INTEGRATED HUMANITARIAN SETTLEMENT STRATEGY (IHSS)

SERVICE PROVIDER SIX-MONTHLY AND ANNUAL REPORT

SERVICE PROVIDER	ACL IHSS Consortium
CONTRACT REGION	Northern and Southern Metropolitan Regions of NSW
REPORTING PERIOD	1 July 2010 – 31 July 2011

This report is to be submitted to the department by 31 August 2011.

Extensions to reporting deadlines

- In extenuating circumstances, extensions to reporting deadlines *may* be granted
- This must be negotiated with the relevant IHSS Contract Manager at least one week prior to the deadline.
- Extensions to deadlines will usually *not* exceed four weeks.

1. STATISTICAL OVERVIEW

Referrals received during current reporting period

SUB CLASS	BAND 1 (1 to 2)	BAND 2 (3 to 6)	BAND 3 (7 to 11)	BAND 4 (12 and greater)	TOTAL
200	90	104	12	0	**206**
201	0	0	0	0	**0**
202	109	99	12	0	**220**
203	0	0	0	0	**0**
204	12	10	0	0	**22**
851	0	0	0	0	**0**
866	324	17	0	0	**341**
TOTAL	**535**	**230**	**24**	**0**	**789**

Main areas of settlement within the contract region

1	Fairfield
2	Liverpool
3	Auburn

Main ethnic groups represented within the contract region

1	Iraqi
2	Afghan (Hazara)
3	Iranian

2. ANNUAL WORK PLAN

Please provide a brief overview of progress on implementing the agreed annual work plan, including implementation of QA recommendations and any Risk Management Plan updates.

Background

The original IHSS contract was due for completion on 30 June 2010. There were 3 subsequent, short contract extensions to allow sufficient time for tender evaluations and the introduction of the HSS program across Australia.

Due to the impending contract end, there was no formal, agreed Annual Plan for the ACL IHSS Consortium for the 2010 – 11 program year. Consortium partners developed and implemented their Transition Out Plans for the IHSS contract, in line with the Department's advice on Transition Out protocols for client services and document management.

ACL

At the start of the program year (1 July 2010), the ACL IHSS Consortium was expecting the IHSS contract to be completed on 30 September 2010 (as per written advice received 3 February 2010). By mid-July, advice was received of a further IHSS contract extension to 31 January 2011. The two main focuses of activity during this first six months of the program year were: to maintain staff and infrastructure for service delivery in this extended period and to develop and implement the Consortium's Transition Out Plan (required by 17 September 2010).

With a downturn in business levels experienced in this period (please see Section 3 Issues during reporting period, pg 11), some IHSS operational staff were re-deployed to work on Transition Out projects, such as the return of client files.

Advice was received on 20 December of a further IHSS contract extension to 3 April 2011 and new referrals escalated in the first 3 months of 2011. During this period, effort was made to continue Transition Out projects while maintaining staff and service delivery to a growing cohort of new clients. By the end of the contract at 3 April 2011, the ACL IHSS Consortium had provided support in 2010 - 11 to:

251 refugee cases (812 people)
275 Protection visa cases (361 people)
264 SHP cases (763 people) and
513 transit cases (1239 people)

The transition period of 4 April – 1 August focused on closely monitoring service delivery milestones and increased liaison between Consortium partners in relation to achieving appropriate settlement outcomes for as many IHSS clients as possible prior to exit from IHSS/transfer to HSS. By the end of the transition period, 15 cases were transferred to HSS in the metropolitan area due to the complexity of their circumstances and/or arrival late in the contract period or unsolved accommodation concerns. 7 Newcastle cases were transferred to HSS due to unresolved accommodation issues in this regional location.

ACL QA recommendation 2010:
"In order to clarify record-keeping arrangements, insert an explanatory paragraph in the Consortium's IHSS Policy and Procedures Manual indicating which documents are normally stored electronically and which are placed on the hard copy file for the case."

After further discussion with DIAC Contract Managers, ACL developed the Documents Filing Guideline, which identifies all relevant client documents and indicates where each document is to be stored. For a copy of this document, please see Attachment 1 to this report.

Resolve FM

Resolve FM applied strategies related to our service delivery area to achieve improvements for the final year of the IHSS contract.

Improved service delivery to Protection visa holders

Resolve FM and ACL have established robust and effective communication protocols where, if any issues are brought to Resolve FM's attention, they will be immediately attended to. Depending on the nature of issue, Resolve FM would initiate the investigation and develop a plan to address a raised issue, or prepare an improvement plan if it would be a common issue for other clients too. A proper detailed response will be prepared and submitted to ACL. In addition, this response could be followed by formal meetings. The examples could be provided on request to show how Resolve FM has responded to some issues for last year.

Resolve FM has established the protocols where we will assess a requirement of any requested change or variation to provided services, discuss with ACL any concerns and practicalities, and develop a plan and procedures to implement them.

Resolve FM and ACL have successfully implemented communication protocols to deal with short notice arrivals and spikes in the number of arrivals. Resolve FM have procedures in place to liaise with the lead consortium partner for cases referred with a late notification. Resolve FM has structured their resources so that it will be able to allocate and mobilise in a short period of time to attend to information received and provide the required services, and importantly, to minimise any inconvenience to clients. Resolve FM has implemented some initiatives to deal with a short notices and high number of arrivals such as: the online shopping, where food and household items can be ordered online at a short notice and delivered the following day, and agreements with serviced apartment providers to accommodate clients at short notice if all STA properties are already occupied. In events when clients are released from the Detention Centre or transfer-in clients from other states arrive out of business hours, then ACL will sometimes provide motel accommodation overnight and Resolve FM will provide a more permanent STA accommodation the next working day.

When clients, who were initially supported by other organisations such as Australian Red Cross, are referred by DIAC through ACL to provide services, Resolve FM will allocate the appropriate STA accommodation within the Sydney region wherever available. Once settled in STA, then LTA discussions can commence and LTA can be sourced and secured for these clients.

Consolidated relationships with mainstream services, community organisations, ethnic community groups and real estate agents to build the knowledge of the ACL Consortium provision in the sector.

Resolve FM and ACL engaged Department of Housing and Hume Community Housing to a series of meetings and conducted lengthy discussions about IHSS program and any opportunities to lease their properties for a STA accommodation for our clients. In light of the many, short contract extensions, the leasing of Housing NSW bedsitters for STA for single clients did not proceed.

Resolve FM has attended all meetings, which were planned for the year on the IHSS meeting and reporting calendar and any other meetings, which were arranged through the year. The following meetings were attended by Resolve FM for this reporting period:

- Refugee Support Network Sydney
- IHSS Community Advisory Panel Meeting Sydney
- Attending Housing NSW affordability meetings

Resolve FM provided updates on the market situation for each meeting and provided copies to all service providers. The reports contained information to brief participating organisations of delivered services, issues and improvement initiatives.

Resolve FM has attended all meetings, which have been planned for the year on the IHSS meeting and reporting calendar and any other meetings, which were arranged through the year. The following meetings were attended by Resolve FM for last year:

- Refugee Support Network Newcastle
- Hunter Regional Advisory Council
- Illawarra Refugee Issues Forum Wollongong

Resolve FM has compiled detailed reports for each meeting and provided copies to all service providers. The reports contained information to brief participating organisations of delivered services, issues and improvement initiatives. Some reporting duties had to be changed in Newcastle due to high levels of media reports.

With ACL's assistance Resolve FM has had a meeting with Bala Vigneswaran, who is the Tamil Community leader based in Blacktown and Mount Druitt and who is heavily involved in providing help to Tamil clients. This has helped Resolve FM to establish a good relationship with this community organisation and improve the provided services to Tamil clients.

Resolve FM has established protocols to deal with any raised complaints, which could be brought to Resolve FM's attention directly or through ACL. Resolve FM continues to work on those issues or complaints until a detailed response is provided and finalised.

Resolve FM provided a detailed report at IHSS Community Advisory Panel (ICAP) meetings which illustrated the number of families housed since contract started to date then went through in detail statistical data of averages collected to give concise data at meetings. The report also included the percentages for surveys collected from clients within the reporting period and detailed information regarding important data collected regarding the rental market. This rental market information was well received by ICAP members, as it provided a context for the accommodation services provided through IHSS. The report continued into statistical data for main housing areas in which our clients settle, including a full break down of the five top settlement areas.

Resolve FM provided information for ACL's IHSS newsletter which reflected on the goals and achievements including any successes of the ACL IHSS Consortium and its clients. The newsletter also reflects on activities across the two contract regions of north and south which includes Sydney, Newcastle and Wollongong.

Resolve FM QA recommendations 2010:

"That Resolve FM adjust the Household Goods Package, replacing items known by community and DIAC to be of poor quality with better quality items."

"That Resolve FM seek feedback from ACL/client communities regarding the appropriateness of items provided in the food package, and consider creating more than one basic items list to cater for culturally diverse groups."

"That Resolve FM develop a clear 'LTA properties offered' template showing the number and addresses of LTA properties offered to clients."

"That Resolve FM retain *original* signed warehouse 'picking slip' on the client's file, rather than a photocopy."

Please see Attachment 2 for further information about Resolve FM's implementation of 2010 QA recommendations.

NSW STARTTS

STARTTS continued to deliver STTC services in the broad context of its service agreement and with reference to the 2010 Annual Plan as appropriate. A number of changes in process during the reporting period, such as the removal of the requirement for 100% referral of arrivals to STARTTS for STTC, obviously impacted on the way in which services could be provided against the contract. The changes in contract end-date also impacted to some extent, in light of the uncertainties it produced in the sector.

Summary data for STARTTS services during this reporting period includes:

- 622 family referrals (1491 individuals), representing a monthly average of 52 families (124 individuals).
- Protection Visa holders (261) represented 42% of all referrals during this reporting period; Special Humanitarian Program visa holders (185) represented 30%; refugees (155) represented 25%; and Women At Risk visa holders (21) represented 3%.
- The majority of referrals (69%) came from four source countries – Iraq (30%), Afghanistan (14%), Iran (13%) and Sri Lanka (12%). The remainder (31%) came from 36 different source countries.
- Completion of 927 assessments, and provision of 4683 counselling sessions.

Capacity to provide timely services to clients referred to the STTTC (early Intervention Program)

- STARTTS continued to work closely with ACL staff to ensure timely referral of newly-arrived Refuge and SHP entrants, and PV 866 visa holders. Referral forms were checked on a monthly basis, until the 100% referral requirement was removed by DIAC in September 2011, to ensure appropriate access to STARTTS.

- Analysis of referral data during this reporting period indicated a significant reduction in the percentage of referrals after removal of the 100% referral requirement. This was a matter of some concern to STARTTS in terms of the risk to newly-arrived clients who were not in a position to request, at the first interview with ACL after arrival, that they wished to be referred for counselling. It was a particular concern in light of the reduced timeframe in which they could receive IHSS services prior to the end of the contract, and the advice that, after discharge from the IHSS, they would be referred to post-IHSS providers who may not be in a position to provide the level of support they still required. STARTTS raised this issue as a matter of concern through ACL to DIAC, and also followed up with ACL in relation to the rate of referrals during the last quarter of 2010. See Attachment 3 for further detail of referrals during this reporting period.

- STARTTS staff met on a regular basis with ACL to review processes and targets. Senior Management attended contract meetings with DIAC; the EIP Coordinator also attended Consortium Management meetings; and EIP Team leaders and counsellors maintained regular contact with ACL Team Leaders and Case Coordinators in relation to client services.

