self-represent, and spousal support. Eligible individuals are referred to the mediation coordinator at Mediate BC for more information on the mediation process and to determine the appropriateness of mediation. If individuals do not qualify for mediation under MED REF, they are advised that mediation is available on a sliding scale directly through Mediate BC. All cases involving violence receive a contract for representation.
- ▶ **Record keeping.** The MED REF project pilot administrator is responsible for maintaining client records in the pilot project database. This duty includes creating the client record after the exception review, updating the client record when parties decide whether or not to pursue mediation, and entering case summary information once the mediation is completed or otherwise ends.
- ▶ **Mediation coordination.** The mediation coordinator liaises with the provincial supervisor and other LSS staff, reviews cases being referred to mediation, and conducts high-level screening for violence and appropriateness. The mediation coordinator is responsible for contacting the applicant, explaining the mediation process (what it is and is not), explaining possible outcomes, and providing additional material on mediation. If the LSS client (Party 1) is interested and is deemed a good candidate for mediation, the mediation coordinator works with the client to contact the other party (Party 2). In some cases, Party 1 will contact Party 2 about mediation, while in others (upon Party 1's request), the mediation coordinator will contact Party 2, performing the same steps as with Party 1, including inviting and encouraging them to participate in mediation, informing them of the mediation process, and assessing their suitability for mediation.

If both parties are interested and amenable to mediation, the coordinator assists the parties in selecting a mediator, requests a contract from the LSS provincial supervisor, and provides the chosen mediator with a summary of the case and client contact information. The mediation coordinator is also responsible for calculating the sliding scale mediation rate,

² In mid-2015, the MED REF model was revised, bringing the mediation coordination role into LSS, rather than operating externally through Mediate BC. These changes happened as data collection for the process evaluation were nearing completion, and therefore were not a factor in data analysis, except to note changes to the process going forward. See page seven, paragraph four for further details on changes to the mediation coordinator position.

which may be used if clients want to proceed beyond the six hours of LSS-funded mediation.

- ▶ **Roster family mediators.** Upon receiving information from the mediation coordinator, and receiving a contract from LSS for mediation services, the mediator contacts each party to arrange for separate pre-mediation meetings to ensure participants understand and are ready for the mediation process. If appropriate, joint, shuttle, or distance mediation sessions are held to resolve the identified family law issues. Once mediation is completed or otherwise ends, the mediator provides LSS with a completed case summary form and bills for their services. There are currently 31 mediators who have agreed to provide mediation services for six hours at the LSS rate.

The logic diagram in Appendix A provides further information on the flow of program activities, outputs, and intended outcomes of the program.

2.1 Client and project profile

Table 1 provides an overview of MED REF intake since the pilot's launch in November 2014 to June 16, 2015. The clients in the table below include only the individuals who went through the LSS intake process and were referred to the mediation coordinator; demographics for the other party are not included in the pilot database. Of the 103 clients referred to the project:

- ▶ the vast majority of clients (82%) are female;
- ▶ over half (59%) are 41 years or older, while a quarter (27%) are in their thirties;
- ▶ most (62%) reported their marital status as separated; and
- ▶ most referrals (88%) are from communities in southern BC, with a large proportion (42%) coming from six communities, including Vancouver (9%), Surrey (8%), Kelowna and Victoria (both 7%), and Kamloops and Vernon (both 6%); the remaining 58% of clients came from 40 other communities.³

³ The breakdown among the other 40 communities is as follows: two communities with four clients each; two communities with three clients each; 10 communities with two clients each, and 26 communities with one client each.

Table 1: Client profile				
	All clients (n=103)		Clients that proceeded to mediation (closed files only) (n=11)	
	#	%	#	%
Gender				
Male	19	18%	1	1%
Female	84	82%	10	91%
Age				
18 to 25	4	4%	-	-
26 to 30	10	10%	1	9%
31 to 40	28	27%	-	-
41 to 50	30	29%	5	46%
Over 50	31	30%	5	46%
Marital status				
Separated	64	62%	9	82%
Married	16	16%	2	18%
Single	14	14%	-	-
Common-law	5	5%	-	-
Divorced	4	4%	-	-
Geography				
Vancouver	9	9%	-	-
Surrey	8	8%	-	-
Kelowna	7	7%	1	9%
Victoria	7	7%	-	-
Kamloops	6	6%	2	18%
Vernon	6	6%	2	18%
Other communities (n=40)	60	58%	6	55%
Note: Percentage may not equal 100% due to rounding.				

Nearly half of the 31 available mediators (14 or 45%) have received contracts under the project. On average, each of these 14 mediators has been assigned two mediations each. Among the 103 clients referred to the mediator coordinator, half have not proceeded to mediation (50%), approximately 20% are waiting for a decision for mediation, and 30% have proceeded to mediation. Of these cases, 11 have been completed or ended, while another 20 remained open as of June 16, 2015 (see Table 2 below).

Table 2: Project profile		
Intake	#	%
Total legal aid offices	33	
Total legal aid offices referring to MED REF	22 (66%)	
Total intake	103	
In person	73	71%
Phone	30	29%
Mediators	#	%
Total mediators participating in MED REF	31	
Mediators who have received a contract under MED REF	14 (45%)	
Average number of cases per mediator	2.2	
Case status	#	%
Proceeded to mediation, file closed	11	11%
Proceeded to mediation, file open	20	19%
Pending decision of parties to participate	21	20%
Did not proceed to mediation	51	50%
Total	103	100%

Half of the clients identified property division (56%) and/or spousal support (50%) as their legal issues. Child support (42%), custody (35%), and access (27%) were other commonly identified legal issues. Among those clients who attended mediation (n=11), property division and spousal support (both 82%) were the most common legal issues addressed, followed by child support and parenting time (both 45%), and debt division and pension (both 36%).

Further analysis found a majority of clients (n=61 or 59%) had more than one legal issue identified. Two-thirds of clients (n=40 or 66%) with more than one identified legal issue had property-related issues. Spousal support (n=31 or 51%), child support (n=21 or 34%), and custody (n=16 or 26%) were other common issues among clients with more than one identified legal issue. About 38% of clients (n=39) had a single legal issue identified; just under half (41%) of those clients identified having a property division issue.

Table 3: Client legal issues				
	Legal issues identified (n=103)		Legal issues addressed (closed files only) (n=11)	
	#	%	#	%
Property division	56	56%	9	82%
Spousal support	50	50%	9	82%
Child support	42	42%	5	45%
Custody	35	35%	-	-
Access/parenting time, contact	27	27%	5	45%
Debt division	-	-	4	36%
Pension	-	-	4	36%
Possession of home	-	-	2	18%
<i>Family Maintenance Enforcement Act</i>	1	1%	-	-
Restraining order	1	1%	-	-
Disability pensions	-	-	1	9%
Sale of family residence	-	-	1	9%
Support arrears	-	-	1	9%
Blank	3	3%	-	-
N/A - mediation not commenced	N/A	N/A	1	9%

Note: Clients may have multiple issues identified. Totals will sum to more than 100%.

3.0 Methodology

The process evaluation consists of three lines of evidence: a document and data review, interviews with key informants (LSS staff and external stakeholders), and interviews with clients. A MED REF Project Working Group (WG) — comprised of representatives from LSS, British Columbia Ministry of Justice (MOJ), and Mediate BC — is guiding the evaluation process. PRA held consultations with the WG to refine the key evaluation documents that would guide the evaluation: the logic model and evaluation matrix, which are in Appendices A and B, respectively. The WG also reviewed and approved the data collection instruments used for the process evaluation. The data collection instruments are included in Appendix C.

3.1 Document and data review

PRA reviewed relevant documents produced by the pilot project, including the project manual and charter, descriptions and diagrams of the MED REF model, and forms used by the pilot to collect information on its clients and the types of assistance provided. The data review for the process evaluation focusses on available data in the pilot project database. The summative evaluation will include data from the LSS CIS database, which was launched in April 2015.

3.2 Key informant interviews

The process evaluation includes interviews with key informants to obtain their perspectives on pilot project implementation and early evidence of outcomes. Four interviews were conducted by telephone with internal stakeholders at LSS (including the MED REF project lead, project owner, pilot administrators, and provincial supervisor), and six interviews were conducted with external stakeholders, including representatives from Mediate BC, the Vancouver JAC, and three family roster mediators. Key informant interviews were completed in June 2015.

3.3 Client interviews

To obtain feedback from MED REF clients, PRA conducted individual telephone interviews of about 20 minutes each with clients whose matters were referred to the mediation project. Interviews focussed on the clients' experience and satisfaction with the MED REF services, and how the services might be improved. To improve the response rate, a flyer explaining the evaluation and the potential for being contacted for an interview was provided to mediators for distribution to clients.

The interview sample was based on all clients who had a closed MED REF file as of June 16, 2015. This sample included clients who were referred to the project, but who did not proceed to mediation, as well as clients who attended and completed or ended their mediation. The sample was also screened by the mediation coordinator to ensure contact would be appropriate. The resulting sample included 40 clients, and resulted in 15 interviews. Of these clients, five proceeded to mediation (three of these completed their mediation) and 10 did not proceed to mediation.

4.0 Findings

The process evaluation findings are presented based on the evaluation questions, which focus on the implementation of the pilot project and its early progress toward achieving its intended outcomes.

4.1 Implementation

1. Has the project been implemented as intended in Year 1? What challenges were identified and how were these addressed?

The evaluation found a number of challenges that were encountered during the project's implementation. These are summarized below.

Longer than expected time at the mediation coordinator stage

Internal and external key informants recognized that a key issue during project implementation was the longer than expected amount of time that files remained at the mediation coordinator stage (between the exception review and the issuing of contracts for mediations), which slowed overall project throughput.

Key informants recognized that one of the most time-intensive tasks at the mediation coordinator stage is making contact and discussing mediation with both parties. According to the pilot database, contacting and discussing mediation with LSS clients took 13 days on average, while contacting and discussing mediation with the other party took 14 days on average (see Table 8 below for further discussion).

Key informants explained that reaching clients by phone can be challenging (resulting in telephone tag), because clients might be in the process of relocating or have not made up their minds about mediation. Also, discussing the prospect of mediation was described as a delicate process, involving screening for violence and encouraging the potential of mediation, which often requires a substantial change in mindset for clients who typically came to LSS looking for a lawyer. Clients and the opposing parties also need time to gather information for the mediation application process.

