



YOUTH PROJECTS INC.
A QUALITY ASSURED COMPANY



The Hon Brendan O'Connor MP
Minister for Employment Participation
Parliament House
Canberra
ACT 2600
MinisterEmploymentParticipation@deewr.gov.au

17th January 2008.

Dear Brendan

Improving Australian Employment Services

Thank-you for your recent letter and invitation to comment on the future direction of Australian Government Employment Services. We are excited to be given the opportunity to share our views with you.

We are four not-for-profit providers of a wide range of Government funded programs across Australia including a number of current (and also past) Australian Government Employment Services. These include the current DEN, Job Network, Work for the Dole, PSP and JPET programs along with a number of other programs not within DEEWR including New Apprenticeships, RTO training programs, Youth Pathways, Connections and the State Government funded Youth Transition Support Initiative and Workforce Participation Partnership.

Between us, we also deliver a range of Government funded specialist services for highly disadvantaged people with mental health, substance abuse and dual diagnosis issues and associated complexities (including for example homelessness, social isolation, financial hardship etc).

We would like to make the following comments and four key recommendations on the current employment services suite of programs in line with meeting the objectives of the Government's social inclusion and skills policies:

1. A better process for intake and assessment
2. The need for specialist services as well as generic job network providers
3. A review of the current rating system
4. Reviewing what is operated by DEEWR and what is operated by other Departments

A better process for intake and assessment

We believe there is a need for a stronger, more streamlined approach to initial assessment of a job seeker. Often many barriers are overlooked or not disclosed; jobseekers with significant issues are referred into inappropriate services. Consequently, a greater range of assessment tools and staff with a broader expertise base could help to provide a better initial assessment. Linking a person into the right service is critical in ensuring early intervention, stopping a revolving door (being moved from service to service) or worse, being parked in the too hard basket and ignored. As an example, TaskForce was recently referred a job seeker with severe Bi-polar into a work for the dole program. The jobseeker was hospitalised after two weeks and is severely unwell, and will not be returning to the program. Referrals are also often made with missing, out of date, or incorrect contact details for the client, making follow up and commencement within a timely fashion all but impossible.

We recommend the development of new screening tools on top of a revised JSCI, which from our experience would help to provide more information to people making a referral decision. Who does the screening and intake is also a critical success factor to ensure referral to the right service, early intervention and sustainable outcomes. From our experience, jobseekers are reluctant to tell their story again and again and many fear that in disclosing issues further repercussions will follow.

We would like to recommend to Government a *whole of community approach* where a range of services providers can be involved in an assessment, in particular, community based organisations where a jobseeker is already receiving help and support and where much information is already known. This would also allow for immediate referral and commencement and for the most appropriate information to be gathered. This will serve to greatly enhance the efficiency of the intake process, reducing the time between initial interview, assessment, referral and commencement, and would be more appropriate for highly transient and episodic clients as those needing our services.

The needs for specialist services as well as generic job network providers

We acknowledge that for many jobseekers with limited barriers to participation and with few complex needs, a generic employment service provides intensive support and assistance to gain meaningful, long term and sustainable employment.

However for clients with complex needs, already socially isolated and highly disadvantaged, the 'sticking plaster approach' has a limited affect. We strongly believe that there is a need for a range of specialist providers of employment services who are able to address the complex reasons why a person has not been able to find, or remain in employment.

These clients require specialist expertise, clinical knowledge and skills along with vocational, training and employment focused interventions that work. From our experience in delivering several highly successful niche pilot projects and evaluation of these, bringing these two areas together, provides a seamless transition back into the community, work and social inclusion.

An example of a specialist job network service

A generic service (a one size fits all concept) does not, can not and will not work with highly complex clients. Take for example clients with a Dual Diagnosis. Currently over 90% of clients entering into our combined drug treatment programs also present with a mental illness, sometimes undiagnosed. These vary in severity from anxiety disorders and depression, to schizophrenia, personality disorders; drug induced psychosis and acquired brain injury.

Australian statistics show that an overwhelming percentage of people with serious dual diagnosis problems are underemployed or unemployed, with only approximately 12% working full-time (Shand & Mattick, 2001).

Understanding the drug and alcohol addiction issues, the mental health issues and the barriers that stop a client from working will take the skills of a highly experienced practitioner. Access to and support from psychologists, social work staff, counsellors and vocational specialists is essential in supporting this group of clients to re-enter the work force, learn new skills, manage their mental illness, achieve abstinence and stability and to build new pro-social networks and greater connectedness into the community.

The current model of employment services in Australia sees this client connected into a number of services. This can include, but is not limited to, the mental health provider, the drug and alcohol counsellor, the DEN or PSP provider, education or training institutions, a housing support service, and Centrelink. Often the job seeker gets lost in the service system, is frustrated and is often seen as *being too hard*.

A specialist service for dual diagnosis clients will have the expertise to work with this client group in the one setting. Rather than attend 3 or 4 appointment in a week, get lost in a service system and experience greater social isolation, one service would provide the integrated specialist support the person needs. Every treatment plan would address mental health, drug and alcohol dependence, vocational skills and training, employment preparation, work experience, counselling and support for the broad range of complex issues including stable housing, financial planning, life skills, pro-social networks.

The strength of such an approach enables the client and service provider to address the issues that have led the client to their current situation and to work together to change these. Outcomes measured would include a range of treatment goals, episodes of care and education, training and employment outcomes.

A specialist service will ensure a joined-up, whole of Government and whole of community approach. The broad range of Government funded programs would be closely linked together, thus saving considerable administration time and offering considerable cost savings for Government. This was the experience and recommendation of Odyssey House, who has recently and successfully piloted a specialist PSP at multiple sites across Australia.

This model would build on existing expertise, as a range of specialist providers already exist in Australia with vocational expertise, but the current employment services system hinders their ability to provide integrated and timely support.

A review of the current rating system

We recommend that the current star rating system be reviewed in particular with an introduction of specialist services for highly disadvantaged clients with complex needs.

We recommend, for specialist services to report on a set of data to a number of different Government Departments (for example DEEWR, DEST, Department of Health and Ageing) and these combined statistics would lead to an overall star rating. Indicators would include treatment goals attained, episodes of care, education, training and employment placements, 13 and 26 week economic outcomes, and a range of social outcomes including greater connectedness with the community, increased supports, lower levels of anti-social (risk taking behaviour) etc.

Reviewing what is operated by DEEWR and what is operated by other Departments

It is clear that both JPET and PSP should remain as *Pre-employment* programs as originally intended. The aim of both of these programs is to work with clearly identified highly disadvantaged members of our community who are not yet ready to look for employment. These programs need to be clearly identified as transitional programs into main stream services (in a similar way to Youth Pathways, Connections and YTSI). They should be removed from the current model of job network service delivery.

Further discussions

In conclusion we would like to end our submission by extending to the Government our willingness to be involved in discussing and further designing a specialist employment services model as highlighted in our submission. Further, we would be prepared to utilise our experience and expertise to develop, pilot and evaluate the success of such an initiative.

We look forward to speaking with you.

Yours Sincerely

Karenza Louis-Smith
CEO TaskForce

Dr Stefan Gruenert
CEO Odyssey

Geoff Pascoe
CEO Interact

Carl Roberts
CEO Youth Projects