- STARTTS continued to use the centralised allocations process to ensure maximum flexibility in responding to changes in settlement and referral patterns. Counselling staff continued to provide services in outreach locations, and in STARTTS offices in Auburn and Liverpool, to respond to client needs and developing areas of settlement. STARTTS also secured office space in Blacktown during this reporting period to support client service delivery through a centralised space.

- Strategies put in place by STARTTS during 2009/10, including recruitment of new counselling staff and provision of group screening sessions to target communities and

groups saw a significant reduction in waiting times during this reporting period. The rate of reduction was impacted to some extent by the spike in referral numbers in September (132 families/357 clients), just prior to removal of the 100% referral requirement.

- STARTTS continued to provide training for newly-recruited ACL staff and volunteers, as well as other IHSS Consortium partners. This included training to Mission Australia volunteers in Newcastle (October 2010) and to ACL staff in Sydney (January 2011).

- STARTTS continued to develop and maintain relationships with a wide range of providers and other groups across both Metro Regions in order to support effective referral pathways, both to and from STARTTS, for IHSS clients. The EIP Coordinator continued to chair the NSW Refugee Support Network meetings, at which EIP Team Leaders presented STARTTS IHSS service reports. Other key interagencies and forums attended by the EIP Coordinator or Team Leaders included the ICAP and Refugee Health Improvement Network; EIP staff attended and contributed to peak regional interagencies such as Illawarra Refugee Issues Forum and Hunter Refugee Network. Participation in the SESIAHS Area-Wide Refugee Health Coordination Group, which for the bulk of this reporting period covered South Eastern Sydney and the Illawarra, supported wider awareness of need, and development if collaborative responses to identified client needs.

Monitoring service standards and enhancing quality of STTTC

- STARTTS continued to check practice against standards. STARTTS Strategic Plan 2009-2012 provided a number of areas of focus in relation to standards: these were explored and further developed in September/October 2010 as part of STARTTS' annual planning process, and progress will be further reviewed in the 2011 annual planning process scheduled for early September 2011.
- Upgrading of STARTTS Client Services database commenced during this reporting period, and is intended to enhance capacity to monitor service standards and client outcomes.
- Copies of the revised and updated STARTTS brochure were provided to clients both directly through STARTTS offices, and through provision to ACL for inclusion in information kits for clients and their proposers.

Consolidating and improving procedures for gathering client satisfaction data

- Client satisfaction surveys are collected and analysed on a regular basis, and have been reported on in STARTTS quarterly contract management reports. Client feedback through questionnaires has generally been very positive, and has not indicated any particular area of concern which has required further action.
- Upgrading of the database capacity in relation to managing evaluation of client satisfaction is included in the overall system upgrade.

Continuing to develop culturally consonant counselling practices to better fit the client's world view and enhance their awareness of the impact of trauma

- Ongoing Professional Development is a core priority for all STARTTS staff. STTTC staff participated in a range of activities during this reporting period, including:
    - STARTTS internal professional development program
    - STARTTS Clinical Evenings, which are targeted to external providers, and also made available on psychevisual
    - Other external training in relation to particular areas of specialisation.

- (See Attachment 4 for further details)

Ensuring that clients can be discharged from STTC services within timeframes consistent with contractual obligations

- STARTTS continued to monitor the time between date of arrival and date of referral to STARTTS, in order to ensure that referrals were received in agreed timeframes. This monitoring indicated that the majority of clients were referred within the agreed timeframes, although there was some indication of an increase in referrals, at times, within a shorter period of time, as a result of identified urgency in relation to client needs.

- Monthly discharge lists were prepared for ACL to identify clients who had completed STTTC services. STARTTS also reported on a regular basis through quarterly contract management reports to DIAC, and through summary reports to regular interagencies and forums such as ICAP, NSW Refugee Support Network, and the Hunter Refugee Network.

- In the months leading up to the actual end of contract date, STARTTS Data Team prepared more frequent reports to monitor the rate of discharge, and ensure as streamlined a discharge process for clients as possible. The EIP Coordinator, Data Team, and Team Leaders worked closely throughout this period to manage the transition-out process successfully in line with STARTTS' agreed Transition Out Plan.

NSW STARTTS QA recommendation 2010:
"That STARTTS reduce long waiting times between referral by ACL and initial appointment."

STARTTS implemented a range of strategies to reduce the waiting times between referral by ACL and initial appointment, including:

- Recruitment of 6 new counsellors in February 2010.
- Engagement of three part-time contractors with experience in assessment, and in EIP services, in June 2010
- Assigning recently-recruited counsellors to undertaking assessments only during the first 3-4 months of their employment with the EIP
- Running group screening sessions with appropriate target communities, including Afghan, Iraqi and Tamil, to identify clients who need torture and trauma counselling.

These strategies had a positive impact on waiting times, with a reduced number of clients waiting more than 45 days as at June; and an ongoing reduction over the remainder of the contract.

As noted in STARTTS initial response to the 2010 QA report, the visible impact of STARTTS strategies was obscured to some extent by factors including the significant level of referrals during March 2010 (163 cases); followed by sustained referral numbers (115 in April and in May 2010); together with a significant increase in single unit families, and an increase in the number of family members requesting counselling.

Waiting times continued to decrease on a sustained basis during this reporting period, with an ongoing reduction in subsequent months to the end-contract date. (See note regarding mean and media scores for the reporting period)

[Also appears in Section 4.4 Short-term Torture and Trauma Counselling Services in this report, at pg 47]

Mission Australia

In response to comments and suggestions from volunteers in the 2009/ 2010 annual Volunteer Survey, Mission Australia IHSS VCU conducted a series of workshops in all 3 regions between September and November 2010, as shown below:

VCU Workshops

Date	Region	Topic	Volunteers attended
September 11, 2010	Wollongong	"Police Power" – Carolina Soto, Young Lawyers	10
October 9, 2010	Wollongong	"Refugee Health" – Dr Astrid Perry, Refugee Health Service SESIH (South Eastern Sydney Illawarra Health)	10
October 23, 2010	Sydney	"Refugee Health" – Cathy Preston-Thomas, NSW Refugee Health Service	15
October 30, 2010	Newcastle	"Refugee Health" – Karinne Andrich, Multicultural Health Unit	8
November 6, 2010	Sydney	"Family Law" – Young Lawyers	16

Service activities

- End-of the year lunches for IHSS volunteers were organised in all 3 contract regions to acknowledge the contribution of volunteers to the program

- Certificates of Appreciation provided by DIAC were given to Mission Australia IHSS VCU volunteers in December 2010 in acknowledgement of their dedication and participation in helping newly arrived refugees in the process of their settlement in Australia.

- The final edition of the Volunteers News Letter "Volunteer Voice" was distributed to all VCU volunteers and relevant community services in the end of February 2011.

Mission Australia IHSS VCU Contract Transition Out Plan Activities

- The VCU maintained service delivery during the transition period, ensuring that that there was an appropriate level of staffing and resources available to manage client/volunteer matches and appropriate number of IHSS volunteers.

- All client records were reviewed and clients exited as advised by DIAC.
- Relevant service and client documentation was archived or disposed according to DIAC's Transition Records Management Tip Sheet.
- 100% of VCU clients were exited from the service and volunteers advised accordingly

3. ISSUES DURING REPORTING PERIOD

Please provide a brief overview of 3-5 issues which have arisen during the reporting period. Has any action been taken to address these issues?

Business level fluctuations, Transition Out and staffing arrangements

The ACL IHSS Consortium experienced an unprecedented downturn in business levels in the first 6 months of the program year – from 125 cases in July to 40 in October and 46 in November. ACL, in light of this downturn and impending contract end, terminated 14 staff members, comprising Team Leaders and Case Coordinators, in January 2011.

Despite contract end, business levels increased dramatically during the last 2 months during which the Consortium could accept new clients. There were 250 new cases in February and March 2011, 166 of which arrived in March. There were an additional 13 cases which arrived in the first 3 days of April. ACL re-employed most of the employees who had been terminated in January 2011 in order to ensure adequate staffing levels to provide services to the clients arriving just prior to contract end.

Under DIAC's Transition Out protocols, the ACL IHSS Consortium was required to finalise IHSS services to all clients current at midnight 3 April 2011, within a four-month period. There were two factors at play which made this requirement challenging.

After the business downturn experienced earlier in the program year, there was a reversal and the Consortium received 374 new cases in the period December 2010 and April 2011. This meant that the number of open cases as at 3 April was larger than might be expected at contract end.

In addition, the incoming HSS provider was urgently seeking to employ knowledgeable and experienced staff to work in the HSS program in the Sydney Metropolitan regions. Staff retention in this context became a very vexed issue for ACL, as a significant number of experienced Case Coordinators resigned from ACL to take up positions with the incoming provider. ACL was able to draw on a large pool of experienced casual workers in order to complete service delivery for IHSS clients within the timeframe available.

SHP referrals near contract end – part services

In the period January – April 2011, the ACL IHSS Consortium accepted 104 SHP cases. However, SHP referrals in the period far exceeded this total.

ACL sought advice from the Department regarding SHP referrals received close to contract end, especially for cases for which there was no travel information available. When advice was received, ACL staff conducted Proposal capacity evaluations and all staff tried to determine which clients were likely to arrive within the contract window and which cases would be re-referred to the incoming HSS provider for on-going support. ACL uploaded information in HEMS for 74 SHP cases for which part services were provided.

Public complaints about IHSS service delivery in Newcastle

In March 2011, there were complaints to the Minister and in the media (radio, television and newspapers) about IHSS service delivery in Newcastle. These centred around, but were not limited to, the unsuitable accommodation for 3 Congolese families who had arrived in August/September 2010 (2 in LTA and 1 in STA).

In response, the Minister commissioned Ernst and Young to investigate the complaints. The report was released at the end of May 2011, with 12 recommendations for action. Both ACL/Navitas and

Resolve FM cooperated fully with the review and have taken action on all relevant recommendations.

Increased Numbers of Protection Visa Holders

The number of protection visa holders has increased significantly since the contract commenced, and especially in the last twelve months. In the current rental market for single clients is becoming difficult for this client group as there are very little or no affordable rental properties for single clients in the rental market.

Resolve FM consults with single clients to try to pair them together with other IHSS single clients and or explain to them by sharing together with a friend or a family member will increase their changes of securing long term accommodation in the rental market including sharing the cost of rent, utilities etc.

The average single client can only afford up to $160-$170 per week on rent which is 50% of the weekly income. If they choose to share with a second person they can afford up to $300 per week depending on the benefits from Centrelink.

In the past twelve months the number of protection visa holders referred to us under the IHSS program was 636 arrivals. The table below shows the number of protection visa holders referred to us in this reporting period.

Month	Number	Percentage over other Arrivals
July 10	63	60%
August 10	37	63%
September 10	29	44%
October 10	58	34%
November 10	37	24%
December 10	59	44%
January 11	56	20%
February 11	61	27%
March 11	53	39%

The sustained level of PV referrals during this reporting period was also an issue in relation to STTC services, with an increased impact on client counselling needs resulting from the nature of the journey to Australia, as well as the length and nature of detention.

Saturation of Settlement of LTA Areas

The volume of affordable properties available for entrants has declined significantly since the contract commenced, as reported to the Department and the sector during the contract period. The clients chose between 18 main suburbs to move to their long term accommodation in the Sydney area. This resulted in a negative effect on the rental market vacancy levels in those suburbs.

Client's Repaying Debts

Some clients may be placed under financial stress while repaying their debts owed to Resolve FM. Debts were incurred, in some instances, due to direct debit payments for STA rent being rejected due to insufficient funds available at the time. In some cases, debt was incurred due to damage done by the clients to the STA property. The instalments clients make to repay these debts extend past the contract end date.