In addition to the innate time required for contacting, screening, and encouraging parties to try mediation, the evaluation found that the project, as originally designed, had no defined time limit on the contacting process. LSS is attempting to address the time taken at the mediation coordinator stage by putting the onus on clients to contact the mediation coordinator. LSS is also introducing a limit of 90 days between intake and getting to mediation. Applicants who exceed the 90-day cap would need to reapply if they still intended to pursue mediation.

Lack of support for independent legal advice and agreement drafting

A key concern among external key informants was the service gap between clients reaching an agreement in mediation, and having that agreement finalized and drafted by a lawyer. Following mediation, the terms of the agreement are recorded, and mediators advise each party to seek independent legal advice to ensure they are not giving up any significant legal rights without their knowledge. Mediate BC indicates that not all families need to have a formal binding agreement coming out of mediation, and that many are able to move ahead with a Memorandum

of Understanding (MOU) listing the areas of agreement. However, if court orders are required, then a filed binding agreement may be necessary, which would require clients to seek agreement drafting services (also provided by lawyers).

Interviewed mediators expressed concerns about the adequacy of summary advice from Family Duty Counsel (FDC) or Family LawLINE in addressing what are often complex legal issues. Documentation from May 2014 indicates that FDC are limited to providing summary advice on property issues, which LSS notes may not be sufficient.⁴ Summary advice does not meet the requirements for independent legal advice (ILA) as defined by the Law Society, so FDC cannot provide a Certificate of ILA on a mediated agreement. Also, FDC cannot draft agreements for clients (LSS provides instructions for drafting agreements on its website). Independent legal advice and drafting written agreements are beyond the scope of service for FDC.

The evaluation found that, among the three interviewed clients who completed mediation, one client believed they had their settlement agreement reviewed by a lawyer through a JAC. The evaluation examined the databases for the Expanded FDC⁵ and Expanded Family LawLINE projects and found that none of the clients listed in the MED REF pilot database (as of June 16, 2015) are listed as accessing services in relation to coaching for mediation or substantive advice on a mediated agreement. However, the pilot databases show that a few MED REF clients (n=6) accessed Expanded Family LawLINE or Expanded FDC and received substantive advice on legal issues and/or procedural advice regarding court processes in relation to parenting issues, property division, spousal support, child support, or divorce.

This challenge remains unresolved.

Undefined partnership

The evaluation found that Mediate BC and LSS have different understandings of the partnership for the pilot project. While Mediate BC is listed as a partner in the project charter, there is a lack of clarity in the roles and responsibilities between the partners. Among its responsibilities in the MED REF project manual, Mediate BC must liaise between project partners and identify areas of the project process that can be improved. However, the manual does not detail Mediate BC's potential role in strategic oversight as a subject matter expert — a role Mediate BC is keen to play in the project. For example, there is no agreement on what the role of Mediate BC should be in project discussions and decisions, including changes to project funding, estimations for annual mediation targets and budgeting, project priorities, and key policy issues.

This challenge remains unresolved.

⁴ LSS, "Justice Innovation and Transformation Initiatives — Policy and Processes Template — 04 MED REF - Mediation Referrals Draft d03," 6–7.

⁵ The EXP FDC pilot includes family advice lawyers, who can provide up to three hours of free legal advice for eligible individuals who need advice on parenting time, contact, access, guardianship, custody, child support, property division (limited advice), tentative settlement agreements, and court procedures. Clients with incomes above the financial guidelines may receive up to one hour of advice if they are in mediation and received a referral through a family justice counselor.

Capacity at pilot administration stage

The evaluation found that the project initially underestimated the workload of the pilot administrator, who also performs other roles within LSS. This led to a backlog of information to be input into the pilot database. This issue was resolved by assigning another resource to assist with the entry of contract and case summary information, as well as with troubleshooting data entry issues.

Going forward, the pilot administrator role will take on additional roles and responsibilities, including assessing cases and the performing duties of the mediation coordinator position, which is being moved in-house.⁶

No further details are available on how LSS plans to integrate these roles and responsibilities into the pilot administrator role.

Launch of CIS

- ▶ Key informants indicate that the implementation of LSS’s new CIS in April 2015 significantly slowed the overall intake process, resulting in increased caller wait times (from an average of eight minutes to an average of 47 minutes), leading to a decreased volume of clients reaching LSS intake for triage to appropriate services. This contributed to fewer clients being referred to the MED REF project. Data from the pilot database confirms that there was a considerable drop in MED REF intake around this time, from 22 clients in April 2015 to five clients in May, and three clients as of mid-June 2015 (see Figure 1 below).

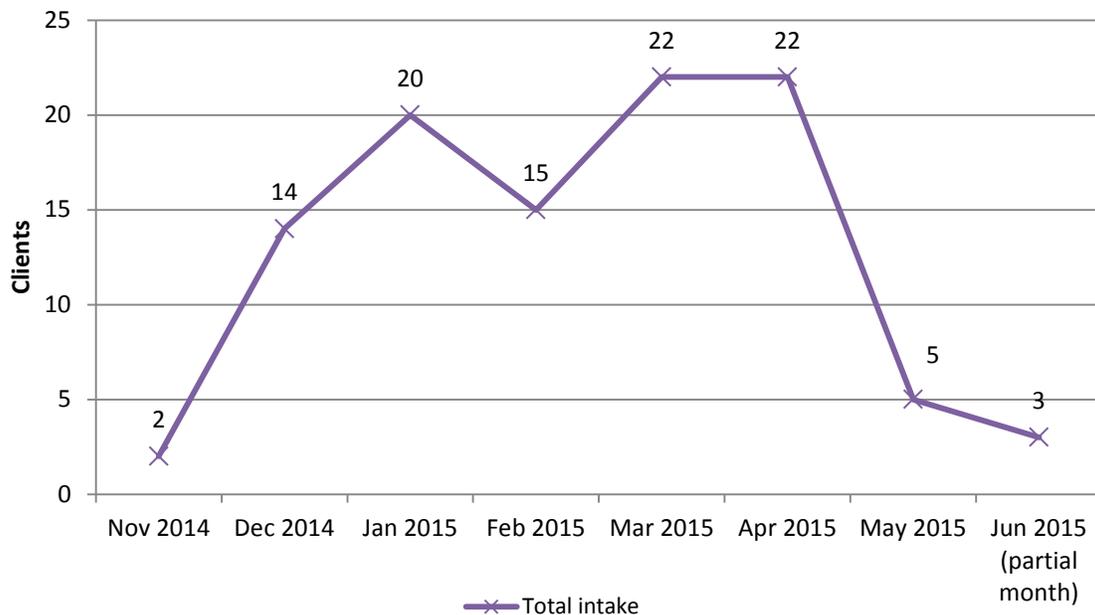


Figure 1 — MED REF intake

⁶ LSS, “Justice Innovation and Transformation Initiatives 04 MED REF — Family Mediation Referral Decision Record June 18, 2015.”

2. What external factors have influenced the implementation and success of the project?

FJCs and MED REF are complementary, but referrals from FJCs are unknown

Key informants identified Family Justice Counsellors (FJCs) as an external factor influencing the implementation and success of the project. FJCs are accredited mediators employed by Family Justice Services Division at JACs and Family Justice Centres to provide mediation on specific family law matters, including guardianship, parenting arrangements, and child and spousal support.⁷ During the design phase of MED REF, it was clarified that the pilot project would provide complementary mediation services for matters involving property division, debt division, and complex spousal support, thereby offering another potential referral resource for FJCs in matters that fell outside the FJC mandate.

3. Do stakeholders feel properly prepared for their role in the program and consider the available information/tools for performing their role helpful?

Internal staff satisfied with preparation; more outreach to FJCs

LSS staff were satisfied with the amount of preparation they received for the pilot project. Some indicated that staff training is ongoing, or that the project did not require much additional training for LSS staff. For example, since intake staff already had the fundamental skills for the intake process, they only needed to consider the availability of another option for callers who fell outside LSS eligibility criteria. Other key informants referred to specific manuals that were created for their position in the project, including manuals for the provincial supervisor and the pilot administrator.

Although LSS staff indicated that a “Question and Answer” document was developed by the pilot project to help explain MED REF services to external stakeholders, including FJCs, and although training was provided to FJCs and JAC management, there was a suggestion that additional outreach efforts among JACs and Family Justice Centres would help to clarify MED REF eligibility criteria.

4. Did the project have sufficient resources and capacity to meet demand and any intended targets?

The process evaluation found that the issue for the pilot project is not whether there is or is not sufficient capacity to meet demand, but whether the project is or is not sufficiently reaching potential demand. The ability of the project to reach its full capacity may be limited by the fact that the pilot project had been in operation for approximately seven months (at the time of the process evaluation). Yet key informants are concerned about project uptake being lower than expected, with LSS noting that the project may not be able to reach its targeted number of mediations this year. Between November 2014 and June 2015, 31 cases proceeded to mediation, while the project

⁷ FJSD, “Family Justice Services Division — Offices and Divisions — Justice Services Branch - Ministry of Justice.”

budgeted for 160 mediations annually⁸ at the LSS rate.⁹ Since uptake is lower than expected, the budgeted resources are sufficient to meet current demands. However, LSS lacks reliable information¹⁰ for estimating potential demand for family law mediation involving property, making it difficult for the project and the evaluation to determine what level of resources will be sufficient in the longer term.

Overview of use of LSS funding:

► **More hours used in mediation than pre-mediation, but use varies by case outcome**

As indicated above, the MED REF project provides clients with up to six hours of mediation, which includes pre-mediation preparation and the mediation sessions. Pre-mediation preparations can include additional safety screening, assessing appropriateness for mediation, and scheduling dates and locations for mediations.

The pilot database shows that, among cases that were approved for mediation (n=11; closed files only), on average 2.3 hours were used in pre-mediation sessions and 3.1 hours were used in mediation sessions. Further analysis shows that cases that ended prior to completing mediation (including cases where some progress was made, no issues were settled, or some issues were settled) tended to use more hours in pre-mediation sessions (average 3.5 hours) compared to those that completed their mediation (1.7 hours). Those clients who completed their mediation (including cases where some or all issues were settled and/or an agreement was drafted and/or signed) tended to use more hours toward mediation (average 4.2 hours) than those cases that ended prior to completion (1.0 hrs).

