



Standing Committee on Education and Employment

Submission on behalf of VETE (Vocational Education, Training & Employment) Service Northern Sydney & Central Coast Local Health Districts, Mental Health Drug & Alcohol, NSW Ministry of Health.

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Introduction

Vocational Education, Training & Employment (VETE) Service at Northern Sydney Local Health District (NSLHD) and Central Coast Local Health District (CCLHD), under the former Northern Sydney Central Coast Area Health Service (NSCCAHS) was set up in early 2007 to provide employment and education support to people receiving community mental health services in the Northern Sydney and Central Coast regions. The Service specially caters for people in the public mental health system, to enhance access to and participation in education, training and employment.

Various factors have been identified both in Australia and internationally, as barriers for mental health consumers in obtaining employment. These include the lack of coordination between different funding bodies and disability employment service providers; consumers lacking knowledge of the various departments and agencies to assist with accessing services, and hence, sole responsibility for navigating complicated service pathways is often left to the consumer. To compound the issue further is the episodic nature and functional impairment of severe mental illness.

Barriers to participation in education, training and employment of people with mental ill health

Barriers can be grouped under Clinical, Personal, and Systemic

Clinical (This is not the scope of the current submission):

- Symptoms as a result of mental illness and medication side effects
- Episodic nature of mental illness
- Cognitive capacity is impaired with associated difficulties learning new skills etc

Personal:

- Lack of recent work & education / training history
- De-skilling due to work skills not being used or becoming out of date
- Reduced work tolerance due to decreased physical and mental fitness
- Development of a routine that is work “unfriendly”
- Reduced employment opportunities due to diminished social network
- Reduced confidence in own ability
- Self-stigma

- Reduced motivation and self-confidence
- Fear of losing government benefits
- Previous negative experiences with disability employment service providers
- Misconception regarding government requirements for people on Centrelink payments

Systemic:

- Government incentives interpreted as punitive by a significant proportion of people –
 - Individuals receiving the Disability Support Pension (DSP) fear that they will jeopardise their eligibility for this benefit by working and earning any income. The reality is that some reduction of government payment will result according to a sliding scale. For some people, entering the workforce may mean a reduction in the pension they receive from the government, increase in public housing rent, risk of losing out on eligibility for public housing, increase in medication expenses etc. These are disincentives for potential job seekers, and can result in minimal financial gain for them after everything is taken into account.

- Access pathways to education and employment services are complicated –
 - Services that support people to access education and employment are funded from different sources, with specific focus associated with the funding. Whilst there are many choices for individuals requiring support, it makes the system rather confusing. For example, Disability Employment Services (DES) funded by the federal Department of Education, Employment and Workplace Relations (DEEWR) consist of Disability Management Services (DMS) and Employment Support Services (ESS). There are a variety of providers at different locations. The quality of service provided depends on the way the organisations operate, and sometimes also on the Employment Consultant allocated. Individual service users are often unfamiliar with which agency may be most appropriate for them to access. Within TAFE there are also different departments and personnel to provide different services for people with disabilities.

- Transition back to work is often interrupted due to different employment sectors being managed by different government departments
 - Some people with mental illness who have been unemployed for a long time may require a stepped approach to rebuild their confidence and improve motivation to re-enter employment and/or training. It is a challenging proposition to go from being unemployed for 10+ years to starting a job in one attempt without hesitation. Flexibility and continuity to cater for such needs is required. A stepped approach may use volunteer work, supported employment through an Australian Disability Enterprise (ADE), work experience etc to work towards open employment, if that is requested / required by the individual.

- The funding system does not allow job seekers to access more than one type of employment support service at the same time –
 - “A person who is working below their employment benchmark in an ADE, is eligible for DES, if all other eligibility criteria are met and they have a current and valid assessment recommending DES. However, if the individual is working at or above their employment benchmark, they would not be eligible for DES. They are allowed to leave the ADE to test their capacity to find work, and be guaranteed a right of return to ADE for two years should they be unsuccessful in finding work in the open labour market” – Often mental health consumers are working part-time (already benchmark hours) at the supported employment site, but wish to attempt open employment. If they have to leave the ADE whilst looking for open employment, they will miss out on the regular work environment to maintain their confidence and skills for that period. There is no guarantee when or if they could be successful in getting a job in the competitive market. This uncertainty becomes a big disincentive for consumers to attempt the next step.