4. SERVICE PROVIDER PERFORMANCE

Summary Table

Ref	KPI	Target %	Result	Met/Not met	Action Plan (if warranted)
4.1.1	Needs assessments and case coordination plans	**100**	87.4%	Not met	Comment: This was substantially due to client circumstances, out of ACL's control.
4.1.2	Delivery of services and referrals	**75**	97.9%	Met	
4.1.2 b	Transfers	**100**	100%	Met	
4.1.3	Proposer support	**75**	99.7%	Met	
4.1.4	Assistance in delivering community networks	**75**	97.9%	Met	
4.1.5	Development of collaborative relationships	**STO satisfaction**		Met	
4.2.1	On arrival reception, assistance and transport	**75**	98.7%	Met	
4.2.2	Orientation	**75**	99.2%	Met	
4.2.3	Emergency medical and/or clothing needs	**100**	100%	Met	
4.3.1	Initial accommodation satisfaction	**75**	86.3%	Met	
4.3.1 b	Initial accommodation meets contractual requirements	**100**	100%	Met	
4.3.2	Provision of food	**75**	91.9%	Met	
4.3.3	Tenancy agreement	**75**	98.3%	Met	
4.3.3 b	Assistance to complete property condition report	**75**	98.6%	Met	
4.3.3 c	Assistance with understanding documentation	**75**	95.9%	Met	
4.3.3 d	Eviction proceedings	**100**	N/A	N/A	Does not apply in this reporting period

4.3.4	Established in longer-term accommodation within 10 weeks	**75**	39%	Not met	
4.3.4 b	Longer-term accommodation satisfaction	**75**	91.2%	Met	
4.3.4 c	Support to find longer-term accommodation	**75**	95.5%	Met	
4.3.5	Household Goods Assistance	**100**	91.7%	Met	
4.3.6	Tenancy training	**75**	98.8%	Met	
4.3.6 b	Rental reference	**75**	96.2%	Met	
4.3.7	Networking/ Established in longer-term accommodation within 4 weeks	**DO NOT ASSESS (SAME AS 4.3.4)**			
4.3.7 b	Networking/ Longer-term accommodation satisfaction	**DO NOT ASSESS (SAME AS 4.3.4b)**			
4.4.1	Assessment of STTC needs	**100**	100%	Met	
4.4.2	Satisfaction with STTC	**75**	92.4%	Met	
4.4.3	Advocacy and training on torture and trauma issues	**STO satisfaction**		Met	
4.5.1	Entrant satisfaction with volunteers	**75**	96%	Met	
4.5.1 b	Volunteer satisfaction	**75**	75%	Met	
4.6.1	Advocacy and community awareness raising services	**STO satisfaction**		Met	

4.1 CASE COORDINATION, INFORMATION AND REFERRALS

EXPECTED OUTCOMES

- entrants have the knowledge, skills and support to begin to build their lives as part of the Australian community; and
- effective coordination in the delivery of IHSS services that ensures that entrants receive appropriate referrals and continuity of services without duplication or gaps in service delivery.

4.1.1 Needs assessments and case coordination plans

KPI

- extent to which entrants and proposers are assessed for IHSS service delivery and case coordination plans are developed.

STANDARD

- needs assessments and case coordination plans are established consistent with the specifications for **100% of clients**.

Provide a brief overview of progress on implementing Quality Assurance recommendations (where relevant):

N/A

Please complete the following: ***(include subclasses such as 201, 203, 204, 851 and 866 in refugee numbers)***

How many refugee needs assessments were conducted?	467
How many SHP needs assessments were conducted?	271
How many proposer needs assessments were conducted?	268
How many refugee case coordination plans were established?	492
How many SHP case coordination plans were established?	268
Were all needs assessments and case coordination plans completed within the first week of arrival?	No

Comments:
There was 1 refugee case for which the needs assessment and case coordination plan were completed at 8 days after arrival.

There were 32 866 cases for which needs assessment and case coordination plan were not completed within 1 week of arrival. The 2 main factors affecting this were the inability to make contact with the client immediately after visa grant and the client not available for interview within the first week after visa grant due to other commitments.

There were 60 SHP cases for which needs assessment and case coordination plans were not completed within 1 week of arrival. In most cases, there were difficulties contacting the Proposer and in 6 cases, ACL received the referral after the client had arrived.

Were there any instances where needs assessments and/or case coordination plans were not established?	Yes
Comments: There were 4 866 cases and 4 SHP cases where there was no contact made with the clients. After numerous attempts to make contact, the cases were finalised without any service delivery.	
Have 6 sample needs assessments and case coordination plans been provided to the department, as requested by the IHSS Contract Manager?	Yes
Comments: Please see the following Attachments: 5 for Refugee Case Coordination Plans and Needs Assessments – Northern Metropolitan Region 6 for Refugee Case Coordination Plans and Needs Assessments – Southern Metropolitan Region 7 for SHP Case Coordination Plans and Needs Assessments – Northern Metropolitan Region 8 for SHP Case Coordination Plans and Needs Assessments – Southern Metropolitan Region	

4.1.1 NEEDS ASSESSMENTS/CASE COORDINATION PLANS	
Method/s used to determine KPI result of needs assessments and case coordination plans are established consistent with the specifications for **100% of clients**.	**Result 87.4%**
Methodology: The result has been calculated as a proportion of cases which did not meet the KPI of completion within 1 week of arrival. Please see explanations in the comments box above for delays experienced in completing these activities. Cases for which there was no contact at all and no service delivery outcomes were not included in this calculation.	Results: 87.4%
Comments: *use information above to determine whether standard met* The KPI was not met predominantly due to circumstances beyond the control of ACL's Case Coordinators and not due to lack of effort.	

4.1.2 Coordinated delivery of services and provision of referrals

KPI

- extent to which clients are satisfied with the scope, timeliness and effectiveness of service delivery.

STANDARD

- **75% of entrants** are satisfied with the scope, timeliness and effectiveness of service delivery; and
- **all** transfers are notified to the department.

Provide a brief overview of progress on implementing Quality Assurance recommendations (where relevant):

N/A

Please complete the following: ***(include subclasses such as 201, 203, 204, 851 and 866 in refugee numbers)***

Were all entrants assisted to register with Centrelink and Medicare within 2 working days of arrival?	No
Comments: ACL books all initial appointments through a generic Centrelink Refugee Unit email address. ACL accepts the first available appointment, which might not fall within 2 working days of arrival. Despite occasional delays, ACL consistently advises Centrelink of the arrival date and clients are entitled to payments effective from the date of arrival. Medicare enrolments were managed within timeframes.	
Were all entrants assisted to open a bank account within 1 week of arrival?	Yes
Comments:	
Have 3 samples of exit interview documentation been provided to the department, as requested by the IHSS Contract Manager?	Yes
Comments: Please see Attachment 9 for exit interview documentation for the Northern Metropolitan Region and Attachment 10 for exit interview documentation for the Southern Metropolitan Region.	

Provide a brief overview of the general approach and any new initiatives to coordinating and monitoring services and referrals for refugees since the last report:

With the three, short contract extensions during this reporting period, the focus was on impending contract end. To this end, there was a significant increase in monitoring of progress in settlement service delivery and an increased level of monitoring of partner service delivery to ensure that clients could complete services before the end of the Transition Out period.

Provide a brief overview of the general approach and any new initiatives to coordinating and monitoring services and referrals for SHPs since the last report:

As above.

In addition, as contract end approached, ACL dealt with 80 SHP referrals for which we did not provide services other than the assessment of Proposer capacity. 74 of these SHP cases were subsequently re-referred to the incoming SP, as the clients did not arrive before 4 April 2011. All information on these assessments was uploaded into HEMS.

For 6 of these 80 cases, the Proposer assessment was not carried out, as ACL was unable to contact the Proposer.

Provide a brief overview of feedback received on pre-embarkation training and/or information received by entrants since the last report:

Feedback on the pre-embarkation training is sought from clients at the time of exit and clients are asked about what training/information they received and what they found most helpful.

Of the 514 responses to questions regarding pre-embarkation training, there were 122 interviewees who reported that no training was provided/they did not remember any training being provided. The summary of main points below, then, reflect the opinions of the remaining 392 respondents.

Sample comments about information which clients felt was most helpful for their settlement after arrival in Australia include:

- The way of life in Australia, the government system and the rights and obligations of people under Australian law
- How to budget money and understand the Australian cost of living
- Information about English classes and school
- Information about gambling problems
- Emergency numbers, shopping in Australia, how to use public transport, banking and ATMs, budgeting money, Centrelink, English classes
- Information about Australian money and driving in Australia, including the rules for traffic control
- Information about education and equality between all cultures
- Information about how to find a job in Australia after we arrive
- Information about Medicare cards and healthcare cards
- Information about assistance in settlement in Australia
- Information about moral behaviour expectations, body language and verbal communication

A significant number of respondents said that all the information was helpful.

A negative comment was “The DVDs were very helpful but they told me I would receive $1000 when I arrived here and that is not true.”

For a full report of the feedback received at interview, please see Attachment 11.

4.1.2 DELIVERY OF SERVICES AND PROVISION OF REFERRALS	
Method/s used to determine KPI result of **75% of entrants** are satisfied with the scope, timeliness and effectiveness of service delivery	**Result 97.9%**
Methodology: At exit, all clients are surveyed by an independent	Results: 97.9%

worker and survey results are tabulated. 1266 refugee cases were exited in this reporting period. 1158 exit surveys (91.5% of all exited cases) were conducted. Of the remaining 108 cases: • 105 families were unable to be contacted at the time of exit. • 1 cases was for a baby and • 2 P/As declined to be interviewed. For a summary of survey results, please see Attachment 12.	There are 6 CCIR questions in the exit survey: 1. Needs assessment: 99% of respondents are satisfied/very satisfied. (N = 1124). 2. Initial referrals (Bank, Medicare, Centrelink): 100% of respondents for whom this question applies are satisfied. (N = 913). 244 respondents said that this question does not apply and 1 respondent was not satisfied with this service. 3. Referral to STARTTS – outcomes of counselling: 95% of respondents for whom this question applies are satisfied. (N = 876). 2623respondents said that this question does not apply and 3 respondents were not satisfied. 4. Referral to STARTTS – timeliness: 99% of respondents for whom this question applies are satisfied. (N = 906). 26.7% of respondents said this question does not apply (N = 244) and 8 respondents are not satisfied. 5. Assistance with medical/dental needs: 99.5% of respondents for whom this question applies are satisfied (N = 1000). 15% of respondents said this question does not apply (N = 153). 5 respondents were not satisfied. 6. Referral to MA for volunteer support: 95% of respondents for whom this question applies are satisfied. (N = 99). 91% of respondents said that this question does not apply (N = 1054). 5 respondents are not satisfied.
Comments: *provide details on the forms used to collect feedback* *provide explanatory narrative on any instances of clients who were not satisfied*	

4.1.2 b TRANSFERS	
How many transfers occurred during the reporting period?	183 cases transferred into regions 113 cases transferred out of regions
Was the department notified of all transfers as soon as service provider was aware?	Yes
Was the KPI standard of notifying the department satisfied for **all** transfers?	Met
Comments:	

4.1.3 Proposer support

KPI
- extent to which proposers are satisfied with the level of support received.

STANDARD
- **75% of proposers** report that they are satisfied with the level of support received.