Table 4: Use of LSS hours (closed files only)

Amount of time	Pre-mediation (n=11)		Mediation (n=11)	
	#	%	#	%
None	-	-	3*	27%
1.0 hours or less	2	18%	-	-
1.1 hrs to 2.0 hrs	5	45%	1	9%
2.1 hrs to 3.0 hrs	1	9%	1	9%
3.1 hrs or 4.0 hrs	2	18%	2	18%
4.1 hrs to 5.0 hrs	-	-	2	18%
5.1 hrs to 6.0 hrs	1	9%	2	18%
Total (cases)	11	100%	11	100%
Average	2.3 hrs		3.1 hrs	

* Includes three cases that ended following pre-mediation sessions

⁸ LSS, “Justice Innovation Initiatives — 04 MD REF — Mediation Referrals Project Charter — April 8, 2014;” LSS, “Justice Innovation Initiatives — 04 MD REF — Mediation Referrals Project Charter — February 27, 2015.”

⁹ \$83.90/hour to a maximum of six hours. LSS, “Disbursements Tariff;” LSS, “General Terms and Conditions.”

¹⁰ During the design phase of MED REF, LSS attempted to calculate the number of family clients who were denied a family referral and who disclosed property in their financial assessment. The results were considered by LSS to be an underestimate because LSS does not always open a case file if the only issue is property division. LSS, “Justice Innovation and Transformation Initiatives — Policy and Processes Template — 04 MED REF — Mediation Referrals Draft d03.”

► **External key informants indicate six hours of LSS funding is barely sufficient**

Prior to implementation, LSS adjusted the number of funded hours from four hours to six hours at the Tier 1 LSS rate (\$83.90/hour)¹¹ to allow mediators additional time to interview and prepare clients for mediation. While internal key informants were unsure about the sufficiency of the six hours or believed it was too early to determine whether the six hours of funding was sufficient to complete a mediation, external key informants indicated that, in practice, more time is needed to complete the administrative side of the mediation. This includes scheduling the mediation sessions, preparing a summary of issues after each mediation session and “homework” for the next session, and filling out the paperwork required for the MED REF project (for LSS and Mediate BC). Mediators described the six hours of LSS funding as barely sufficient, noting that more complex cases generally require more time. Each of the interviewed mediators (n=3) indicated that they had provided services or preparation time at no cost to the project, in order to avoid clients having to pay for services. LSS indicated that the sliding scale was put in place in recognition that many cases would not reach agreement within six hours.

Mediators also raised the issue of having to pay for their own facility costs under the project. In private practice, facility costs are typically covered by the client, or in some cases mediations are held at the offices of clients’ lawyers. This is typically not an option for LSS clients. Although LSS can provide a \$25 standard disbursement for mediators, facility rental costs are around \$150 per day.

► **Lack of completed cases to reliably determine if six hours of LSS funding is sufficient for clients**

The pilot database shows that six of the seven clients who completed their mediation used all of their six hours. Among these six cases, four resolved all their issues and two settled no issues, but made progress. One of these cases was unwilling to pay for further services. During the client interviews, clients who attended mediation (n=5) were asked how far they got in their mediation, using the free hours provided by LSS, and whether that time was enough to address the family law issues. Two of these clients clearly indicated that they had enough time to address their family law issues.

LSS staff exceptionally busy

Internal key informants described LSS staff as being exceptionally busy, particularly due to the five concurrent JITI projects and recent IT changes, but they believed there are no capacity issues for staffing. It is unclear how moving the mediation coordinator position in-house will affect LSS capacity.

Mediation coordinator may require more than 18 hours per week

The initial design of MED REF allotted the mediation coordinator 18 hours per week (three days per week) to perform the duties assigned to the position, which includes contacting and collecting information from both parties, screening and encouraging clients, following up on unreturned calls, recording information for Mediate BC and LSS, and coordinating referrals to family mediators. Mediate BC indicated the mediation coordinator worked a considerable amount of time beyond these 18 hours, in order to stay on top of the caseload. As a result, Mediate BC suggested that the role would be more suitable as a full-time position.

¹¹ Based on Disbursement Tariff and quick reference table in LSS General Terms and Conditions LSS, “Disbursements Tariff”; LSS, “General Terms and Conditions.”

As noted above, LSS is moving the mediation coordinator role in-house and transferring the roles and responsibilities to the pilot administrator. This transition was still in its early stages during the process evaluation, so little information was available about the transition.

5. To what extent do the current processes and structure of the MED REF project support its efficient and effective delivery?

Streamlining mediation coordinator position

As indicated above, key informants believed that the longer than expected time taken at the mediation coordinator stage affected the efficiency of the MED REF project. That being said, clients and mediators indicated that the mediation coordinator at Mediate BC was effective at preparing clients for mediation. Clients indicated that the mediation coordinator was informative, explained the process well, and was understanding and emotionally supportive. Mediators indicated clients were coming to them well prepared for mediation.

Since the mediation coordinator at Mediate BC is leaving the project, the position will be brought in-house and combined with the pilot administrator role. These revised roles and responsibilities are intended to streamline the application and approval process, because it will eliminate duplicative record keeping between LSS and Mediate BC, will require clients to contact the mediation coordinator (not vice-versa), and will put a 90-day limit on the time allotted for clients to transition from intake to mediation.

4.2 Early indications of outcomes

The following sections discuss early indications of MED REF outcomes.

6. Are appropriate cases being streamed to mediation services under MED REF?

Intake is a primary source of referral and client awareness, but some offices not referring

Key informants and clients consistently identified LSS intake as the primary means of clients becoming aware of the services available under the MED REF project. The pilot database shows that most intake occurs in person (69%), while a considerable volume (29%) occurs via phone, which aligns with LSS's standard intake proportions. The Vancouver office had the highest level of intake (31%), most of which (25 out of 32) was received via the call centre. The pilot database contains a field to track where clients are referred from, but this field is blank for all records.

The pilot database also shows that most of LSS's local agent offices (67%, or 22 out of 33) are making referrals to the project. Offices without referrals may represent a gap in the MED REF referral process, given these communities may have cases appropriate for referral to MED REF. Specifically, 11 local agent offices had no record of referring clients to the project. That said, the pilot database shows that clients from four of these communities had been referred to the project via the call centre or another regional office.

Table 5: Project intake		
Intake	#	%
In person	73	71%
Phone	30	29%
Total intake	103	100%
Referring offices		
Total local agent offices	33	
Total offices referring to MED REF	22 (67%)	
Office locations	#	%
Vancouver	32	31%
Kelowna	11	11%
Kamloops	8	8%
Victoria	8	8%
Surrey	6	6%
Nanaimo	4	4%
Terrace	4	4%
Vernon	4	4%
Abbotsford	3	3%
Dawson Creek	3	3%
Langley	3	3%
Prince George	3	3%
Courtenay	2	2%
Cranbrook	2	2%
Penticton	2	2%
Port Alberni	2	2%
Campbell River	1	1%
Hazelton	1	1%
Nelson	1	1%
New Westminster	1	1%
Port Coquitlam	1	1%
Salmon Arm	1	1%
Total	103	100%
Note: Percentage may not equal 100% due to rounding.		

Key informants also mentioned that referrals have come from private bar lawyers, court staff, a judge, and community partners, although these are not tracked in the pilot database. A few clients mentioned hearing about the service through friends or family. It is unknown whether the project received referrals from FJCs.

It is worth noting that at least one mediator has made efforts to advertise the project in their community newspaper, release a local radio ad, and promote the project among local service organizations. It is notable that this community (Kelowna) had the highest number of in-person intake (n=11) among all communities with legal aid offices.

Evaluation unable to assess other potential gaps in intake

Aside from identifying 11 local agent offices that have not made a referral to the project, the evaluation is unable to determine whether there are other issues in the intake process that are affecting the volume of referrals to the project. The pilot database does not contain information on potentially useful measures, including: 1) the number of eligible clients who were made aware of the option to mediate during intake and, of those who were made aware, how many chose to pursue this option and how many did not; and 2) if at intake clients were already aware of the mediation option, who it was that informed them of this option. LSS indicates that the new CIS tracks the number of clients who underwent an exceptions review for MED REF and the number of clients who did not proceed to the mediation coordinator stage, because the exceptions review found that they did not meet the MED REF referral criteria. These data were not available for the process evaluation.

Referrals received are appropriate

As mentioned earlier, the criteria for a referral to MED REF includes being financially eligible and having a family law matter, such as property and debt divisions not covered by legal aid coverage guidelines. The exception review also considers individual issues, such as mental/physical disability, ability to self-represent, spousal support, and whether a client is willing to try mediation.

The *Family Law Act* requires that a proper screening for violence be conducted. Screening for violence takes place at multiple stages of the MED REF process, ranging from disclosure at the time of intake, to discussions with the mediation coordinator, and also during initial contact with the mediator. This approach is necessary, as sometimes it takes time for clients to feel ready to disclose this information.

As noted earlier, half of the referred clients identified property division (56%) and/or spousal support (50%) as legal issues, while a considerable proportion also identified child support (42%), custody (35%), and access (27%) as legal issues. All of these legal issues are within the scope of the MED REF project mandate.

Overall, internal key informants indicated that, although there were some referrals early in the project that could be considered inappropriate (due to violence) the appropriateness of referrals has improved over time. For the few clients who were referred to the mediation coordinator, but should not have been, these clients were described as being confused because they were looking for a lawyer or legal advice. For those seeking legal advice, the mediation coordinator referred the person to a service to receive legal advice.

7. Are participants receiving referrals to mediation in a timely manner and are participants satisfied with the referral process?

Referrals to mediation are timely

Most clients indicated that they learned about MED REF services before going to court, a statement which aligns with data from the pilot database that shows (among clients who completed their mediation) most pursued mediation before court proceedings. These clients also believed they learned about these services early enough in the family law matter.

The general consensus among key informants was that there was no single correct time for clients to be referred to mediation, because there are so many variables at play among the client and the other party, such as where they are in the legal process, when they separated, how long divisive issues have been building, and whether both parties have mindsets conducive to mediation.

Triage and LSS intake application process is quick

Key informants commented that the process from intake to the completion of the exception review happened quickly, usually within 24–48 hours. Clients also indicated that their application and referral process was quick and easy. Internal key informants indicated that initially there were some challenges with the assessment, triage, and application process, but these issues were resolved through sending out communications to clarify the process and to ensure that there was good communication between the provincial supervisor and the mediation coordinator.