- Service gaps exist for people who do not fit the service criteria of the system –
 - Individuals with certain types of residency or citizenship status do not qualify for government funded employment programs, leaving them unable to obtain assistance to look for work, despite having eligible disabilities.
 - Also, a jobseeker whose partner’s income exceeds the limit is only eligible for ESS and not DMS. He/She may not be eligible for employment assistance if the Employment Assessment recommends DMS.

Ways to enhance access to and participation in education, training and employment of people with mental ill health through improved collaboration between government, health, community, education, training, employment and other services

1. VETE (Vocational Education, Training & Employment) Service

Since January 2007, the former Northern Sydney Central Coast Area Health Service (NSCCAHS) has been offering the Vocational Education Training & Employment (VETE) Service to mental health consumers who have expressed interest in returning to employment or training. There are 4 full-time equivalent positions, covering all community mental health teams in both Northern Sydney (NSLHD) and Central Coast Local Health Districts (CCLHD).

The model adopted at NSLHD & CCLHD is unique in that it uses a dual approach of utilising partnerships and providing in-house vocational rehabilitation services to promote vocational outcomes for consumers with persistent mental illness. Vocational rehabilitation specialists (VETE Consultants) with experience from federally-funded employment programs are recruited and employed within health service funding. VETE Consultants at NSLHD & CCLHD offer vocational counselling and guidance to consumers who may not have a clear idea about their employment pathway. Benefits counselling is provided to consumers who believe that they are not allowed to work because they are on the Disability Support Pension or other Centrelink benefits. Through

dispelling misconceived ideas and building vocational interests, more and more consumers with persistent mental illness within NSLHD & CCLHD are accessing the necessary programs to help them achieve employment and training goals. Being co-located with a different clinical team each day, consumers and clinicians at different sites can have direct access to this specialist intervention.

Elements of the NSLHD & CCLHD VETE Service:

a. VETE Consultants

NSLHD & CCLHD are the only Local Health Districts in NSW employing Rehabilitation Consultants who have worked extensively in disability employment or training settings as VETE Consultants. They have thorough knowledge of the federal funding system for employment services as well as specific knowledge of Department of Human Services (Centrelink), disability employment services, TAFE, and other vocational programs. VETE Consultants are externally recruited, which means the Consultants come with the knowledge and contacts to add value to the service provided by the Local Health Districts.

One objective of the VETE Consultants is to promote employment outcomes for mental health consumers consistent with their health and vocational capacity. Being funded by NSW Ministry of Health, VETE Consultants adopt a rehabilitation focus to provide what is most appropriate for the individual needs and abilities of the consumers. Employment services that are funded by the federal government often have competing agendas, and experience pressures to place consumers into work as the only outcome. That may not always be an ideal match for everyone given the consumers' mental health needs. This pressure can also cause employment agencies to favour consumers who are "job ready" and have the required skills for quick employment placement. It is important to note that there are a significant number of consumers who are hesitant in taking the first steps; hence requiring motivational counselling and simplifying the processes.

NSLHD & CCLHD VETE Consultants work at the frontline to provide direct consultations to consumers, to "demystify" the process of re-entering the workforce. Initial consideration was given to use the VETE Consultants to train up clinicians at every team. However, discussions with NSLHD & CCLHD clinical teams indicated that Care Coordinators (Case Managers) are already stretched to the limit and not able to allocate time to include vocational rehabilitation in their ever-expanding range of duties. Consequently the current model at NSLHD and CCLHD use VETE Consultants to provide a vocational service to consumers of the mental health service that was in the past only provided by clinicians in an ad hoc manner. The result is that mental health consumers have access to a comprehensive system of vocational assessment and connectivity with appropriate employment services.