Provide a brief overview of progress on implementing Quality Assurance recommendations (where relevant):

N/A

Please complete the following:

Was information and guidance provided to proposers relating to: • issues they may encounter in assisting entrants to settle? • realistic expectations in assisting entrants to settle? • how they can assist entrants to access services such as Centrelink, Medicare, AMEP, childcare etc?	Yes
Comments: In addition to verbal advice as the entrant family begins to settle in, each Proposer is provided with a comprehensive information pack with brochures and printed information on mainstream and community sector agencies which might be of assistance to the Proposer in settling the entrant family.	

Common areas in which proposers required assistance/support?

1	STA accommodation for entrant family on arrival
2	Organising initial appointments and advice on the sequence – which ones are time-sensitive and urgent and which ones can be done at their leisure.
3	Sourcing and securing LTA, as Proposers found this difficult in the current private rental market

4.1.3 PROPOSER SUPPORT	
Method/s used to determine KPI result of **75% of proposers** report that they are satisfied with the level of support received.	**Result 99.7%**
Methodology: A Proposer satisfaction survey is conducted at the same time that an SHP client is exited from the IHSS. While there were 587 SHP families exited in this reporting period, ACL conducted 535 Proposer	Result: 99.7% of Proposers are satisfied/very satisfied with the level of support received. Two of the four questions asked of Proposers relate directly to their satisfaction with service delivery.

satisfaction surveys. The difference (52) between exit figures and surveys analysed is accounted for by the following contexts: • 2 SHP exits were for clients granted a 202 visa on-shore and there was, therefore, no Proposer. • 49 Proposers were not able to be contacted at the time of exit. • 1 SHP client was upgraded to refugee services – there was no Proposer to interview. To a summary of the survey findings, please see Attachment 13.	**Information from Case Coordinator:** 99.6% of respondents for whom this question applies (N=515) are satisfied/very satisfied. 2 Proposers were not satisfied with information supplied. **Problem-solving assistance from the Case Coordinator:** 99.8% of respondents for whom this question applies (N=524) are satisfied/very satisfied. 0.2% of respondents (N=1) were not satisfied with support to solve problems. In addition, Proposers were asked about the Proposer Information Pack and the HGA for clients. **Proposer Information Pack:** 97% of respondents said they received the Information Pack (N=521). 14 respondents said they did not receive this information. **HGA assistance from RFM:** 97% of respondents said that the entrant family received an HGA package from Resolve FM (N=517). 3% of respondents said that this was not provided (N=18).
Comments: *provide details on the forms used to collect feedback* *provide explanatory narrative on negative or unsatisfied feedback received* Satisfaction survey forms have not been altered since they were last provided to the Department.	

4.1.4 Assistance in developing community networks

KPI
- extent to which entrants are satisfied with the assistance provided.

STANDARD
- **75% of entrants** report that they are satisfied with the level of support received.

Provide a brief overview of progress on implementing Quality Assurance recommendations (where relevant):

N/A

Please list common community networks to which entrants were introduced?

1	Ethno-specific community organisations, such as: • Iranian Community Organisation • Australian Karen Organisation • Tamil and Congolese community groups
2	Places of worship
3	Specific programs run by SGP-funded and other organisations, such as: • Youth programs • Homework help programs • Playgroups • Women's health groups • Sport and recreation organisations

What other guidance and practical assistance was provided to help entrants adjust to life in Australia?

1	To minimise cultural dissonance related to role and gender relationships, many families were referred to early intervention and parenting programs and family relationship counselling, as appropriate.
2	At risk clients were linked to programs which are able to provide additional assistance. For example, NESH, a service which focuses on housing assistance for single, female-head-of-household families also provides additional support services to assist single mothers with child-rearing. Housing assistance through Red Cross for young parents also includes parenting support services. Clients were referred to this type of program as needed.
3	Housing information sessions – Resolve FM and ACL ran housing information sessions, with single clients as the main target group. The sessions covered information on

affordability (related to family income), analysis of average rental prices in suburbs popular with refugee clients/families and discussion of housing options for singles receiving Newstart Allowance as their sole income.

In addition to these formal sessions, clients were provided with information on eligibility for social housing, application processes for social housing (including discussions on availability). Near contract end and for clients still not in LTA, Case Coordinators spent time and effort to inform clients on the cost of housing in the private rental market and realistic rents (what they can afford – to avoid an unsustainable tenancy – and what they might have to realistically pay – for those clients who set an unrealistic upper limit on what they were prepared to pay).

4.1.4 ASSISTANCE IN DEVELOPING COMMUNITY NETWORKs	
Method/s used to determine KPI result of **75% of entrants** report that they are satisfied with the level of support received.	**Result 97.9%**
Methodology: At exit, all clients are surveyed by an independent worker and survey results are tabulated. For a summary of survey results, please see Attachment 12.	Results: 97.9% 3 survey questions relate to networks 1. Assistance to enrol children in school and/or adults in English language/training programs: 99.7% of respondents for whom this question applies are satisfied/very satisfied (N = 1014). 13.8%% of respondents said this question does not apply (N = 141) 2. Assistance to link with community/religious organisations: 99% of respondents for whom this question applies are satisfied/very satisfied (N = 436). 61.8% of respondents said that this question does not apply (N = 716). 6 respondents were not satisfied. 3. Learning about the community with a volunteer: 95% of respondents for whom this question applies are satisfied. (N = 99). 91% of respondents said that this question does not apply (N = 1054). 5 respondents are not satisfied
Comments: *provide details on the forms used to collect feedback* *provide explanatory narrative on negative or unsatisfied feedback received* Survey forms have not changed since last submitted to the Department.	

4.1.5 Development of collaborative relationships

KPI
- extent to which the service provider is able to establish collaborative relationships.

STANDARD
- department is satisfied with the extent of relationships established by the service provider.

Provide a brief overview of progress on implementing Quality Assurance recommendations (where relevant):

N/A

What activities have you undertaken to establish and maintain collaborative relationships with providers such as AMEP/ SGP/Centrelink/Medicare/Job Network and other stakeholders since the last report?

1	AMEP – information, referral and registration arrangements are clear for all AMEP providers across the areas serviced by this IHSS contract. Clients are able to be registered for assessment so the AMEP can be tailored to suit their needs (location, fulltime, part time, Home Tutor, Distance Learning and Employment Pathways). The ACL IHSS is represented on the ACL AMEP Community Advisory Panel to ensure that refugee and humanitarian settlement matters and trends are incorporated into the ongoing thinking around AMEP services delivery. The ACL IHSS has regular contact with the NSW AMES AMEP Consortium (also represented on the ACL ICAP) and its partners to ensure that the most appropriate AMEP referral that suits the settlement needs of entrants is enacted in their interests.
2	Active involvement in and, in some cases, formal reporting to all key stakeholder networks in Newcastle, Sydney and Wollongong. These are detailed in the ACARS section of this report on pps 62 to 66. Some networks are specific interest groups, such as the Refugee Health Improvement Network or Centrelink-convened Regional Advisory Committees, while others are specific to clients and services in a geographic location (usually organised around Local Government Areas (LGAs). Participation in these forums provides opportunities for ACL to report on IHSS services and/or raise issues and trends arising in the program as well as an opportunity to keep abreast of initiatives in the settlement, community and government sectors which may benefit the settlement of IHSS clients. ACL continued to convene the IHSS Community Advisory Panel (ICAP) in this reporting period. The final ICAP meeting was held in December 2010, as at that stage the contract was due to be completed by 31 January 2011. This group had a widely representative membership comprised of government, community and settlement sector organisations. In the final meeting of this group, many members took the opportunity to make comment on the value of the meetings throughout the contract period.
3	SGP-funded organisations – ACL IHSS interacts with SGP-funded organisation in a range of different capacities, including through network meetings, as explained above. There was a concerted effort in this reporting period to encourage a greater number of SGP-funded organisations to attend the IHSS Community Advisory Panel (ICAP) meetings in order to keep in touch with issues and trends in IHSS service delivery and to provide feedback to the ACL IHSS Consortium on any service delivery issues of which they are aware and which might lead to service improvement for clients. This strategy had some

positive effect for the last 2 ICAP meetings convened in this contract.

ACL makes an effort to attend and network with SGP-funded organisations through the DIAC-convened Settlement Service Providers Forum (SSPF) held quarterly.

The activity which has generated the most significant interaction with SGP-funded agencies is the exit and referral of IHSS clients at the conclusion of their IHSS services. In this reporting period, ACL exited 1266 refugee/866 clients and 587 SHP clients to a range of SGP-funded agencies, including those which are ethno-specific in their service offerings. The referral destination is based predominantly on geographic location and client preference. The top 5 agencies which received refugee referrals on exit include: Auburn Diversity Services (335), Fairfield Migrant Resource Centre (228), the Hills, Holroyd Parramatta Migrant Resource Centre (174), SydWest Multicultural Services (132) and Liverpool Migrant Resource Centre (122). SHP clients were referred to: Fairfield Migrant Resource Centre (135), Liverpool Migrant Resource Centre (88), Auburn Diversity Services and Metro Migrant Resource Centre (85 each), the Hills Holroyd Parramatta Migrant Resource Centre (65) and SydWest Multicultural Services (48).

Finally, during this reporting period, the Manager, IHSS made a concerted effort to inform SGP-funded agencies about the 2011 Transition Out protocols required of all IHSS Service Providers. This was done particularly because these requirements were entirely different to the last contract change in 2005 and because the 2011 requirements were likely to have an impact on SGP-funded agencies in two major ways:

- a ***significant*** number of IHSS clients would be exited and referred to SGP-funded agencies throughout the 4-month Transition Out period and
- a number of these exited clients would have received only 4 or 5 months of IHSS service delivery if they arrived in Australia during February or March 2011. Agencies were alerted to the potential impact on demands for their services of a shortened period in IHSS.

4.1.5 COLLABORATIVE RELATIONSHIPS	
Method/s used to determine KPI result department is satisfied with the extent of relationships established by the service provider.	**Result** **Met**
Methodology: Review level and extent of interactions with key stakeholders in the reporting period. Collaborative relationships with a broad range of government and community sector organisations are essential if the Consortium is to be in a position to provide efficient and effective settlement services to all clients in this program. Collaboration occurs at a program management level (involving personnel such as the General Manager, Government Programs, Manager, IHSS, Manager, Community Relations and Promotion and Training Coordinators) and at a service delivery level (involving the Operations Manager, Case	Results: Met

Coordinator Team Leaders and Case Coordinators). ***Strength in the Illawarra – a case in point*** In the Illawarra, ACL convenes the Illawarra Refugee Issues Forum (IRIF) as a mechanism to facilitate information flows, understanding of settlement requirements and creation of collaborative working relationships to improve service delivery and settlement outcomes. A focus of collaboration for this period has been the desire by all to improve the schooling experience for refugee young people. An IRIF working group was established to conduct a Refugee Youth Education Forum in Wollongong. Key partners were: Intensive English Centre staff from Warrawong High School, TAFE, JSAs, Wollongong City Council staff, The Smith Family, School, Teachers, School Counsellors and settlement workers. These key agencies met face to face and over the email to plan and conduct the Forum. The Forum raised and discussed issues around transition into school education for those with disrupted education, transition from primary to high school, remedial learning needs, community volunteer support (homework help) and further training and employment pathway needs (vocational training responses, TAFE "tasters" and Traineeships. Attendees also included: Job Service Agencies, IMS, TAFE, Police, School Principals and Group Training organisations The needs of young refugee arrivals in the Illawarra are well understood by key agencies concerned with their effective settlement and integration into the local community. Improved understanding of each other's roles and the way and manner that different needs can be met by working together with clear goals that are centred around the client's educational development. Cooperative relationships that have been consolidated as a result of working together on the Refugee Student Forum have assisted with ongoing collaboration on other matters and activities.	
Comments: *Service provider should rate own performance, and explain how they made the rating* *STO contract manager will report back whether they agree with rating*	

4.2 ON ARRIVAL RECEPTION AND ASSISTANCE

EXPECTED OUTCOME

- refugees are met on arrival, taken to accommodation and provided with sufficient information and assistance, including emergency assistance, to be able to function in their new environment.