Overview of time spent at the mediation coordinator stage

► **Most pending decisions have file open dates exceeding three months**

As Table 6 below shows, 20% of clients referred to the project had not decided whether or not to proceed to mediation (as of June 16, 2015). Key information about these clients (e.g., time taken to contact applicant, contact other party, calculate sliding scale) is not entered until clients decide whether or not they will proceed to mediation. Although LSS tracks the date the exception review decision was made, this was not included in the pilot data for the process evaluation, and therefore, there is no reliable way to calculate the amount of time between completion of the exception review and referral to a mediator. Based on the date the file was opened, many of these clients (66%) have had their file open for three months or more.

► **Clients who take the longest time at the mediation coordinator stage tend to not proceed to mediation**

As indicated earlier, there is a general sentiment among key informants that the mediation coordinator stage took longer than expected. The mediation coordinator stage begins after a file is referred from the exception review and ends when the client decides not to pursue mediation or when the client is referred to a mediator. The pilot database shows that clients who decide not to pursue mediation take, on average, double the amount of time (64 days) at the mediation coordinator stage, compared to files that proceed to mediation.

Table 6: Case decisions			
	#	%	Average total days at the mediation coordinator stage
Did not proceed to mediation	51	50%	64 days
Proceeded to mediation	31	30%	30 days
Pending decision for mediation by parties	21	20%	-
Total	103	100%	

The most common reasons for clients to not proceed to mediation include one or both parties declining to participate (31%) and one or both parties not being located or not responding to contact attempts (20%). Notably, six cases (12% of cases that did not proceed to mediation) planned to resolve or resolved their issues through other means and therefore did not require mediation services.

Table 7: Reasons for not proceeding to mediation (n=51)		
	#	%
One or both parties declined to participate	16	31%
One or both parties cannot be located or have not responded to contact attempts	10	20%
One or both parties not ready for mediation	8	16%
Parties to resolve/resolved issues through other means (counselling, negotiations, reconciliation)	6	12%
Mediation is not appropriate	4	8%
Issue outside mandate	2	4%
Client provided with legal aid lawyer	2	4%
One or both parties lack the necessary authority to settle	1	2%
Change in parties' family circumstances — children put in foster care	1	2%
No reason provided	1	2%
Note: Percentage may not equal 100% due to rounding.		

► **Longest duration occurs when attempting to contact applicants and other party**

The pilot database shows that, among clients who proceeded or did not proceed to mediation (n=82), it took on average 13 days (mean 35 days) to contact, screen, and discuss mediation with applicants. By comparison, among the 41 cases where contact was made with the other party, it took an average of 14 days (mean 26 days) to contact, screen, and discuss mediation with the other party (see Table 8 below). Considerably less time was spent acquiring financial information for the sliding scale (nine days) and matching the family with a mediator (seven days).

Duration (days)	Contacting applicants, discussing mediation, screening (n=82)		Engaging other party, encouraging mediation, obtaining agreement (n=41)		Acquiring financial information, calculating sliding scale rate (n=9)		Matching family with a mediator (n=31)		Overall duration at mediation coordinator stage (n=82)	
	#	%	#	%	#	%	#	%	#	%
None (0 days)	-	-	-	-	1	11%	-	-	-	-
1 to 7 days (1 week)	25	30%	17	41%	3	33%	17	55%	5	6%
8 to 14 days (2 weeks)	20	24%	5	12%	4	44%	11	35%	5	6%
15 to 21 days (3 weeks)	2	2%	2	5%	-	-	1	3%	7	9%
22 to 30 days (4 weeks)	2	2%	6	15%	1	11%	-	-	9	11%
31 to 60 days (1 to 2 months)	11	13%	6	15%	-	-	1	3%	27	33%
61 to 90 days (2 to 3 months)	12	15%	1	2%	-	-	-	-	16	20%
More than 90 days (more than 3 months)	9	11%	3	7%	-	-	-	-	12	15%
No data	1	1%	1	2%	22	-	1	3%	1	1%
Mean duration	35 days		26 days		9 days		7 days		52 days	
Median duration	13 days		14 days		8 days		7 days		43 days	

► **Parties that proceed to mediation typically have very short contact periods**

Nearly all of the clients who were approved for mediation (27 out of 31) were contacted, screened, and informed of mediation within 14 days. In most of these cases (71% or n=22), the other party was also contacted and screened within 14 days. Among the 31 clients who proceeded to mediation, 26 (84%) had a total contact period of 30 days or less, which includes the duration taken to contact and inform both parties.

► **Time spent at the mediation coordinator stage decreases over time**

The pilot database shows that the total number of days spent at the mediation coordinator stage is decreasing over time. This trend is particularly noticeable among cases that did not proceed to mediation. Figure 2 below shows that the number of cases spending more than two months (61 days or greater) at the mediation coordinator stage has steadily decreased over time, while the number of cases spending two months or less (60 days or less) has steadily increased. The evaluation could not determine the precise reasons for these changes over time. Mediate BC indicates that this trend may be due to the mediation coordinator having more time to close dormant files.

Note that the chart below uses the file open date as a measure of time, because the date of the exceptions review decision was not included in the pilot data for the process evaluation. The outcome evaluation will use the date of the exceptions review decision.

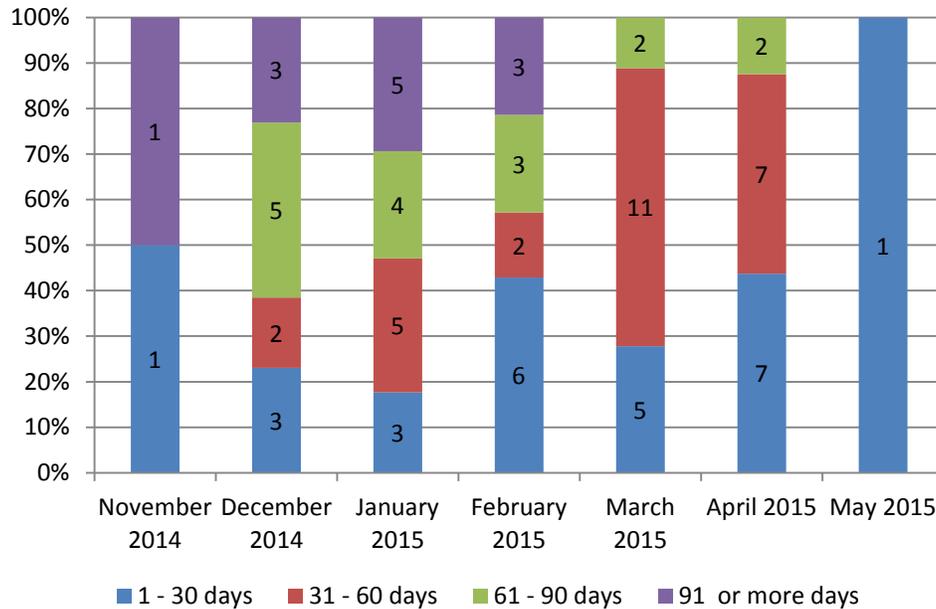


Figure 2 – Time spent at the mediation coordinator stage

► **Whether or not clients proceed to mediation, they are satisfied with amount of time at mediation coordinator stage**

Among the 15 clients interviewed for the evaluation, those who proceeded to mediation tended to spend less time during the contacting phase (average of 10 days for applicant and 11 days for other party) than clients who did not proceed to mediation (average of 54 days for applicant and 44 days for the other party). Despite these differences in time, nearly all of the interviewed clients said they were satisfied with the amount of time between the application process and receiving the results of their mediation application. Clients who proceeded to mediation (n=5) were also satisfied with the amount of time between the application being approved and the beginning of the mediation sessions.

8. To what extent has the program increased access to affordable mediation services for people with low incomes?

Project has not increased access to affordable mediation to the extent that was intended

Key informants explained that, since there are no other similar mediation services for low-income British Columbians, the project has increased access to affordable mediation services. LSS explained that 60% of clients applying for legal aid for family law matters are turned down, and now some of these clients have access to a free alternative that they might not have originally considered. However, as noted earlier in the report, overall project intake is lower than expected, and with 30% of project intake proceeding to mediation, the project is far from

meeting the planned target of 160 mediations per year. As such, the project is not on track to increase access to affordable mediation to the extent that was intended.

That being said, as indicated earlier under Question 4, the current target of 160 mediations per year is based on a budgetary exercise rather than estimates based on real-world performance. The project has no established target for intake and lacks an intended conversion rate.¹² Mediate BC reports that the project’s 30% conversion rate is quite good, being on par with its Distance Family Mediation Project (which ranged from 30% to 36%).¹³

The process evaluation also tried to answer this question by examining whether the rate of intake and cases proceeding to mediation generally increased over time, which could help demonstrate the project’s progress toward increasing access to affordable mediation. As Figure 3 below illustrates, intake and cases proceeding to mediation generally increased within the first five months of the project; however, these trends took a dramatic downward turn following April 2015, coinciding with the launch of LSS’s new CIS. Longer term data is needed to determine how trends in intake and cases proceeding to mediation have fared in the months following the launch of CIS.

