

Dear Brendan,

## **RE: Improving Employment Services**

Odyssey House Victoria has had 6 years experience in the delivery of specialist Personal Support Programme (PSP) services to people recovering from severe alcohol and other drug dependence. The majority of participants in the specialist PSP present also with co-occurring mental health problems, many often face unstable or unsuitable accommodation, and all have diverse multiple and complex needs. Odyssey's has also managed a national PSP pilot for 24 months, with excellent outcomes for the participants. We continue to provide PSP services in a specialist capacity, and are the lead agency in an alcohol and other drug specialist PSP consortium with sites in Victoria, the ACT and WA. We would like to use the knowledge and experience attained through this delivery, to make recommendations for adjustments to the programme to best serve some of the most disadvantaged jobseekers.

Odyssey believes greatly in the ability of PSP to assist people with severe barriers to employment, and believes it to be the most important of the Employment Services funded by the federal government. We advocate strongly for the programme, and what it can achieve. However, with the increasing difficulty of placing jobseekers, we believe that some improvements are justified. With the reduction in the unemployment rate, there have been two consequential increases; the level of personal barriers faced by those still unemployed, and the skills shortages faced by employers still looking for quality and qualified staff. PSP is the ideal programme to meet these needs, and can function to fill a much more important gap than general Job Network services given the current employment climate.

The results of the PSP pilot Odyssey conducted, which we expect to apply to any adjusted specialist PSP in the future, included:

- Participants reduced their substance use and dependence throughout the pilot program. The greatest changes occurred with those participants living independently in the community
- Participants decreased in criminal activity
- Participants showed increased independent living skills throughout the program, including moving from residential facilities into private rental properties, a reduced dependence on government benefits as a primary source of income, and improved communication skills and self-care
- Participants showed great improvements in social participation in the program, with increased interaction with family, a greater number of people in their lives who are not drug users, and a reduction in dependence on community services as their only source of support
- Significant numbers of participants gained employment, including casual and part-time employment, with approximately 30% of participants employed at the twelve month assessment

- Sites within the pilot showed as high as 100% referral to commencement figures, and retention figures sustained over 2 years in the pilot
- Highly positive feedback from participants recommending continuation of the specialist service provision. When this continuation did not occur post-pilot, these clients were transferred to generalist PSP providers in the area, and were greatly outspoken in their displeasure at this. Consequently a number of them continued to attend their pilot provider for PSP-type advice, despite the provider no longer being funded to give this.

These results should be attainable on an ongoing basis in an adjusted specialist PSP model as described in this document.

### **Gateway - assessment, referral and intake**

We advocate for a faster, more efficient, more streamlined referral process, with greater capacity for a more thorough assessment, more current participant information, and less capacity for gaps in the system where jobseekers can get lost. The referral gateway adopted should model the JPET system for youth clients which seeks to reach the most vulnerable clients in settings familiar to them. Due to the strength of the employment market currently, those jobseekers left looking for work are those with the highest needs, the greatest number and complexity of barriers to be addressed, and the longest time period of recent unemployment. Additionally they have less recent skills or experience, and need practical and personal interventions to overcome their barriers to employment. Odyssey's experience shows that people recovering from severe substance addiction display many similarities to youth clients, including their level of personal responsibility, lack of sense of mortality, level of commitment, and education and maturity levels. Essentially people with substance addiction stop maturing at the point at which they become addicted (most usually in their late teens), and maintain this emotional age until they recover from their addiction, regardless of how old they actually are. Adjusting the JPET model to apply to specialist PSP service provision for this client group is the most appropriate option.

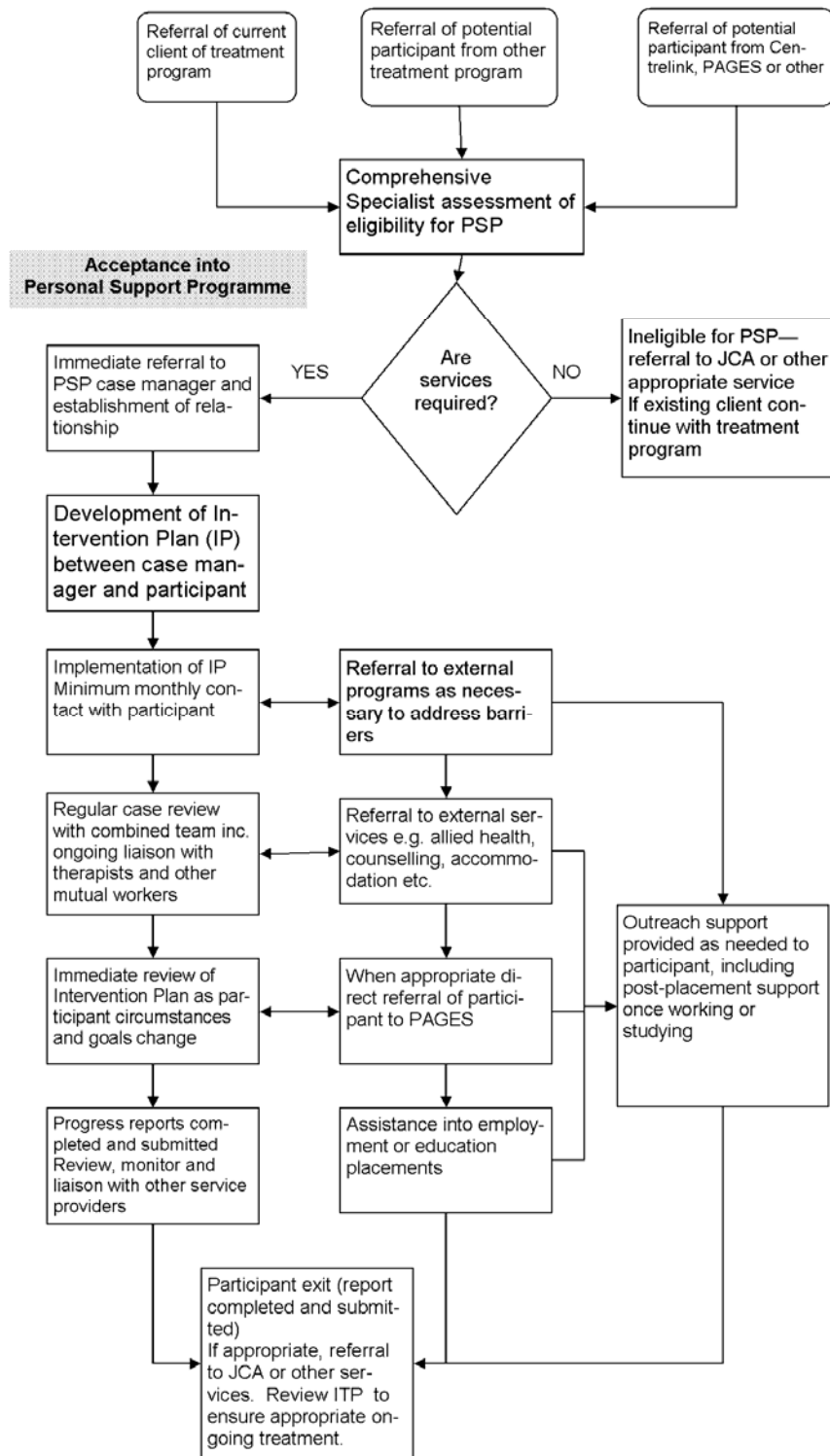
The beneficial aspects of such a system are as follows:

- Referrals are sourced by the provider primarily
- Referrals can be supplemented from Centrelink, JCA's, JN Members, and other PAGES in order to ensure people in need of the programme are not missed
- Assessments are conducted within the referral source environment immediately, and are tailored as specialist to identify PSP barriers
- Assessments will be more accurate than those provided by JCA's, with more appropriate referrals to follow. These assessments will be modelled on those used to assess people entering substance treatment, and include great detail on drug and alcohol history, forensic issues, mental and physical health, family support networks, education and employment history etc. Additionally, using the referral source to complete the PSP

assessment provides access to a great amount of prior knowledge and records of this client to date

- Appropriately assessed participants can be referred to their appointed PSP case worker and commenced immediately
- Priority exists at this stage for development of a relationship of trust between participant and worker, greatly enhanced by the client's perception that they are important and that their needs will be met. The most important thing that can be done at this stage is to emphasise to the client that PSP can help them; a situation which does not tend to occur during the significant time lapse between current JCA and PSP initial interview. The strength of this relationship will allow all else to follow
- Referral, assessment, intake and commencement occurring in one instance, with the basis of a relationship being developed immediately, which we believe is more appropriate for highly episodic and transient clients such as those needing specialist PSP. The benefits of the PSP can start immediately, and begin to take effect when the client is most motivated to change
- This will allow for more accurate information given by the client in both the assessment and intake stages, due to the familiarity in the situation, and immediacy of relationship commencement. It will improve the currency of contact detail updates

# Specialist PSP Service Model



## **Specialist Service Provision**

The specialist service provision we recommend be provided through PSP is based on the recommendations of our PSP pilot, and is very similar to the JPET model. This model is more appropriately funded through block funding rather than per milestones, allowing for more freedom and flexibility in assistance provided and number of clients per worker. We advocate for smaller PSP caseloads, allowing for more individual attention to personal barriers, and more outreach to assist with practical issues. The programme would benefit greatly from mobile workers, with the capacity to provide service to clients where most needed by the participant, with the focus on creating a relationship, assisting barriers, improving skills, and achieving economic outcomes. We advocate for more streamlined administration processes, including moving the Activity Agreement and Intervention Plan into one fluid document. We recommend a system placing more trust in the provider to do a good job, including greater communication directly between Centrelink and other PAGES as needed, and reliance on the PSP provider to conduct additional assessment and referral when appropriate. This was the case to a greater extent when the programme was managed by the Department of FACS (now FAHCSIA) than through its current management. Our recent discussions with Centrelink management confirm that this is their experience also.

## **Outcomes**

In addition to process matters, we advocate for the ability of PSP to achieve real economic outcomes for these participants; returning people into long-term work and independence. We recommend a system whereby mutual obligation is still essential, but stress that it must be made meaningful. Again this can be achieved by putting greater trust and reliance in the PSP provider to conduct assessments and referrals where most appropriate for the participant; referring into programs and services ideal for the client at that stage, which may not necessarily be the most timely option. Our emphasis is on the most suitable referral, and the one most likely to achieve longer-term change.

In this adjusted PSP, we feel the current weighting of economic outcomes as indicators of high performance is appropriate, and would recommend retaining this. We firmly believe in our capacity to achieve meaningful outcomes for participants through a specialist model as described in this document.

Odyssey has partners in alcohol and drug service provision that would also be very interested in implementing this adjusted specialist PSP into their services, including organisations in our current PSP contract and further organisations in NSW and Queensland.

We would like the opportunity to discuss further the ideas and recommendations put forward in this submission. We relish this opportunity to provide input into the ongoing improvement and achievement of PSP for complex jobseekers in the future.

Kind regards,

Dr Stefan Gruenert  
CEO  
Odyssey House Victoria