4.2.1 Refugees are met on arrival and taken to accommodation

KPI

- All refugees are met at point of arrival and provided immediate assistance in either continuing their travel or locating appropriate accommodation.

STANDARD

- **75%** of refugees are satisfied with the assistance provided.

Provide a brief overview of progress on implementing Quality Assurance recommendations (where relevant):

N/A

Please complete the following: ***(include subclasses such as 204 in refugee numbers)***

How many refugees were met at the airport and either assisted with transit, or assisted with transport to initial accommodation?	324 cases were assisted. 515 cases provided with transit assistance **Total: 839**
Of those transiting, how many required overnight accommodation?	24
How many SHPs were met on arrival and assisted with transport to initial accommodation?	0
Were there any instances of refugees *not* being met at the airport and assisted with transport to initial accommodation?	Yes
Comments: There was 1 refugee case where relatives bought the ticket from Perth to Sydney and relatives met them at the airport.	

4.2.1 ON ARRIVAL RECEPTION, IMMEDIATE ASSISTANCE AND TRANSPORTATION	
Method/s used to determine KPI result of **75%** of refugees are satisfied with the assistance provided.	**Result 98.7%**
Methodology: At exit, all clients are surveyed by an independent worker and survey results are tabulated. For a summary of survey results, please see Attachment 12.	Results: 98.7% 4 questions on the survey apply to this KPI 1. Airport reception: 99.7% of respondents for whom this question applies are satisfied (N = 686). 40.6% of respondents said that this question does not apply (N = 470). 2 respondents were not satisfied with this service. 2. Transportation to accommodation: 99% of respondents for whom this question applies are satisfied (N = 648). 43.7% of respondents said this question does not apply (N = 506). 3. Meeting emergency medical needs: 100% of respondents for whom this question applies are satisfied (N = 9). 99% of respondents said that this question does not apply (N = 1149). 4. Meeting emergency clothing needs: 96% of respondents for whom this question applies are satisfied (N = 82). 92.6% of respondents said that this question does not apply (N = 1149).
Comments: *provide details on the forms used to collect feedback* *provide explanatory narrative on negative or unsatisfied feedback received* Survey forms have not been amended since last submitted to the Department.	

4.2.2 Orientation

KPI
- extent to which refugees are capable of confidently and safely utilising the accommodation and its facilities.

STANDARD
- **75%** of refugees are satisfied with the assistance and information provided.

Provide a brief overview of progress on implementing Quality Assurance recommendations (where relevant):

N/A

Please complete the following: ***(include subclasses such as 201, 203, 204, 851 and 866 in refugee numbers)***

Were all refugees provided with information/demonstrations on how to utilise accommodation and its facilities?	Yes
Comments: All those who accepted an IHSS STA property and, in some cases, a Caseworker provided orientation to the facilities at the link's premises.	
How many SHPs were provided with information/demonstrations on how to utilise accommodation and its facilities? As a percentage of all SHP arrivals?	13 5% of SHP arrivals
Comments:	
Were all refugees provided with $20 phone card or provided with a loaned mobile phone and $20 phone credit?	No
Comments: 442 cases were provided with a loaned mobile phone. 73 Protection visa holders declined a phone, as they already had one.	
Were all refugees provided with information on what to do in the case of an emergency?	Yes
Comments:	
Were all refugees provided with the Case Coordinator's contact number (or equivalent) in case of an emergency?	Yes
Comments:	

4.2.2 ORIENTATION	
Method/s used to determine KPI result of **75%** of refugees are satisfied with the assistance and information provided	**Result 99.2%**
Methodology: At exit, all clients are surveyed by an independent worker and survey results are tabulated. For a summary of survey results, please see Attachment 12.	Results: 99.2% 3 survey questions apply to this KPI 1. Assistance with signing documents and care of property: 99.6% of respondents who received this service were satisfied. (N = 487) 57.7% of respondents said this question does not apply. (N = 669). 2 respondents were not satisfied with this service. 2. Information/demonstrations on how to utilise accommodation and facilities: 98% of respondents who received this service were satisfied. (N = 561) 50.7% of respondents said that this question does not apply. (N = 587). 10 respondents were not satisfied with this service. 3. Tenancy training to assist with understanding of responsibilities: 100% of respondents who received this service were satisfied. (N = 357). 69% of respondents said that this question does not apply. (N = 801). 0 respondents were not satisfied with this service.
Comments: *provide details on the forms used to collect feedback* *provide explanatory narrative on negative or unsatisfied feedback received* Survey forms have not been amended since last submitted to the Department.	

4.2.3 Provision of emergency medical attention and/or clothing/footwear

KPI

- extent to which refugees have emergency requirements/needs met after arrival.

STANDARD

- **100%** of refugees have emergency requirements/needs met within 24 hours of arrival.

Provide a brief overview of progress on implementing Quality Assurance recommendations (where relevant):

N/A

Please complete the following: ***(include subclasses such as 201, 203, 204, 851 and 866 in refugee numbers)***

How many refugees required emergency health or clothing assistance on arrival?	1 case required medical assistance 49 cases required emergency clothing
Were these needs addressed?	Yes
Comments: In addition to the 1 refugee client requiring emergency medical attention, there was 1 transiting client (youngest child) who became ill during the flight to Sydney and required hospitalisation on arrival in Sydney. 49 families were assisted with emergency clothing on arrival (within 24 hours). A further 22 families were assisted to access additional clothing from inexpensive retail outlets or charity organisations in their first few weeks of arrival.	
Were all red alerts addressed within 24 hours of arrival?	N/A
Comments: In this reporting period, there were no Red Alert cases referred to ACL IHSS.	
Were all general alerts addressed with 72 hours of arrival?	Yes
Comments: In this reporting period, there were 39 General Alert cases, all of which were assisted to access medical assistance within prescribed timeframes.	
Were all entrants assisted to fulfil health undertaking requirements?	Yes
Comments:	

Provide a brief overview of how health alerts/health undertakings are monitored including new initiatives to ensure all requirements and timeframes were met in the reporting period

Red and General Alert protocols are well known by all ACLIHSS staff. Team Leaders are advised of every health alert. Though there were no Red Alerts during this reporting period, Team Leaders worked directly with Case Coordinators to ensure that the 39 General Alert cases were referred appropriately and within timeframes.

ACL has used a database report run monthly to confirm that action has been taken in regard to Health Undertakings and to monitor the timeliness of the response. This report is sent to the IHSS management, including Team Leaders, for follow up during supervision sessions with Case Coordinators.

4.2.3 EMERGENCY MEDICAL AND/OR CLOTHING/FOOTWEAR	
Method/s used to determine KPI result **100%** of refugees have emergency requirements/needs met within 24 hours of arrival	**Result 100%**

Methodology:	Results:
Monitor Red and General Alerts for timely response	100%
Assess requirements at the time of pre-arrival planning and at the airport on arrival. Conducted by Case Coordinators pre-arrival and Caseworkers conduct on-arrival assessment as per ACL policies and procedures.	Meeting emergency medical needs: 100% of respondents for whom this question applies are satisfied (N = 9). 99% of respondents said that this question does not apply (N = 1149).
At initial assessment interview, Case Coordinators assess any further requirement for additional medical/clothing/footwear requirements and make appropriate referrals. Clients are linked to charity and second-hand clothing outlets as well as inexpensive retail outlets in cases where additional clothing/footwear is required. In this reporting period, 22 families were assisted in this way.	
Emergency clothing/footwear: ACL exit survey provides indicative data regarding client satisfaction with this component of service for clients exited in this reporting period. This is not a reflection of the cohort who received the service during this reporting period. For summary of survey results, please see Attachment 12.	Meeting emergency clothing needs: 96% of respondents for whom this question applies are satisfied (N = 82). 92.6% of respondents said that this question does not apply (N = 1073).
Comments: *Use information above to determine whether standard met*	

4.3 ACCOMMODATION SERVICES

EXPECTED OUTCOME

- entrants have appropriate accommodation available on arrival, and if this is not suitable for the longer-term, that secure, stable, affordable and appropriate longer-term accommodation is found for them as soon as possible.

4.3.1 Provision of initial accommodation (where applicable)

KPI

- extent to which entrants are accommodated in initial accommodation that meets the standard requirements.

STANDARD

- **75%** of entrants are satisfied with the standard of initial accommodation provided; and
- **100%** of initial accommodation arrangements meet the contractual specifications.

Provide a brief overview of progress on implementing Quality Assurance recommendations (where relevant):

N/A

Please complete the following:

How many refugees were assisted with initial accommodation?	382
Comments: This total figure includes all refugee families, regardless of whether they accepted Resolve FM STA accommodation or not. As Resolve FM does not know whether a refugee will live with a link or relative prior to arrival then Resolve FM allocates and prepares an on-arrival property for all families pre-arrival. They also purchase food packages and arrange for food cash to be available. Hence, all families who arrived in this reporting period are deemed to have been assisted with initial accommodation.	
How many SHPs were assisted with initial accommodation?	12
Comments:	
Was the initial accommodation used approved by DIAC contract manager? (ie meet the contractual requirements)	Yes
Comments: Prior to leasing STA properties, DIAC approval is requested. A review of location, proximity to amenities and facilities in the property are assessed by DIAC before RFM lodges the application. A component of the IHSS QA process has been for DIAC to visit STA properties every 6 months to assess on-going suitability of the property and, where required, to recommend any repairs or improvements.	

For all entrants assisted with accommodation, did the service provider:

Cover the cost of the first four weeks of accommodation?	No
Collect fair market rent and full cost of utilities after week four?	No

Comments:
The cost of the first 4 weeks of accommodation (in-kind support) applies for refugees only. For SHP clients Resolve FM covered the cost of the first week of accommodation, then charged 30% of income or fair market rent for weeks 2, 3 and 4, whichever is the lower and then fair market rent after week 4.

Resolve FM continued to subsidise the fair market rent and full cost of utilities for a number of clients after week 4, as with the expected standard of STA accommodation required by DIAC, clients could not afford the fair market rent and utilities for accommodation in our Regions. This was the result of shifts and changes in the private rental market during the contract period. Properties which were affordable for clients in the tightening market were older properties and often in poor repair. This rendered them unsuitable as STA properties for IHSS clients. As the costs to head-lease STA properties were higher than clients could afford to pay, RFM subsidised their rent for the term of their stay in STA.

Examples of clients who required this subsidisation are single clients, single parents with one child and sometimes couples, depending on the STA property occupied.

4.3.1 INITIAL ACCOMMODATION	
Method/s used to determine KPI result **75%** of entrants are satisfied with the standard of initial accommodation provided; and	**Result 86.3%**
Methodology: Survey conducted at check-in	Results: 86.3% of clients are satisfied

Comments:
provide details on the forms used to collect feedback
provide explanatory narrative on negative or unsatisfied feedback received

One hundred and eighty four surveys were returned with the average result indicated above. A copy of the survey results has been included in Attachment 14. A copy of the survey form is included in Attachment 14.