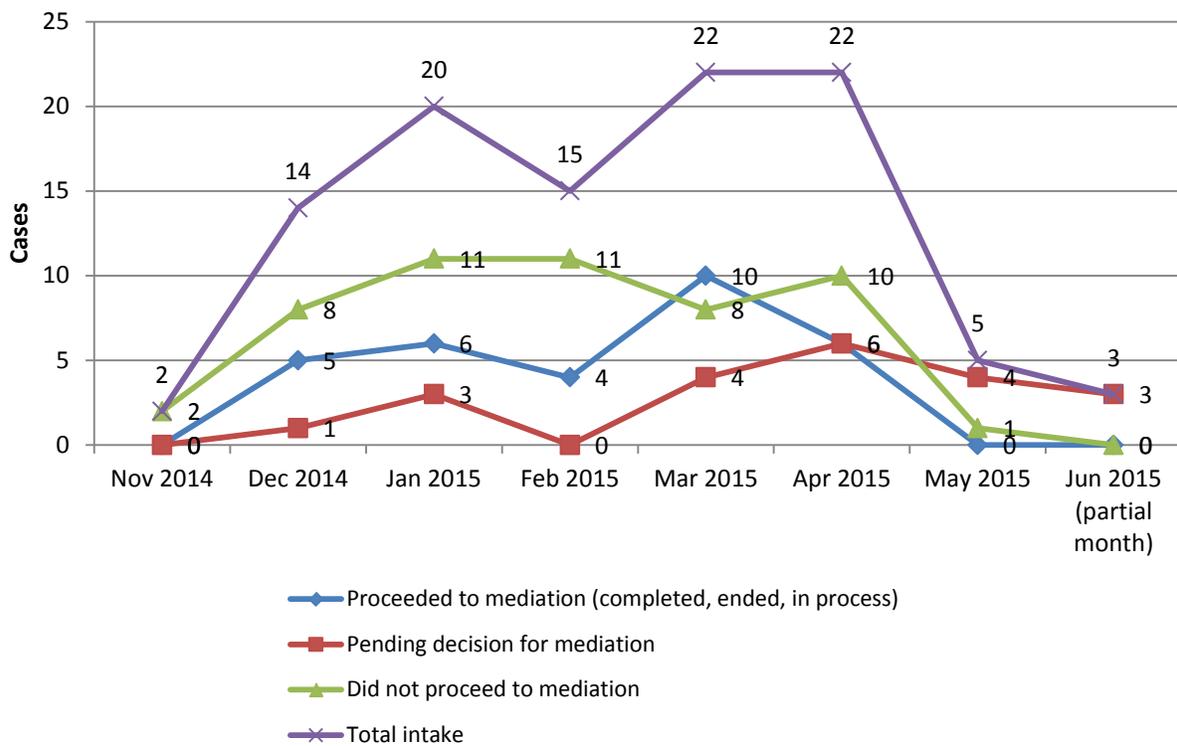


Figure 3 — MED REF intake and case status

¹² The conversion rate is the proportion of clients that proceed to mediation out of all clients referred to the project.

¹³ Catherine Tait Consulting, “Evaluation of the Distance Family Mediation Project: Report on Phase III of the Technology-Assisted Family Mediation Project.”

More cases using the sliding scale are needed to determine its affordability

For clients who wish to proceed with mediation beyond LSS's six hours, Mediate BC calculates a sliding scale rate for each party, based on total income and net assets (assets less debts), and household size. The role of the sliding scale within MED REF is to provide affordable mediation beyond the hours covered by LSS, thus preserving access to affordable mediation for low-income people who have started, but not yet completed, their mediation.

As of June 16, 2015, the pilot database contained one in-progress case that intended to use the sliding scale; however, there was no data entered for this record. Key informants also mentioned a few cases that had used the sliding scale. The pilot database also contains a field to track why parties did not proceed beyond the six hours of funding. Two cases indicated that the clients either would not pay outside the initial six hours, or the parties could not afford to pay the sliding scale.

During the client interviews, clients who ended or completed their mediation after using all of the available hours from LSS said they did not use the sliding scale, because they already reached agreement or believed no further progress could be made with the other party.

9. Are participants adequately prepared and informed prior to, during, and after the mediation session?

Participants feel adequately informed and prepared for mediation

Interviewed clients generally found that the information provided during the intake and assessment process was explained well and easy to understand. They appreciated the use of plain language explanations. Interviewed clients who were referred to a mediator (n=5) generally believed they received enough help, support, and information.

The mediation coordinator indicated that clients' understanding of the mediation process varied client-to-client, depending on their level of comprehension, their willingness to listen, and if they had previously received any legal advice. Even though some clients appeared to be overwhelmed by the information, they still appeared to be digesting what was provided. It was observed that, although the project had seen only a few clients with English as their second language, these clients tended to feel more lost and uncertain than other clients. Mediators observed that by the time clients arrived at the mediation stage, they had a pretty good understanding of the mediation process, thanks to the efforts of the mediation coordinator.

Internal key informants believe clients are receiving referrals to other resources; pilot database confirms most are receiving referrals

Internal key informants were confident that clients were being referred to Family LawLINE and FDC to receive additional family law support and were following up on these referrals.

According to the pilot database, most clients (68%) received at least one referral to another family law resource. Most commonly, clients were referred to LSS's Family Law website (46%), Family LawLINE (13%), or another government agency (10%). FDC did not appear in any of the clients'

referral records. Notably, 32% of clients had no information about referrals; this was more common among clients who did not proceed to mediation than clients who proceeded to mediation.

To better understand why clients who did not proceed to mediation had a greater tendency to have no recorded referral to other family law services (n=19), the evaluation examined the reasons these cases did not proceed to mediation. The largest group of these cases (n=7) involved clients that could not be contacted or located, while two more cases involved parties resolving or intending to resolve their matter through other means (n=1) or being provided with a legal aid lawyer (n=1), which helps clarify why these cases may not have received a referral. For the remaining nine cases, the reason for no referral are less clear, including the cases that were deemed not appropriate (n=4), the cases in which one or both parties were not ready for mediation (n=3), and the cases in which one or both parties declined to participate (n=3).

Table 9: Referral to other services

	Proceeded to mediation*		Did not proceed to mediation		Overall	
	#	%	#	%	#	%
LSS Family Law website	15	48%	23	45%	38	46%
LSS Family LawLINE	5	16%	6	12%	11	13%
Other government agency	1	3%	7	14%	8	10%
Private lawyer — advice	5	16%	-	-	5	6%
JAC — resource room or self-help	-	-	4	8%	4	5%
Private lawyer — draft agreement	3	10%			3	4%
Advocate or community agency	1	3%	1	2%	2	2%
Access Pro Bono	1	3%	1	2%	2	2%
Family Justice Counsellor	-	-	2	4%	2	2%
Immigrant settlement or multicultural organization	1	3%	-	-	1	1%
FMEP	-	-	1	2%	1	1%
MCFD social worker	-	-	1	2%	1	1%
Blank	7	23%	19	37%	26	32%
Total	31	-	51	-	82	-

* Includes cases that were completed, ended, or were still in process as of June 16, 2015.
 Note: N=82 because clients who are pending a decision for mediation (n=21) do not have referral information entered in the pilot database. Clients may be referred to multiple services. Totals will sum to more than 100%.

The evaluation also compared the responses of interviewed clients (n=15) to their associated referral record in the pilot database. The results showed that the client recall of referral to another service typically did not match what was recorded in the pilot database. There were two cases where client recall matched precisely with the pilot database’s referral record; there were two more cases where the interviewee had no record of referral in the pilot database, and yet recalled and followed up on a referral to duty counsel or Family LawLINE. Among the remaining cases, some clients may have forgotten about being referred, while others may have used the initial referral resource as a stepping stone to another resource, which had more of an impression on their memory than the initial resource.

10. Are participants satisfied with the mediation process and outcomes of their mediation?

Lack of data on client satisfaction

This evaluation found the project's approach to tracking client satisfaction has encountered challenges since implementation. Mediate BC designed and implemented a concise single-page client feedback form for this purpose, but the organization has received very few feedback forms from clients. Although designed by Mediate BC, the forms are distributed by mediators, who have final contact with clients. Mediators are responsible for returning completed forms to Mediate BC.

The evaluation found a number of potential issues that could affect the success of the feedback form, including the following:

- ▶ Questions specifically target clients who completed mediation, and few clients as of mid-June 2015 had completed a mediation (n=7).
- ▶ Clients have the option of taking the survey with them after mediation, with the intent that they complete and return the survey later. This option increases the risk that clients will not complete or return the survey.
- ▶ Although concise, the survey is not a fillable electronic form. Such a form would still allow hardcopy forms to be completed at the mediation, but would also allow the form to be emailed to clients, who could fill out the form electronically, and return the form via email. Such a simple convenience could increase the response rate.

Among the three interviewed mediators, one had received completed surveys from both the cases they mediated, one did not mention the surveys in relation to client satisfaction, and one hadn't received any completed surveys from clients.

Based on the client interviews, among the few clients who attended mediation (n=5), three felt the mediation process overall was helpful, because it was comfortable, professional, fair, and encouraged the other party to come to the table. The other two clients were less positive about the mediation process, due to their negative experience with the mediator or the lack of cooperation from the other party.

Three out of these five clients were not satisfied with the outcome of their mediation, because they believed progress was diminished by the other party, or they could not afford to have a lawyer review the resulting agreement. The remaining two clients were satisfied, with one client indicating that, although they did not get what they wanted, they felt that the process was supportive, that they were heard, and that they gained a greater understanding of their legal rights.

11. To what extent are participants resolving their family law issues through mediation?

Early case results are mixed, more cases and longer term data needed

As the MED REF logic diagram indicates (Appendix A), the intended outcome of the project was for participants to resolve their family law issues through mediation. As the table below shows, cases that ended prior to completion tended to have no issues settled, while cases that completed mediation were variable, with some clients settling all their issues and a few clients settling some of their issues or at least making progress toward a settlement.

Table 10: Outcome at end or completion of service

	Ended		Completed		Overall	
	#	%	#	%	#	%
All issues settled	-	-	4	57%	4	36%
No issues settled, but progress made	1	25%	2	29%	3	27%
MOU drafted and signed	-	-	3	43%	3	27%
MOU drafted, but not signed	1	25%	2	29%	3	27%
No issues settled	2	50%	-	-	2	18%
Some issues settled	1	25%	1	14%	2	18%
Written agreement drafted and signed	-	-	1	14%	1	9%
Total	4	100%	7	100%	11	100%

Among the five interviewed clients who attended mediation, one reported that their case was resolved, three cases were ongoing (either in court or heading to court), and one case remained unresolved. Among the remaining 10 clients who did not attend mediation, two cases were resolved, five were ongoing, and two were unresolved.

Stage of case remains the same

The pilot database shows there was no change in the stage of the case between the opening and closing of the MED REF file for the seven cases that completed mediation. However, as the client interviews indicated, three of the cases that completed mediation are in court or heading to court.

More cases and longer term data needed on barriers to resolution

The pilot database currently contains very little data on barriers to resolution. Among the four cases that ended prior to completion, three were affected by a party being unwilling to accept responsibility. Most of the cases that completed mediation reported no barriers to reaching agreement on the issues to be addressed.