b. Co-location

VETE Consultants are co-located within every community mental health team across the working week. That is, a VETE Consultant works with a different community mental health team in the area each day, to provide direct face-to-face service to the individual groups of clinicians and consumers. The benefit of this is that more mental health consumers and clinicians in the community have direct access to the vocational service provided by VETE Consultants, without undertaking additional travel. Embedding the VETE Consultants within clinical teams has enabled employment, education and training to be part of the daily conversation and consideration for mental health consumers. VETE Consultants also participate in team meetings and clinical reviews. Furthermore where suitable accommodation can be provided, external Disability Employment Service providers are invited to provide services onsite at the local mental health centres.

c. Resource allocation

Four (4) full time equivalent VETE Consultants and a full time equivalent Coordinator are involved in the NSLHD & CCLHD VETE Service. The Consultants are spread across:

Hornsby – 3 teams / 3 locations (3 days)
Northern Beaches – 5 teams / 5 locations (5 days)
North Shore Ryde – 5 teams / 2 locations (5 days)
Central Coast – Adult mental health teams, multiple locations (5 days)
Central Coast – Children & Young Persons Mental Health Service (2 days)

Since the introduction of the VETE Service in February 2007, over 2000 mental health consumers have been referred to the above workforce. Some consumers dropped out after the initial consultation, but a large percentage proceeded onto receiving ongoing services.

An example of the demand for VETE Service is demonstrated below:

VETE Service is co-located with the Central Coast Children and Young People's Mental Health Service (CCCYPMH) (12-24 year-olds), a leading agent for Central Coast Headspace. A VETE Consultant provides service to young people with diagnosed mental illness two (2) days a week. Since September 2007, approximately 400 referrals for vocational and educational services have been received, which equates to 100 referrals per year for 0.4FTE VETE. Data from Central Coast Headspace indicates that for the 12 month period from July 2010 – June 2011, there were 127 young persons accessing Headspace who presented for mental health issues and also expressed an interest in or demonstrated a need for vocational services. Unfortunately these young consumers were not eligible for VETE services because they did not meet the criteria for CCCYPMH. Using this as a guide, an increase in VETE Service would be warranted in order to provide vocational support for more young people.

d. *Interventions provided by VETE Consultants*

VETE Interventions are tailored for individual consumer needs and may include:

- Vocational assessment to identify suitable employment options
- Vocational counselling
- Benefits counselling – to assist consumers understand Centrelink guidelines regarding the number of hours they are permitted to work and the impact of income from employment on their Centrelink entitlements
- Direct referral to Disability Employment Service providers
- Gathering supporting medical documentation required by consumers attending the Employment Services Assessment (Department of Human Services process)
- Facilitating the communication of relevant disability related information between internal and external service providers
- Monitoring consumers' vocational rehabilitation progress once they have been linked with a suitable disability employment provider
- Supporting consumers to identify suitable courses and to enrol at vocational training institutions such as TAFE
- Referral to specialist disability support services at TAFE and University
- Providing resources to clinicians and consumers regarding vocational / career / training information
- Assisting with Centrelink issues / issues with service providers as they relate to employment
- Assisting with the identification of suitable volunteer positions
- When required, developing plans with consumers to make a gradual transition towards employment taking into account their skills, mental and physical fitness, social and interpersonal skills and understanding of the labour market

These services are made possible due to the vocational rehabilitation experience and background of the VETE Consultants at NSLHD & CCLHD.

e. *Partnering multiple Disability Employment Service Providers*

NSLHD & CCLHD assist consumers link with and gain support from a number of Disability Employment Service Providers. VETE maintains links with numerous local DES providers so that consumers benefit from the variety of service choices. A consumer then has the option to decide upon a service provider that best suits their needs on the basis of location, level of support offered, and in some circumstances the language background of specific employment consultants.