There were a range of comments received from clients which prevented Resolve FM achieving 100% satisfaction level. Some of the comments recorded on the survey forms were:-

*Client stated STA not suitable for their living.
*At night cabin feels cold, and position too close to water for client's injuries.
*Thought $200 per week rent was too high
*Kitchen and bathroom were dirty
*Carpet stained. No orange juicer
*Dining table sticky. Burn marks in carpet. Unit smelt.
*No microwave, no rice cooker
*Did not like that they can't use own electrical equipment.
*some pots dirty on outside. Too many small pots.
*Area was noisy.
*Kitchen/bath is shared
*Kitchen appliances were dirty.
*Phone not call out and no internet
*Environment was smelly
*STA dark and not airy

4.3.1 b INITIAL ACCOMMODATION MEETS CONTRACTUAL REQUIREMENTS	
Method/s used to determine KPI result **100%** of initial accommodation arrangements meet the contractual specifications	**Result 100%**
Methodology: All properties used for initial accommodation are approved by DIAC prior to leasing by Resolve FM. DIAC also conducts STA property inspections and recommendations from these are acted upon by Resolve FM	Results: 100%

Comments:
Use information above to determine whether standard met

4.3.2 Provision of food

KPI

- extent to which entrants have adequate supplies of appropriate food until such time as income support is received.

STANDARD

- **75%** of entrants are satisfied with the standard of food provided.

Provide a brief overview of progress on implementing Quality Assurance recommendations (where relevant):

Please see Attachment 2.

Please complete the following:

Were all entrants accommodated in initial accommodation provided with an initial food package?	No
Comments: Food was not provided to SHP clients accommodated in initial accommodation.	

Provide a brief overview of how you ensure that food provided to entrants is culturally and religiously appropriate, including new initiatives in the reporting period

DIAC has approved the contents of the food package. All ongoing changes to the food package recommended by DIAC have been implemented. The initial food package, intended to provide food for the first couple of days, is supplemented by a cash component. Clients are able to purchase culturally appropriate food for the remainder of the week with the cash provided.

Provide a brief overview of how you ensure that food provided is consistent with the family size and is sufficient for the first week *(or until income support is received)*

The quantity of the food package is adjusted according to family size to ensure sufficiency. There is also a cash component, which is also adjusted by family size.

4.3.2 PROVISION OF FOOD	
Method/s used to determine KPI result **75%** of entrants are satisfied with the standard of food provided	**Result 91.9%**
Methodology: Survey conducted at check-in.	Results: 91.9% of clients are satisfied.
Comments: *provide details on the forms used to collect feedback* *provide explanatory narrative on negative or unsatisfied feedback received* One hundred and eighty four surveys were returned with the average result indicated above. A copy of the	

survey results has been included in Attachment 14. A copy of the survey form is included in Attachment14.

There were a range of comments received from clients which prevented Resolve FM achieving 100% satisfaction level. The majority of comments related to the refugee not realising cash forms part of the food package so a lower score was given. Some of the other comments recorded on the survey forms were:-

**Did not like Lebanese bread*
**Believes more food items should be provided and less cleaning products.*
**Not enough rice provided*
**Client expected better variety including meat.*
**Rice not enough*
**Client wanted Onions and Chilli powder as part of food package*
**Not enough food even with $180 cash provided.*
**No meat, didn't like the juice.*
**Did not like type of cheese.*
**Client not like type of bread.*
**Food and cash should be higher amount*
**not enough food*
**Food not suited to clients diet background*

4.3.3 Provision of/assistance with documentation

KPI

- extent to which an appropriate and acceptable tenancy agreement is explained, understood and signed by entrants using initial accommodation;
- extent to which an appropriate and acceptable property condition report is explained, understood and signed by entrants in initial accommodation;
- extent to which the department's contract manager is consulted prior to the commencement of any eviction proceedings in relation to entrants in initial accommodation; and
- extent to which entrants are provided with the assistance they need to understand and deal with documents in relation to longer-term accommodation.

STANDARD

- **75%** of entrants are satisfied with the standard of their tenancy agreement in terms of each of understanding and fairness;
- **75%** of entrants are satisfied with the assistance they received in relation to the completion of their property condition report;
- the department's contract manager is consulted in **100%** of cases prior to the commencement of any eviction proceedings; and
- **75%** of entrants are happy with the assistance they received in relation to understanding and dealing with documentation associated with longer-term accommodation.

Provide a brief overview of progress on implementing Quality Assurance recommendations (where relevant):

N/A

Initial accommodation – please complete the following:

Is a tenancy agreement in place for initial accommodation and has this been approved by the department?	Yes
Comments:	
Are entrants assisted to complete a property condition report for initial accommodation?	Yes
Comments:	
Were there any evictions from initial accommodation?	No
If so was the DIAC contract manager notified?	N/A
Comments:	

Longer-term accommodation – were entrants assisted to:

Make applications, enter into a lease, and complete property condition reports for longer-term rental properties?	Yes
Comments: Some clients had relatives assist them with these tasks and did not take up the offer for assistance from Resolve FM.	

4.3.3 PROVISION OF ASSISTANCE WITH TENANCY AGREEMENT	
Method/s used to determine KPI result **75%** of entrants are satisfied with the standard of their tenancy agreement in terms of each of understanding and fairness	**Result 98.3%**
Methodology: Survey conducted at check-in.	Results: 98.3% of clients are satisfied.
Comments: *provide details on the forms used to collect feedback* *provide explanatory narrative on negative or unsatisfied feedback received* One hundred and eighty four surveys were returned with the average result indicated above. A copy of the survey results has been included in Attachment 14. A copy of the survey form is included in Attachment 14.	

4.3.3 b PROVISION OF ASSISTANCE WITH PROPERTY CONDITION REPORT	
Method/s used to determine KPI result **75%** of entrants are satisfied with the assistance they received in relation to the completion of their property condition report	**Result 98.6%**
Methodology: Survey conducted at check-in.	Results: 98.6% of clients are satisfied.
Comments: *provide details on the forms used to collect feedback* *provide explanatory narrative on negative or unsatisfied feedback received* One hundred and eighty four surveys were returned with the average result indicated above. A copy of the survey results has been included in Attachment 14. A copy of the survey form is included in Attachment 14.	

4.3.3 c PROVISION OF ASSISTANCE TO UNDERSTAND DOCUMENTATION	
Method/s used to determine KPI result **75%** of entrants are happy with the assistance they received in relation to understanding and dealing with documentation associated with longer-term accommodation	**Result 95.9%**
Methodology: Survey conducted after re-location to LTA.	Results: 95.9% of clients are satisfied.
Comments: *provide details on the forms used to collect feedback* *provide explanatory narrative on negative or unsatisfied feedback received* Seventy five surveys were returned with the average result indicated above. A copy of the survey results has been included in Attachment 15. A copy of the survey form is included in Attachment 15. Refugees are asked to complete these surveys after lease signing has been completed and after they have been moved into their LTA and the furniture has been delivered. We find the majority of refugees are too	

excited after having moved into their own LTA with new furniture and are not interested in completing LTA surveys. Hence the low survey numbers returned. Resolve FM are endeavouring to increase the number of surveys returned.

4.3.3 d EVICTION PROCEEDINGS	
Method/s used to determine KPI result the department's contract manager is consulted in **100%** of cases prior to the commencement of any eviction proceedings	**Result** **N/A**
Methodology: RFM procedures require that staff not commence eviction proceedings without prior approval from DIAC contract manager(s).	Results: Does not apply in this reporting period.
Comments: *Use information above to determine whether standard met* No clients have been evicted since the commencement of the contract.	

4.3.4 Longer-term accommodation

KPI

- extent to which entrants are able to find and lease appropriate and affordable longer-term accommodation.

STANDARD

- **75%** of entrants are:
  - located in longer-term stable accommodation within **6-10 weeks** of arrival;
  - satisfied with their longer-term accommodation; and
  - satisfied with the level of support they receive in relation to longer-term accommodation.

Provide a brief overview of progress on implementing Quality Assurance recommendations (where relevant):

Please see Attachment 2.

Please complete the following: ***(include subclasses such as 201, 203, 204, 851 and 866 in refugee numbers)***

How many refugees were assisted to secure longer-term accommodation?	991
How many SHPs were assisted to secure longer-term accommodation?	39
What was the average time taken to locate entrants in longer-term accommodation?	138 days
Comments:	
Were entrants supported in negotiations with real estate or other agents?	Yes
Comments:	
Were eligible entrants assisted to obtain Government rental and/or utility bond assistance for their longer-term accommodation?	Yes
Comments:	
Where relevant, were entrants assisted with moving possessions from initial to longer-term accommodation?	Yes
Comments:	
Were entrants assisted to connect utilities to their longer-term accommodation?	Yes
Comments:	

4.3.4 LONGER-TERM ACCOMMODATION	
Method/s used to determine KPI result **75%** of entrants are located in longer-term stable accommodation within **6-10 weeks** of arrival	**Result 39%**
Methodology: Statistics were extracted from the RFM database.	Results: 39% of clients were located within 6 – 10 weeks.

Comments:
provide figures and information to determine whether standard met, include narrative bout why additional time may be required

The client's right of choice are paramount in sourcing and securing LTA. There is many times where Resolve FM just cannot meet their instructions. In addition, the tight rental property market compounded by the affordability of properties impacts on delivery of this KPI.

Note: This figure includes clients with complex case management issues such as marriage relationship issues, domestic violence, health issues, clients who have travelled overseas while still staying in STA. Also included are clients who are waiting for relatives to be approved for refugee visas and to arrive from overseas before they are willing to move to LTA.

Issues which affect the achievement of this KPI have been regularly reported to the Department through six-monthly reports, Annual Reports and contract management reports.

4.3.4 b LONGER-TERM ACCOMMODATION SATISFACTION	
Method/s used to determine KPI result **75%** of entrants are satisfied with their longer-term accommodation	**Result 91.2%**
Methodology: Survey conducted after re-location to LTA.	Results: 91.2% of clients are satisfied.

Comments:
provide details on the forms used to collect feedback
provide explanatory narrative on negative or unsatisfied feedback received

Affordable properties for our clients (who are on Centrelink benefits) are at the very low quality end of the rental market. Many clients do not appreciate the changes that have occurred to rental prices in the property rental market and expect near new or newly refurbished properties, which are unaffordable to them.

This expectation impacts on their satisfaction level.

Clients choose their LTA property from a number of choices. Clients have usually submitted several applications before an application is approved. While clients may have aspired to a "better" property, they are usually glad to be approved and to be moving into a longer-term property after many application rejections.

In some cases, landlords are not prepared to do any repairs to a rental property at the start of the LTA lease even though they have previously agreed with the client to do them. This change in agreement upsets the client. This situation arises when the client has found a property independently and then requests that RFM lodge the application on their behalf. Resolve FM is, therefore, not aware of any agreements made as RFM staff were not involved in the initial discussions. No action can be taken by RFM, as the agreement was not in writing.

Seventy five surveys were returned with the average result indicated above. A copy of the survey results has been included in Attachment 15. A copy of the survey form is included in Attachment 15.

Refugees are asked to complete these surveys after lease signing has been completed and after they have been moved into their LTA and the furniture has been delivered. We find the majority of refugees are too excited after having moved into their own LTA with new furniture and are not interested in completing LTA surveys. Hence the low survey numbers returned.