Table 11: Barriers to resolution				
	Ended		Completed	
	#	%	#	%
Party unwilling to accept responsibility	3	75%	-	-
Lack of representation/legal advice	2	50%	-	-
Lack of support (practical, emotional, educational)	2	50%	-	-
Party unprepared for mediation	2	50%	-	-
Unrealistic expectations	1	25%	1	14%
Lack of understanding of the process	1	25%	-	-
Party emotionally unable to participate	1	25%	-	-
Power imbalance	1	25%	-	-
Insufficient time with widely disparate positions	-	-	1	14%
No barrier reported			5	71%
Total	4	100%	7	100%

Mediators identified a potential barrier that could affect MED REF clients more so than clients who can afford private mediation services. Specifically, if one spouse has considerably more financial resources than the other, this can create a power imbalance where the more wealthy party can “dig in” and wait until the LSS hours are exhausted. The circumstance in private practice differs, since both parties can afford mediation and can afford legal representation. With both parties paying private mediation rates and fees for legal counsel, both have a strong incentive to work quickly to resolve matters.

12. Were there any unintended consequences or outcomes of the MED REF project identified in Year 1?

The process evaluation did not find any unintended consequences or outcomes during the implementation of the MED REF project.

5.0 Conclusions

This section presents some brief conclusions of the process evaluation, based on the data collection and analysis performed to date

5.1 Conclusions on implementation of MED REF

The project has been successful in identifying, and in some cases resolving, important implementation challenges, such as providing additional capacity at the pilot administrator stage. It has also taken steps to improve the efficiency of the mediation coordinator stage, by introducing a 90-day time limit. That being said, the evaluation found a number unresolved issues that could continue to affect the project's implementation.

Efficiency and effectiveness at the mediation coordinator stage

Moving the mediation coordinator position in-house is intended to introduce efficiencies to the data entry process, and it will adopt a 90-day limit on getting clients from intake to mediation. However, it remains unclear how the revised position will balance efficiency with effectiveness and, specifically, the need to educate and encourage parties to participate in mediation — a process that is praised by clients and described as delicate, time consuming, and necessary by internal and external key informants.

Low intake levels

The evaluation found project intake was lower than planned and may have been hampered by several factors, including the launch of CIS in April 2015 and a lack of referrals from some local agent offices. The number of referrals from FJCs remains unknown. Furthermore, while the project has a target of 160 mediations per year, there is no targeted conversion rate. If the current conversion rate (30% as of June 2015) continues for the second half of 2015, the project would need to increase its intake four-fold to meet its target of 160 mediations per year. This amounts to 72 new clients per month between July and December 2015. This does not seem likely based on the first six months of project performance, which has received a total of 103 clients.

Lack of completed cases to reliably determine if six hours of LSS funding is sufficient for clients; external key informants indicate six hours of LSS funding is barely sufficient

The pilot database shows mixed results from the six hours of funding; six out of the seven clients that completed mediation used all their hours, and four of these cases resolved all their issues, while two settled no issues. One of these cases was unwilling to pay for further services. Mediators indicated that six hours is barely sufficient, which has led them to provide services or prep time at no cost to avoid clients having to pay for services. Longer term data — and particularly more cases completing mediation — are needed for the outcome evaluation.

Undefined partnership

The evaluation found that Mediate BC and LSS have different understandings of the partnership for the pilot project. Mediate BC is listed as a partner in the project charter and has certain roles defined in the project manual, but neither source defines Mediate BC's potential role in strategic oversight as a subject matter expert on funding allocations, priorities, and key policy issues. These are roles Mediate BC is keen to play in the project.

Lack of support for independent legal advice and agreement drafting

A key concern among external key informants was the service gap between clients reaching an agreement in mediation and having that agreement finalized and drafted by a lawyer. Mediators advise all parties to receive independent legal advice on agreements reached during mediation. If court orders are required, then a filed binding agreement may be necessary, which will require clients to seek agreement drafting services (also provided by lawyers). Clients cannot obtain these services through FDC or FLL.

Among the three interviewed clients who completed mediation, one client believed that they had their settlement agreement reviewed by a lawyer via a JAC. The evaluation examined the databases for the Expanded FDC or Expanded Family LawLINE projects. The pilot databases show that a few MED REF clients (n=6) accessed the Expanded Family LawLINE or the Expanded FDC and received substantive advice on legal issues and/or procedural advice regarding court process in relation to parenting issues, property division, spousal support, child support, or divorce. However, no MED REF clients received services in relation to coaching for mediation or substantive advice on a mediated agreement.

5.2 Conclusions on early indications of outcomes

Referrals received are appropriate and applications processed quickly

The pilot database and responses from key informants indicated that legal issues being referred to the project are within the mandate of the project, most commonly in relation to property division, spousal support, and/or child support. Interviewed clients were satisfied with the application process for receiving mediation services, indicating that it was quick and easy.

Participants adequately informed and prepared for mediation

Interviewed clients generally found the information provided during the intake and assessment process was explained well and easy to understand. They appreciated the use of plain language explanations. Interviewed clients who were referred to a mediator (n=5) generally believed they received enough help, support, and information. Mediators observed that by the time clients arrived at the mediation stage, they had a pretty good understanding of the mediation process.

Most clients are being referred to additional services

According to the pilot database, most clients (68%) received at least one referral to another family law resource. Most commonly, clients were referred to LSS's Family Law website (46%), Family LawLINE (13%), or another government agency (10%). FDC did not appear in any of the clients' referral records. Notably, 32% of clients had no information about referrals; this was

more common among clients who did not proceed to mediation. In some cases this made sense, while in other cases the reason for no recorded referral remains unclear.

Clients who are undecided for long periods tend not to proceed to mediation; LSS 90-day cap more than adequate

Cases that did not proceed to mediation took double the amount of time at the mediation coordinator stage (64 days), compared to those that proceeded to mediation (30 days). The pilot database shows that the longest periods of time occur when contacting the applicants (median 13 days, mean 35 days) and other party (median 14 days, mean 26 days). Among the 31 clients approved for mediation, 26 (84%) had a total contact period of 30 days or less, which includes the duration taken to contact and inform both parties. This suggests that a 90-day limit between intake and being referred to a mediator is more than adequate.

Lack of cases and long-term data to verify increase in access to affordable mediation or affordability of the sliding scale; lack of data on client satisfaction

Aside from the need for greater intake (as noted in previous sections), the project needs longer term data to determine whether there has been increased access to mediation. There is also insufficient use of the sliding scale so far to determine whether it is perceived as an affordable means of continuing mediation beyond the six hours provided by LSS. Also concerning is the lack of data on client satisfaction. Very few clients have returned the client feedback form.

6.0 Recommendations to further enhance the implementation process

Recommendation 1: Clarify terms of partnership.

The evaluation found that Mediate BC and LSS have different understandings of the partnership for the pilot project. LSS and Mediate BC are encouraged to meet and develop mutually acceptable terms for the partnership and record these in the project charter and project manual. Satisfaction with the terms of the partnership should be reviewed at regular meetings between LSS and Mediate BC stakeholders.

Recommendation 2: Further investigate and resolve factors contributing to lower than expected intake.

Investigate the possibility of using CIS to track whether or not intake staff are asking relevant cases if they are willing to try mediation and are recording clients' responses. Also, monitor the volume and types of cases that do not proceed past the exception review. Finally, the project should be recording which cases are referred to intake by another organization specifically for MED REF services and identifying which organization made the referral. The pilot database contains a field to track where clients were referred from, but it is blank for all cases. These measures will provide a more concrete means of assessing potential gaps in the intake process.

Consider following up with local agent offices who have low or no referrals to MED REF and determine why no referrals are being received from these areas. Consider conducting a refresher presentation and Q&A sessions with FJCs, community partners, and local agent offices that have low or no referrals. Follow up with MED REF mediators, local agent offices, JACs, and community partners to determine potential for additional local-level efforts to raise awareness of MED REF services; reviewing the advertising efforts of the mediator in Kelowna may provide a good starting point.

Recommendation 3: Further investigate the practices and experience of other family mediation services, with goal of better informing MED REF model and targets.

The first goal of this task is to investigate the intake numbers, conversion rate, and completion rate of other family mediation services (inside and outside BC) with the goal of using these to inform appropriate performance targets for MED REF. The second goal is to look at other jurisdictions to understand how other family mediation services dealing with property issues address the need for low-cost/no-cost independent legal advice and agreement drafting services. Mediate BC indicates that it is in the process of submitting a proposal to the Law Foundation to fund a project to encourage family lawyers to provide affordable unbundled legal services to support families using mediation. If successful, MED REF project partners should ensure clients are aware of how to access these services after completing mediation.

Recommendation 4: Implement regular performance monitoring and reporting on key indicators.

The evaluation recommends LSS implement (or revise if already implemented) regular monitoring and reporting (monthly or biweekly, depending on activity levels) on project intake and conversion rate, considering how these rates could better inform the project's targeted number of mediations per year.

Performance monitoring should also include regular (biweekly) analysis and reporting on average time spent at the mediation coordinator stage, with particular attention to the time taken to establish contact, screen, and encourage the applicant and the other party. It would be wise to investigate and follow up in cases where the contact period for the applicant or other party exceeds current overall means (35 days for applicants and 26 days for other party).

The caveat to this recommendation is that regular performance monitoring will require case data to be entered upon its availability. Delays in data entry will diminish the accuracy and usefulness of performance monitoring.

Recommendation 5: Follow up with MED REF mediators on the adequacy of funding for mediation and effect of financial imbalance on mediation process.

LSS is recommended to work with Mediate BC to consult with project mediators to revisit the discrete tasks typically involved in a mediator providing services to clients, and the amount of time spent on those tasks. Tasks may include preparation time (e.g., reviewing files, contacting clients, preparing session summaries or session “homework”), as well as pre-mediation meetings, joint/shuttle/distance mediations sessions, and administrative time for completing project forms. It may be more informative if mediators did this exercise for a non-complex case as well as a complex case, which mediators indicated are more time consuming. These consultations could also be used to discuss costs related to mediation facilities, to explore the frequency and reasons behind mediators providing services “pro bono” under the project, and to gather feedback on their use of the sliding scale. The results of these consultations should be used to inform whether mediators have sufficient funding to cover the cost of mediation under MED REF.

LSS is also recommended to work with Mediate BC and project mediators to learn more about the frequency and severity of financial imbalance among the cases they have mediated so far, and explore how this could be affecting the mediation process.