Providing consumers with the choice among multiple service providers ensures flexibility and promotes a healthy competition amongst DES providers, which tends to build improved standards of service. Service Providers found not to be producing good outcomes for our consumers can quickly be replaced, without the need for NSLHD & CCLHD to go through a cumbersome tendering process, or become entangled in a supervisory / monitoring or performance management role. Some regions within NSLHD & CCLHD have been fortunate to have many high performing and good quality DES providers to work closely with, ensuring positive outcomes for mental health consumers.

VETE Consultants adopt an advocacy role in identifying a suitable disability employment service provider for the consumer. After the consumer is satisfactorily linked with the provider, the consumer will be discharged from the VETE Service. However, the provider will continue to update the VETE Consultants of any progress until a vocational outcome is achieved. Part of the VETE Consultants' role is to monitor the progress of consumers referred to employment service providers and share relevant information to promote progression towards suitable employment.

f. Inclusion criteria

NSLHD & CCLHD VETE Service is available to individuals who meet all of the following criteria:

- Diagnosed with, or being treated for, mental illness
- Living within the areas covered by NSLHD & CCLHD
- Currently receiving clinical care from NSLHD & CCLHD Mental Health Services, with a care coordinator / clinician / case manager / therapist / Specialist Rehabilitation Clinician / clinical team available for immediate support, should the need arise
- Aged between 14-64 years
- Interested in and willing to look for employment or education
- Without urgent / pressing psychosocial crisis

Ideally the VETE Service should be offered to everyone with a mental illness. However, since there are only 4 full-time equivalent positions funded at NSLHD & CCLHD, it is not possible to offer the service to the entire population residing within NSLHD & CCLHD. A decision was made to service only consumers receiving clinical services in the Local Health Districts.

2. Interagency Network

Funding for programs assisting people with mental illness to access education, training and employment come from different sources, through various government departments and Non Government Organisations.

VETE has worked hard to establish and build partnerships with an array of agencies providing vocational services for consumers with a mental illness. The aim of the partnerships is to break down barriers between different organisations and share information of mutual benefit so that consumers benefit by having improved access to external programs, including TAFE and disability employment services. NSLHD VETE Consultants and Coordinator host a regular interagency committee in Northern Sydney region, as well as participate in a variety of meetings organised by external partners, e.g. Department of Human Services (Centrelink), National Disability Coordination Officer (NDCO) etc.

3. Vocational Outcomes 2007-2011

The approach outlined above adopted by the NSLHD & CCLHD VETE Service has yielded practical gains for mental health consumers. The following outcomes have been recorded between 1 July 2007 and 30 June 2011 by 4 full-time equivalent staff of the VETE Service:

Outcomes	Number of clients
Employment	246
Education / Training	218
Improved Vocational Skills / Resources	421
Linked with Employment Service Providers	257
Volunteer Work	53
Social Participation	42

Over 2000 mental health consumers were referred during the 4 financial years (2007-2011). The above positive outcomes account for 70% of the 1776 individuals who proceeded with the VETE Service.

4. Awards received by VETE Service

NSLHD & CCLHD VETE Service has won a number of awards as recognition of the effectiveness and efficiency in the service delivery, enhancing access to and participation in education, training and employment of people with mental ill health. Awards received include:

- 2010 Premier's Public Sector Awards, *Delivering Services*
- 2009 NSW Health Awards, *Building Partnerships for Health*
- 2009 Mental Health Matters Award, *Cross Sector Collaboration*
- 2009 Australia and New Zealand Mental Health Service (TheMHS) Conference, Gold Achievement Award, *Specialist Services*

The above Awards have recognised the encouraging vocational outcomes made possible by the extensive and inclusive partnership approach adopted by NSLHD & CCLHD VETE Service. The various services provided to assist people with mental illness work as individual pieces in the larger puzzle, so as to cater for the variety of needs of consumers. It is important to note that whilst organisations have their targeted outcomes (e.g. open employment, completion of vocational training etc), outcomes from the perspective of mental health consumers should equally be respected and considered. There is room for service users, service providers, funding bodies, and policy makers to come together and develop a more holistic approach to improve the current situation.