4.3.4 c SUPPORT TO FIND LONGER-TERM ACCOMMODATION	
Method/s used to determine KPI result **75%** of entrants are satisfied with the level of support they receive in relation to longer-term accommodation	**Result 95.5%**
Methodology: Survey conducted after re-location to LTA.	Results: 95.5% of clients are satisfied.
Comments: *provide details on the forms used to collect feedback* *provide explanatory narrative on negative or unsatisfied feedback received* Seventy five surveys were returned with the average result indicated above. A copy of the survey results has been included in Attachment 15. A copy of the survey form is included in Attachment 15. Refugees are asked to complete these surveys after lease signing has been completed and after they have been moved into their LTA and the furniture has been delivered. We find the majority of refugees are too excited after having moved into their own LTA with new furniture and are not interested in completing LTA surveys. Hence the low survey numbers returned.	

4.3.5 Assistance with basic household goods

KPI
- entrants' assessed needs are met within the overall budget and on time.

STANDARD
- **100%** of entrants receive goods of a satisfactory standard in a timeframe which meets their requirements.

Provide a brief overview of progress on implementing Quality Assurance recommendations (where relevant):

Please see Attachment 2 regarding the 2 recommendations related to Household Goods.

Please complete the following:

Were household goods packages delivered on time (upon moving into longer-term accommodation)	Yes
Comments:	
Was assistance provided to assemble/install household goods packages?	Yes
Comments:	

Provide an overview of how the service provider ensures that household goods items are supplied to entrants in reasonable condition and according to contract specifications, including any new initiatives in the reporting period.
(ie. mattresses and linen are new, all necessary items are provided per household/person)

The entire HGA package consists of new products with 12 months warranty.

4.3.5 BASIC HOUSEHOLD GOODS	
Method/s used to determine KPI result **100%** of entrants receive goods of a satisfactory standard in a timeframe which meets their requirements.	**Result 91.7%**
Methodology: Survey conducted after re-location to LTA.	Results: 91.7%
Comments: *use information provided above to identify whether standard met* Seventy five surveys were returned with the average result indicated above. A copy of the survey results has been included in Attachment 15. A copy of the survey form is included in Attachment 15. Refugees are asked to complete these surveys after lease signing has been completed and after they have been moved into their LTA and the furniture has been delivered. We find the majority of refugees are too excited after having moved into their own LTA with new furniture and are not interested in completing LTA surveys. Hence the low survey numbers returned.	

4.3.6 Tenancy training

KPI
- extent to which entrants are in possession of good household management skills at the end of the training program.

STANDARD
- **75%** of entrants are satisfied with the tenancy training provided; and
- **75%** of entrants are provided with a reference to assist them to secure longer-term accommodation.

Provide a brief overview of progress on implementing Quality Assurance recommendations (where relevant):

N/A

Please complete the following:

How many entrants received tenancy training?	178
Comments: The above number excludes clients who transfer out to other regions or reject our STA and live with links or relatives. We endeavour to undertake tenancy training for refugees who reject our STA accommodation but nearly all decline our offer. We believe that their links are happy to show them how to care for a property in Australia. We also believe that links feel uncomfortable about Resolve FM coming to their property and using the links equipment and furniture as part of the demonstrations.	
How many of the entrants who received tenancy training were provided with a reference?	96
Comments: A reference is usually provided at the time the clients are sourcing and securing their LTA property. The difference between the first and second figures above is because the remaining entrants have not chosen a suitable LTA as yet.	

4.3.6 TENANCY TRAINING	
Method/s used to determine KPI result **75%** of entrants are satisfied with the tenancy training provided	**Result 98.8%**
Methodology: Survey is conducted at the completion of tenancy training.	Results: 98.8% of clients are satisfied.
Comments: *provide details on the forms used to collect feedback* *provide explanatory narrative on negative or unsatisfied feedback received* One hundred and eighty four surveys were returned with the average result indicated above. A copy of the survey results has been included in Attachment 14. A copy of the survey form is included in Attachment 14.	

4.3.6 b RENTAL REFERENCE	
Method/s used to determine KPI result **75%** of entrants are provided with a reference to assist them to secure longer-term accommodation	**Result 96.2%**
Methodology: Survey is completed when the client relocates from STA to LTA	Results: 96.2% of clients are satisfied.

Comments:
provide details on the forms used to collect feedback
provide explanatory narrative on negative or unsatisfied feedback received

All LTA applications have a covering letter which forms the client's reference. This reference is tailored to match the client. If a client does not keep the property clean and tidy then this aspect is not mentioned in the reference letter. Similarly, if the client is behind in rent then no mention is made on how well the client is paying rent. We still have difficulty in explaining to agents why rent is in arrears as this is not the Australian way for renting property.

Seventy five surveys were returned with the average result indicated above. A copy of the survey results has been included in Attachment 15. A copy of the survey form is included in Attachment 15.

Refugees are asked to complete these surveys after lease signing has been completed and after they have been moved into their LTA and the furniture has been delivered. We find the majority of refugees are too excited after having moved into their own LTA with new furniture and are not interested in completing LTA surveys. Hence the low survey numbers returned.

4.4 SHORT-TERM TORTURE AND TRAUMA COUNSELLING SERVICES

EXPECTED OUTCOMES

- entrants are able to access torture and trauma counselling; and
- entrants' health issues arising from their experience of torture and trauma are understood by other medical services and health professionals.

4.4.1 Assessment of the psychological needs of entrants

KPI

- extent to which entrants are able to access the counselling support that they need in a timely manner.

STANDARD

- **100%** of entrants report that they have had the opportunity to access appropriate short-term torture counselling services.

Provide a brief overview of progress on implementing recommendations from the Short-Term Torture and Trauma Evaluation or from QA reviews(where relevant):

QA Review recommendation:
That STARTTS address the unacceptably long waiting times between referral by ACL and initial appointment.

STARTTS implemented a range of strategies to reduce the waiting times between referral by ACL and initial appointment, including:

- Recruitment of 6 new counsellors in February 2010.
- Engagement of three part-time contractors with experience in assessment, and in EIP services, in June 2010
- Assigning recently-recruited counsellors to undertaking assessments only during the first 3-4 months of their employment with the EIP
- Running group screening sessions with appropriate target communities, including Afghan, Iraqi and Tamil, to identify clients who need torture and trauma counselling.

These strategies had a positive impact on waiting times, with a reduced number of clients waiting more than 45 days as at June; and an ongoing reduction over the remainder of the contract.

As noted in STARTTS initial response to the 2010 QA report, the visible impact of STARTTS strategies was obscured to some extent by factors including the significant level of referrals during March 2010 (163 cases); followed by sustained referral numbers (115 in April and in May 2010); together with a significant increase in single unit families, and an increase in the number of family members requesting counselling.

Waiting times continued to decrease on a sustained basis during this reporting period, with an ongoing reduction in subsequent months to the end-contract date. (See note regarding mean and media scores for the reporting period)

Please complete the following: ***(include subclasses such as 201, 203, 204, 851 and 866 in refugee numbers)***

Were all entrants offered a referral to short-term torture and trauma counselling?	Yes
Comments: Removal of the 100% referral requirement in late 2010 resulted in a subsequent significant decrease in client referral numbers. Whilst the overall referral numbers in October 2010-January 2011 reflected to some extent the significant decrease in arrival numbers during this period, the rate of referral also declined substantially.	
How long after referral to short-term torture and trauma services was an initial assessment held?	Mean = 85.52 days Median = 84 days

Comments:

STARTTS measures timely access to assessment and counselling services in the following ways:

- length of time from date referral received to date allocated to counsellor:
- length of time from date of allocation to date of counsellor's first attempt at contact
- length of time from date of first attempted contact to date of first assessment session
- length of time from referral date and date of first session

The table below provides both the mean and median in days for each one of the above criteria for the families where assessment was completed during the period 1 July 10 – 30 June, 2011.

	Length of time between Referral date and allocation date (in days)	Length of time between allocation and first attempt at contact (in days)	Length of time between first attempt at contact and first assessment session.	Length of time between Date of Referral and date of initial assessment session.
Mean	68.91	1.18	15.58	85.52
Median	71.00	0.00	11.00	84.00

This represents a significant overall decrease in waiting times from the 2009/2010 report, when the mean was 101 days and the median was 106 days (representing a 16% and 20% reduction respectively), and is a further reflection of the strategies which STARTTS implemented to reduce client waiting times for assessment.

4.4.1 ASSESSMENT OF NEEDS	
Method/s used to determine KPI result **100%** of entrants report that they have had the opportunity to access appropriate short-term torture counselling services.	**Result 100%**
Methodology: For part of this reporting period, all IHSS clients were referred to NSW STARTTS as a matter of course. This automatic referral was dispensed with in September 2010. Following that, every Case Coordinator, at the needs assessment interview on arrival, provided clients with information about short-term torture and trauma counselling services. All clients who requested a referral at that time, or at any other stage of their IHSS services, were referred to STARTTS.	Results: 100%
Comments: *use information provided above to determine whether standard is met*	

4.4.2 Detailed case plan of interventions

KPI
- extent to which the counselling sessions provided meet the needs of entrants.

STANDARD
- **75%** of entrants are satisfied with the service provided.

Provide a brief overview of progress on implementing recommendations from the Short-Term Torture and Trauma Evaluation (where relevant):

N/A

Provide a brief overview of the process establishing and implementing a case plan which will meet the needs of the entrant.

This process is unchanged in this reporting period. STARTTS has a clear conceptual framework to inform counselling intervention practice. STTTC counsellors use the Refugee Comprehensive Assessment Tool (R-CAT) that provides a comprehensive individual and/or family psychosocial assessment to allow short term counselling interventions and referrals to appropriate services

1. EIP counsellors conduct a psycho –social assessment with all referred new arrivals to assess their settlement needs, physical and psychological wellbeing. STARTTS counsellors used the

2. Initial psycho-social assessment is completed after a minimum of two sessions, counsellors discuss key assessment goals (including: understanding how past experiences affect day to day living, understanding the resettlement process and clients participation in decision making process) together with clients.

3. After assessment is completed some clients engage in short term counselling (between 8 -12 sessions), where the counsellor prioritises clinical goals (including: manage traumatic stress symptoms, manage anger and aggressive behaviour, grief, and most importantly ongoing support in relation to settlement and health needs).

Within the treatment plan counsellors may identify the need for long term therapy and therefore referral to General Service's team is undertaken and handover procedures are ensured. In some situations, plans for client discharge within a 6-month time frame are significantly altered by crises which arise during the STTTC service, and require a longer period of counselling within the EIP.

STARTTS resolved, on the basis of the changed HSS tender process, to create a Direct Services Program which would provide TT counselling services to both newly-arrived and longer-term residents. This new structure commenced in July 2011. All clients were discharged from the EIP by 30 June 2011: whilst a number were discharged completely from STARTTS services, around 190 clients were discharged from the EIP and retained for counselling under the new Direct Services Program, in light of their relative recency of arrival and/or counselling needs.

<u>Counselling</u>
Whilst the majority of counselling services are provided on an individual basis, STARTTS continued to use group interventions during this period as a strategy to support clients for whom it was a more appropriate option.

- A second Iraqi Women's group was established in early February 2011 and ran until end-July 2011.
- Planning for a Chaldean community consultation was undertaken during this reporting period.

EIP staff also participated in planning the camps conducted by STARTTS during this period, with different counsellors each attending a camp.