Appendix A — MED REF logic model

Program logic model — Family Mediation Referral

Program activities		Program outputs	Short-term outcomes	Medium-term outcomes
INTAKE AND REFERRALS	Referral and screening of potential clients	<ul style="list-style-type: none"> • # and type of information disseminated about MED REF service • # and types of cases processed by exception review , including stage of proceeding (if available) and end result of exception review • # and type of referrals made for clients who are approved for mediation 	<ul style="list-style-type: none"> • Participants receive referral to mediation services in a timely manner • Appropriate cases are streamed to mediation service • Access to family law mediation services is increased for people with low incomes 	Participants resolve their family law issues through mediation
CLIENT SUPPORT	Preparation of clients for mediation and referral of clients to other family law services or resources	<ul style="list-style-type: none"> • Total # of pre-mediation sessions and total pre-mediation hours per client • Types of other family law resources used before, during, and after mediation (e.g., Family LawLINE, FDC, private lawyers, Access Pro Bono, online, FLWS, PLEI) 	<ul style="list-style-type: none"> • Participants are prepared and understand the mediation process and believe other family law resources are helpful in understanding their legal rights throughout the process 	
MEDIATION	Provide mediation services to financially eligible family law clients	<p>Mediation</p> <ul style="list-style-type: none"> • Total # of mediation sessions and total mediation hours per client • # of and types issues being addressed by Mediate BC (incl. ongoing, ended, and completed) • # and types of services provided during mediation • # of mediations involving technology, including type of technology and reasons for using technology <p>Resolutions</p> <ul style="list-style-type: none"> • # of mediation cases by outcome at end of LSS funding (ended, completed) • # of mediation cases by outcome at the time services ended or were completed • # and type of barriers to resolution 	<ul style="list-style-type: none"> • Affordable mediation services provided for people with low incomes • Participants are satisfied with the mediation process • Participants are satisfied with the outcome of their mediation 	

Appendix B — MED REF evaluation matrix

Framework for the Evaluation of the Family Mediation Referral pilot project		
Questions	Indicators	Data sources
Implementation		
1. Has the project been implemented as intended in Year 1? What challenges were identified and how were these addressed?	<ul style="list-style-type: none"> Stakeholder opinion on challenges/improvements 	<ul style="list-style-type: none"> Interviews with internal and external stakeholders Project documentation
2. What external factors have influenced the implementation and success of the project?	<ul style="list-style-type: none"> Stakeholder opinion Project meeting minutes documenting external factors Evidence that decisions, actions, policies of external organizations/stakeholders affect the project 	<ul style="list-style-type: none"> Interviews with internal and external stakeholders Project documentation
3. Do stakeholders feel properly prepared for their role in the program and consider the available information/tools for performing their role helpful?	<ul style="list-style-type: none"> Perceptions of project partners, team members, and pilot staff involved in implementing and delivering the project 	<ul style="list-style-type: none"> Interviews with internal and external stakeholders
4. Did the project have resources and capacity to meet demand and any intended targets?	<ul style="list-style-type: none"> Stakeholder opinion that the project had sufficient resources to satisfactorily meet demand 	<ul style="list-style-type: none"> Program data Participant interviews Interviews with internal and external stakeholders
5. To what extent do the current processes and structure of the MED REF project support its efficient and effective delivery?	<ul style="list-style-type: none"> Stakeholder opinion on the current processes and structure to support the project 	<ul style="list-style-type: none"> Key informant interviews
Outcome: Participants resolve their family law issues through mediation		
6. Are appropriate cases being streamed to mediation services under MED REF?	<ul style="list-style-type: none"> Stakeholder opinion that relevant sources are aware of and directing clients to the mediation referrals and the extent appropriate cases are being streamed to mediation services Participant experience during intake and referral process 	<ul style="list-style-type: none"> Program data Participant interviews Interviews with internal and external stakeholders
7. Are participants receiving referrals to mediation in a timely manner and are participants satisfied with the referral process?	<ul style="list-style-type: none"> Duration (in days) <ul style="list-style-type: none"> Contacting applicants, discussing mediation, screening (from start to end of activity) Engaging other party, encouraging mediation, obtaining agreement (from start to end of activity) Acquiring financial information, calculating sliding scale rate (from start to end of activity) Matching family with a mediator (from start to end of activity) Duration of time (days) between date file opened at LSS to date a contract for mediator was sent to Mediate BC, and the date the mediation process ended Staff and program partners perceptions about timeliness and efficiency of referral process Participants perceptions about timeliness (i.e., well timed) and efficiency of referral process 	<ul style="list-style-type: none"> Program data Interviews with internal and external stakeholders Participant interviews

Framework for the Evaluation of the Family Mediation Referral pilot project		
Questions	Indicators	Data sources
8. To what extent has the program increased access to affordable mediation services for people with low incomes?	<ul style="list-style-type: none"> • Number, percent, and types of cases that started but didn't complete Mediate BC service, and reasons why • Breakdown on how LSS funding was used (hours used in pre-mediation vs. mediation, services provided, outcome at conclusion of LSS funding) • Percent of cases resolved within the 6 hours of LSS funding and % of unresolved cases that did not proceed beyond LSS funding and reasons (or barriers) to proceeding (or resolution) • Breakdown on use of sliding scale (total hours, sliding scale rate, frequency, average, minimum rates, maximum rates, and amounts paid) • Number and percent of cases using the sliding scale cases by level of completeness • Number and percent of cases and related reasons (or barriers) for sliding scale cases ending prior to completion, and outcome at the time of ending • Number and percent of participants satisfied with fees charged for the mediation service (by role, issues, level of resolution) • Number of clients using family law mediation services through MED REF has increased over time • Staff and partners perceptions on the affordability of mediation • Participant perceptions on the affordability of mediation • Participant perceptions about whether they would have used mediation services on their own and whether the sliding scale was affordable 	<ul style="list-style-type: none"> • Program data • Interviews with internal and external stakeholders • Mediate BC client feedback survey data • Participant interviews
9. Are participants adequately prepared and informed prior to, during, and after the mediation session?	<ul style="list-style-type: none"> • Client and stakeholder perceptions about clients being prepared for the mediation process (e.g., understanding whether mediation is appropriate for their case; making an informed decision to participate) • Client and stakeholder perceptions about the use and helpfulness of other family law supports prior to, during, and after mediation • Client use of lawyer to review separation agreements or Memorandum of Understanding • # and % of clients referred to Family LawLINE and FDC and # and % who used these services 	<ul style="list-style-type: none"> • Program data • Participant interviews • Interviews with internal and external stakeholders
10. Are participants satisfied with the mediation process and outcomes of their mediation?	<ul style="list-style-type: none"> • Perceptions of participants who either completed a mediation or ended their mediation prior to completion • Perception of mediators and Mediate BC of participants' satisfaction with process and outcomes of mediation • Number and percent of clients who feel satisfied with the process of their mediation (by role, issues, level of resolution) • Number and percent of clients who feel satisfied with the outcome of their mediation (by role, issues, level of resolution) • Number and percent of clients willing to try mediation again in a different dispute (by role, issues, level of resolution) 	<ul style="list-style-type: none"> • Participant interviews • Interviews with internal and external stakeholders • Mediate BC client feedback survey data

Framework for the Evaluation of the Family Mediation Referral pilot project		
Questions	Indicators	Data sources
11. To what extent are participants resolving their family law issues through mediation?	<ul style="list-style-type: none"> • Number and percent of cases with none, some or all issues settled at the time the mediation was completed, and other outcomes (including barriers to resolution, issues addressed, services provided) • Stage of case when file opened vs. when file was closed (among completed cases) • Feedback on whether mediation resolved participants' family law issues 	<ul style="list-style-type: none"> • Program data • Interviews with internal and external stakeholders • Participant interviews • Mediate BC client feedback survey data
12. Were there any unintended consequences or outcomes of the MED REF project identified in Year 1?	<ul style="list-style-type: none"> • Stakeholder opinion on unintended consequences or outcomes of the MED REF project 	<ul style="list-style-type: none"> • Key informant interviews

Appendix C — Interview guides

**Legal Services Society of British Columbia
Family Mediation Referrals Pilot Project Evaluation**

Interview guide for internal stakeholders

The Legal Services Society of British Columbia (LSS) requires an evaluation of the Mediation Referrals (MED REF) pilot project which has been implemented under the Justice Innovation and Transformation Initiative (JITI). LSS has hired PRA Inc., an independent research company, to assist in the evaluation. One component of the evaluation is to conduct telephone interviews with stakeholders who are familiar with the MED REF project.

The interview should take no more than one hour. The information we gather through the interviews will be summarized in aggregate form. With your permission, we will audio record the interview for the purpose of note-taking. No one outside of PRA will see your notes or hear your recording.

The current evaluation focusses on the implementation of the MED REF project to identify early issues and make recommendations to assist LSS management in improving/refining project implementation. This evaluation will also examine early indicators of success in meeting the project's objectives.

Finally, we realize you may not be able to answer all the questions; please let us know, and we will skip to the next question.

Implementation of the MED REF pilot project

1. Please briefly describe your role in the implementation and delivery of the MED REF project.
2. Based on your observations, has the project been implemented as planned? If not, why not? (Q1)
3. To what extent have any factors or stakeholders external to the project affected the implementation and success of the model? What challenges did these external factors present? What was done to resolve these challenges? (Q2)
4. In your opinion, does the project have sufficient resources and capacity for providing the expected level of services? Please explain why or why not. What steps has the project taken to overcome any resource challenges? (*Probe: enough staff, staff sufficiently trained, staff have all the needed tools.*) (Q4)
5. Has the staff involved in project delivery been appropriately prepared for their role in the project? If applicable, have they found the tools developed for the project to be helpful? (Q3)
6. How are potential clients made aware of the services provided under MED REF? To what extent are all relevant stakeholders referring potential clients to LSS intake as expected? What organizations are referring clients to LSS intake? (Q6)

7. Are appropriate cases being triaged and accepted for mediation? At what stage are clients being referred? (*e.g., prior to court proceedings, court action commenced, case conference, final order?*) Based on your observations, are cases being referred at the right time? Does the assessment, triage, and application process happen in a reasonable amount of time? What is the cause of delays (if any) prior to the mediation sessions? (Q7)
8. How are participants prepared prior to taking part in the mediation and are these preparations adequate? (Q9)
9. What types of family law supports do participants seek prior to, during, and after the mediation session? (*e.g., Family LawLine, Family Duty Counsel, private lawyers, Access Pro Bono, PLEI, online resources.*) How are these supports helping participants understand their legal rights and finalize their mediated settlement? (Q9)
10. Has the project encountered any challenges in its implementation or delivery and how were these challenges addressed? How did these challenges impact the overall implementation of the project? (Q1)

Progress towards achieving objectives

11. How far along are clients getting with the six hours of LSS funding? Are the services provided under this funding adequate to get clients far enough in the process to demonstrate the value in mediation? Based on your observations, how are the six hours of LSS funding contributing to increased access to mediation services for low-income clients? (Q8)
12. To what extent are clients resolving their family law matters through mediation? (*e.g., all, some, few, none.*) What types of barriers are preventing clients from resolving their family law matters? (Q11)
13. Are you able to comment on the extent to which mediation participants are satisfied with the mediation process? Are you able to comment on participant's satisfaction on the outcomes of the mediation? (Q10)
14. Based on your observations, have there been any unintended consequences as a result of the project to date? (Q12)
15. Do you have any suggestions about how the project could be improved?

**Legal Services Society of British Columbia
Family Mediation Referrals Pilot Project Evaluation**

Interview guide for external stakeholders

The Legal Services Society (LSS) of British Columbia requires an evaluation of the Mediation Referrals (MED REF) pilot project which has been implemented under the Justice Innovation and Transformation Initiative (JITI). LSS has hired PRA Inc., an independent research company, to assist in the evaluation. One component of the evaluation is to conduct telephone interviews with stakeholders who are familiar with the MED REF project.

The interview should take no more than one hour. The information we gather through the interviews will be summarized in aggregate form. With your permission, we will audio record the interview for the purpose of note-taking. No one outside of PRA will see your notes or hear your recording.

The current evaluation focusses on the implementation of the MED REF project to identify early issues and make recommendations to assist LSS management in improving/refining project implementation. This evaluation will also examine early indicators of success in meeting the project's objectives.

Finally, we realize you may not be able to answer all the questions; please let us know, and we will skip to the next question.

Implementation of the MED REF pilot project

1. Please briefly describe your role in the implementation and delivery of the MED REF project.
2. Based on your observations, has the project been implemented as planned? If not, why not? (Q1)
3. To what extent have any factors or stakeholders external to the project affected the implementation and success of the model? What challenges did these external factors present? What was done to resolve these challenges? (Q2)
4. In your opinion, does the project have sufficient resources and capacity for providing the expected level of services? Please explain why or why not. What steps has the project taken to overcome any resource challenges? (*Probe: enough staff, staff sufficiently trained, staff have all the needed tools.*) (Q4)
5. Has the staff involved in project delivery been appropriately prepared for their role in the project? If applicable, have they found the tools developed for the project to be helpful? (Q3)
6. How are potential clients made aware of the services provided under MED REF? To what extent are all relevant stakeholders referring potential clients to LSS intake as expected? What organizations are referring clients to LSS intake? (Q6)

7. Are appropriate cases being triaged and accepted for mediation? At what stage are clients being referred? (*e.g., prior to court proceedings, court action commenced, case conference, final order?*) Based on your observations, are cases being referred at the right time? Does the assessment, triage, and application process happen in a reasonable amount of time? What is the cause of delays (if any) prior to the mediation sessions? (Q7)
8. How are participants prepared prior to taking part in the mediation and are these preparations adequate? (Q9)
9. What types of family law supports do participants seek prior to, during, and after the mediation session? (*e.g., Family LawLine, Family Duty Counsel, private lawyers, Access Pro Bono, PLEI, online resources.*) How are these supports helping participants understand their legal rights and finalize their mediated settlement? (Q9)
10. Has the project encountered any challenges in its implementation or delivery and how were these challenges addressed? How did these challenges impact the overall implementation of the project? (Q1)

Progress towards achieving objectives

11. How far along are clients getting with the six hours of LSS funding? Are the services provided under this funding adequate to get clients far enough in the process to demonstrate the value in mediation? Based on your observations, how are the six hours of LSS funding contributing to increased access to mediation services for low-income clients? (Q8)
12. Are clients using the sliding scale rate provided by Mediate BC? Are you aware of cases where affordability was a barrier to completing mediation? (Q8)
13. To what extent are clients resolving their family law matters through mediation? (*e.g., all, some, few, none.*) What types of barriers are preventing clients from resolving their family law matters? (Q11)
14. Are you able to comment on the extent to which mediation participants are satisfied with the mediation process? Are you able to comment on participant's satisfaction on the outcomes of the mediation? (Q10)
15. Based on your observations, have there been any unintended consequences as a result of the project to date? (Q12)
16. Do you have any suggestions about how the project could be improved?

**Legal Services Society of British Columbia
Family Mediation Referrals Pilot Project Evaluation**

Interview guide for clients

Client categories

(used for determining which interview questions to ask client based on how far they progressed in the MED REF process)

- 1 Ended before referral to mediator (did not proceed to mediation)
- 2 Ended prior to using all six LSS hours
- 3 Ended after using all six LSS hours (but not sliding scale)
- 4 Ended after using sliding scale
- 5 Completed after using some or all six LSS hours (but not sliding scale)
- 6 Completed after using sliding scale

My name is _____ and I'm calling from PRA, an independent research company hired by LSS (also known as "Legal Aid") to review the helpfulness of their Family Mediation Referral project that you participated in over the past half year or so.

- [CLIENT CATEGORIES 2-6 ONLY] You may have received a letter from your mediator about participating in a short telephone interview concerning the help you received from the mediation project.

We could do the interview now, or I could call you back at another time. The interview will take about 20 minutes. Your participation is voluntary. The information you provide may help LSS find ways to improve the Family Mediation Referrals project.

I won't ask you anything specific about your family matter, just about the services you received through the mediation referral project. Anything you tell me will be confidential; information from the interviews will all be combined and reported together, so individuals cannot be identified and your information will not be shared outside of PRA, or with anyone else involved in your family matter.

Question 1 [ALL CLIENT CATEGORIES] (Q6, Q7)

- A. At what point in your family law matter did you find out about the mediation services provided through the Family Mediation Referrals pilot project? (*Probe: Before or after initiating court proceedings? Before or after reaching a written agreement? Before or after reaching a final order?*)
- B. Who told you about these services? (*how did you find out about these services*)
- C. Do you think you learned about these services early enough in your family matter? Why or why not?

Question 2 (Q6, Q7)

- A. [ALL CLIENT CATEGORIES] How was your experience with the application and referral process for receiving mediation services? (*Probe: Satisfied, dissatisfied, why?*)
- B. [ALL CLIENT CATEGORIES] Was the process easy and was the information provided easy to understand?
- C. [ALL CLIENT CATEGORIES] Were you satisfied with the amount of time between the application process and receiving the results of your application for mediation? Why or why not?
- D. [CATEGORIES 2-6 ONLY] Were you satisfied with the amount of time between your application being approved and the beginning of the mediation sessions?

Question 3 [CATEGORIES 2-6 ONLY] (Q9)

- A. After LSS determined your eligibility for the service, how were you prepared to participate in the mediation?
- B. Do you think you received enough information or support to help you in deciding whether to participate in mediation? Why or why not?

Question 4 [CATEGORIES 2-6 ONLY] (Q8)

- A. How far did you get in your mediation with the free six hours provided by the Legal Services Society? (*Probe: Pre-mediation meeting? Joint mediation meetings? If they are unsure, ask them to describe what happened when they met their mediator.*)
- B. Was this enough time to address your family law issues? (*Probe: Did they address all, some, a few, none?*)

Question 5 [CATEGORIES 3-6 ONLY] (Q8)

- A. Did you continue with mediation once the free six hours were done? Why or why not? (*Probes: Did they use the sliding scale rate offered by Mediate BC? Did they think this rate was affordable? If they didn't proceed, was it for reasons other than affordability?*)

Question 6 [CATEGORIES 2-6 ONLY] (Q10)

- A. Overall, how did you find the mediation process? (*Probe: Was it helpful? Why or why not? The mediation process includes making arrangements with mediator, attending pre-mediation meetings, joint mediation meetings; might involve shuttle mediation — mediator going back and forth between parties, rather than parties meeting face to face — may also have involved mediation by video or teleconference.*)
- B. Did you understand the process? Why or why not? (*Probe: Were there any parts of the process that seemed unclear or were not explained well enough? This could include making contact with the mediator, pre-mediation meetings, joint mediation meetings, shuttle mediation, and video or teleconferencing.*)

Question 7 [CATEGORIES 2-6 ONLY] (Q10, Q11)

- A. How satisfied were you with the results of the mediation process? Please explain. (*Probe: Are they satisfied with what the mediation achieved? Did they expect to achieve more?*)

Question 8 (Q9)

- A. [CATEGORY 1 ONLY] At any point during the referral and application process were you referred to other family law services or resources? This could have been to receive legal advice or assistance in preparing for mediation. Which resources did you use? Were they helpful? (*e.g., Family LawLine, Family Duty Counsel, private lawyers, Access Pro Bono, PLEI, online resources.*)
- B. [CATEGORIES 2-6 ONLY] At any point, *before or during* the mediation, were you referred to other family law services or resources? This could have been to receive legal advice or assistance in preparing for mediation. Which resources did you use? Were they helpful? (*e.g., Family LawLine, Family Duty Counsel, private lawyers, Access Pro Bono, PLEI, online resources.*)

Question 9 (Q9, Q11)

- A. [ALL CLIENT CATEGORIES] Could I ask the current status of your family law matter?
- B. [CATEGORIES 5 or 6 ONLY] Did you use a lawyer to review the settlement agreement resulting from your mediation? If so, from where did you receive these services? (e.g., *Family LawLine, Family Duty Counsel, private lawyers, other resources.*) (Probe: *If client did not use a lawyer to review settlement agreement, why?*)

Question 10 [CATEGORIES 2-6 ONLY] (Q11)

- A. Did mediation assist you in resolving your family law matters without having to go to court? (Q11)

Question 11 [ALL CLIENT CATEGORIES]

- A. What, if anything, would you improve about the services you received under the Family Mediation Referrals pilot project?