4.4.2 SATISFACTION WITH STTC	
Method/s used to determine KPI result **75%** of entrants are satisfied with the service provided.	**Result 92.4%**
Methodology: The Client Satisfaction Questionnaire – CSG-8+2 – is used across all client groups in Metropolitan Regions, and is provided in English, Arabic, Burmese, Dari, Farsi, Karen and Swahili. Interpreters are engaged to provide verbal translation of the questionnaire to clients who are not literate. STARTTS' procedure is to provide clients with the questionnaire at their final session; where this is not possible, delivery of the questionnaire by post or telephone is undertaken. The rate of discharge during this reporting period, when STARTTS worked to the agreed Transition Out Plan, and then the actual Transition Out period, resulted in a reduction in the rate of return of questionnaires. 504 entrant families were discharged after completion of assessment, and 258 counselling clients were discharged between 1 July 2010 and 30 June 2011. This represents an increase in discharge numbers compared to 2009, when 458 assessment-only families and 562 counselling clients were discharged during the reporting period. See Attachment 17 for a table detailing responses to the questionnaire.	Results: 92.4%

Comments:
provide details on the forms used to collect feedback
provide explanatory narrative on negative or unsatisfied feedback received
Responses to all questions except Question 3 indicated levels of satisfaction between 90% and 98%. Responses to Question 3, which asks to what extent STARTTS Early Intervention Program has met client needs, showed that 79% of clients reported that almost all/most of their needs had been met. This lower level of satisfaction, considered in conjunction with the significant level of satisfaction in relation to other questions, reflects both the high level of needs faced by IHSS clients, and the fact that many of their needs are not those which can or should be addressed by STTTC services.

4.4.3 Advocacy and training

KPI

- extent to which the department is satisfied that agreed activities have been undertaken and reported on.

STANDARD

- the department is satisfied that **all** agreed activities have been undertaken in a satisfactory manner.

Provide a brief overview of progress on implementing recommendations from the Short-Term Torture and Trauma Evaluation and/or from the Quality Assurance Program (where relevant):

N/A

Please complete the following:

Has an annual plan for advocacy and training of medical and other health professionals been developed and agreed upon?	No

Provide an overview of progress on implementing activities contained in the annual plan.

Whilst there was no Annual Plan agreed for this reporting period, as noted earlier in the report, STARTTS continued to provide training in line with the direction of the 2010 Annual Plan.

STARTTS developed close working relationships with a number of key agencies, particularly Community Services (then-DOCS) and Centrelink, during delivery of IHSS services, and worked closely with them to tailor training to support effective service delivery to humanitarian entrants during and beyond the timeframe for IHSS services. STARTTS ceased training and invoicing clients in relation to the IHSS Program at the end-contract date (April 2011).

4.4.3 SHORT-TERM TORTURE AND TRAUMA ADVOCACY AND TRAINING	
Method/s used to determine KPI result the department is satisfied that **all** agreed activities have been undertaken in a satisfactory manner.	**Result** **Met**
Methodology: • Consult with external agencies and STARTTS staff to identify further areas for training • Review participant feedback to identify areas for further development.	Results: Met

Comments: *Service provider should rate own performance, and explain how they made the rating* *STO contract manager will report back whether they agree with the rating* Training sessions were provided to 854 participants during this period, for a total of 131.5 hours. Feedback was uniformly positive across the training sessions, with participants indicating that the training would support their capacity to work with humanitarian clients.

4.5 VOLUNTEER COORDINATION

EXPECTED OUTCOME

- volunteers have defined and meaningful roles in the delivery of IHSS services within an accountable management framework.

4.5.1 Establishment and maintenance of a volunteer management framework, incorporating a position of volunteer coordinator

KPI

- extent to which the management framework is established and implemented in accordance with the requirements.

STANDARD

- **75%** of entrants are satisfied with volunteer support provided; and
- **75%** of volunteers are satisfied with volunteer management arrangements.

Provide a brief overview of progress on implementing Quality Assurance recommendations (where relevant):

N/A

Please complete the following:

Do you have an annual process in place for seeking volunteer feedback on volunteer management processes?	Yes
Do you have a process in place for seeking entrant feedback on volunteer support provided?	Yes

Provide a brief overview of any issues (if any) with volunteers/volunteer groups and steps taken to resolve these issues during the reporting period.

N/A

4.5.1 ENTRANT SATISFACTION WITH VOLUNTEERS	
Method/s used to determine KPI result **75%** of entrants are satisfied with volunteer support provided; and	**Result 96%**
Methodology: Clients who exited the VCU service between 1 July 2010 and 31 March 2011 were surveyed. **104 clients** were exited in this period and **51 surveys** were completed giving a response rate of **49%**.	Results: 96%

Clients were either contacted by telephone or post. For clients contacted by telephone who could not speak English, TIS (Telephone Interpreting Service) was used. Surveys were posted to clients who, after two attempts could not be contacted by telephone. As the hard copy survey is not available in community languages, those who received the survey in the post received it in English.	

Comments:
provide details on the forms used to collect feedback
provide explanatory narrative on negative or unsatisfied feedback received

The purpose of the client survey is to gain feedback from clients and their families about VCU service delivery and areas for improvement. It aims to measure levels of client satisfaction and the extent to which the above client objectives are being met.

The survey is designed to provide client feedback on the following areas:

- Length and frequency of volunteer visits;
- Activities volunteers assisted with;
- Activities clients would like more help with;
- Whether or not clients were happy with their volunteer;
- If having a volunteer helped with settlement in Australia; and
- How Mission Australia can improve its service.

Respondents by gender

Female	23	45%
Male	28	55%
Total	51	100%

How often did your volunteer visit you?

Every week	11	21.5%
Every 2 weeks	25	49%
Once a month	6	12%
N/A	0	0%
Other/comment	9	17.5%
Total	51	100%

9 (17.5%) respondents answered “Other” or supplied a comment when asked about the frequency of visits. 1 stated that the volunteer only visited them once while 1 stated that the volunteer did not visit them at all. 4 stated that they couldn’t remember the frequency of visits, 1 ticked more than one option and 2 did not answer the question.

How long did your volunteer stay at your house?

1 hour	17	33%
2 hours	21	41%
More than 2 hours	9	18%
N/A	0	0%
Other/comment	4	8%
Total	51	100%

4 (8%) of all respondents answered "Other" or supplied a comment when asked about the length of visits. 1 stated that it depended on the nature of the visit, 2 commented that the volunteer spent one and a half hours at their house and 1 stated that they couldn't tell.

Were you happy with your volunteer?

Yes	49	96%
No	1	2%
I don't know	1	2%
N/A		
Total	51	100%

Did you want any other help from your volunteer?

Yes	10	20%
No	30	59%
I don't know	8	15%
N/A	3	6%
Total	51	100%

Did having a volunteer help in your settlement in Australia?

A lot	46	90%
A little	2	4%
None	0	0%
N/A	3	6%
Total	51	100%

3 respondents did not answer the question

2. Activities volunteers assisted with

Clients reported that volunteers assisted with a range of activities in order to help them settle comfortably in Australia.

The most popular activity volunteers assisted with and provided information about was public transport including catching the bus and train, reading timetables and buying tickets (32 respondents). This was followed by shopping (25), then health matters such as hospitals, doctors, community health centres, baby health centres and Medicare (23), Using household appliances such as washing machine, vacuum cleaner, oven, TV, DVD, heat and air conditioner, etc. (19), and Australian law (15).

Volunteers also helped with local community services and events such as STARTTS and MRCs (24 respondents), provided assistance with education including English classes, school, university and TAFE (18), and Emergency service (10).

Other activities volunteers helped clients with included: Banks and ATMs (20 respondents); Centrelink (18); Interpreters/translators (14); Drivers license and road safety (12); Religious or cultural activities (8); youth or children services (8); Practicing and learning English (5); employment and finding a job (6), resources such as food, clothes, internet (2); children's homework and activities (2); friendship (2); accommodation or finding a house (1); Australian culture (1); reading letters (1); cooking (1) and sight-seeing (1).

This demonstrated that clients are receiving assistance with community living skills; connecting with relevant organisations; and receiving support and information on a diverse range of areas.

3. Levels of client satisfaction and relevance of service

96% of respondents said that they were happy with their volunteer (49 out of 51). 1 (2%) client was not happy with their volunteer while 1 (2%) was not sure.

Positive comments about Mission Australia volunteers and the service they provide include:

"It is good to have somebody local, aussie to explain how things work".

"Volunteer welcomed us to the country and answered our questions".

"She help me with real estate and she solve problems in number of time. There were two problems and she resolved the issue".

"From the same country and he gave me a lot of information about Australia and the services available"

"Encouragement since I had too major operations and I needed somebody close. We had good conversations which were good for my present condition"

"Always punctual in our appointments, always ready to help and eager to support me, and always ready to give the right information"

"I were learned about Australia and Congo history from volunteer. He showed me places, supported me and family"

"She help me a lot with second hand shopping she got wall unit from the second hand shop for free. She also help me with internet. How to use phone. She help me a lot in different area. Very happy"

"I had the wrong age on my forms and in our discussion I discovered that I will find it difficult to get a job. The volunteer said he would help me correct it and I was very pleased with that. He also helped my son with his homework"

"Volunteer taught me everything I know now about Australia"

4. Further help and service improvement

Comments about activities clients would like volunteers to help or provide further assistance with include:

"I need help to get drivers licence and find job"

"Help people to pay bills and find jobs".

"Job applications and practice English"

"More help to my children through a home teaching volunteer"

"If Mission Australia can organise with some organisation help with paying some money for bill (Elect, Water & Phone)"

"Mission Australia is already improved but I need more service to help my kids if they can be link to home volunteer teacher. My kids need some support".

"I am settled well for now, but it would be good to have volunteer visiting more frequently at time when I arrived to country"

"Housing and accommodation"

"Immigration and needed someone to help me get accommodation"

"If someone who can speak Arabic it might help"

"Getting computer to work. Centrelink, Bank. Learning to drive when I can pay for a car".

4.5.1 b VOLUNTEER SATISFACTION WITH VOLUNTEER COORDINATION	
Method/s used to determine KPI result **75%** of volunteers are satisfied with volunteer management arrangements.	**Result 75%**
Methodology: The purpose of the satisfaction survey is to gain feedback from volunteers about VCU service delivery and areas for improvement. It aims to measure levels of volunteer satisfaction with volunteer management arrangements The survey has been designed to gather information on: • length and duration of the volunteers' visits • nature of the activities carried out during visits • volunteers' opinions on whether the clients have benefited from their visits • adequacy of VCU training and support for volunteers • volunteers' suggestions about how to improve the quality of the service. Questionnaires were mailed to 84 volunteers. This included volunteers who had already been matched with one or more refugee families and volunteers who had been inducted but were waiting to be matched with a refugee family.	Results: 75%

20 questionnaires were completed giving a response rate of 24 %.	

Comments:
provide details on the forms used to collect feedback
provide explanatory narrative on negative or unsatisfied feedback received

Survey results are below:

Respondents by gender

Female	15	75%
Male	5	25%
Total	20	100%

Respondents by region

Sydney	13	65%
Wollongong	5	25%
Newcastle	2	10%
Total	20	100%

Respondents matched with a client

Have had a client	19	95%
Have never had a client	1	10%
Total	20	100%

Frequency of visits

Every week	3	15%
Every 2 weeks	12	60%
3-4 weeks	1	5%
Once a month	1	5%
Depends on client's need	1	5%
Depends on my circumstances	1	5%
I have never had a client	1	5%
Total	20	100%

Length of visits

30 minutes	0	0%
1 hour	5	25%
2 hours	3	15%
1-2 hours	7	35%
More than 2 hours	2	10%
Depends on client's needs	1	5%
Phone contact	1	5%
I have never had a client	1	5%
Total	20	100%

Details of activities

I help my client with: (Choose up to 5)

Using public transport	15	12%
Education	6	5%
Health	8	7%
Bank	5	4%
Centrelink	8	7%
Shopping	14	12%
Local community service/event	12	10%
Religious/cultural activities	7	6%
Emergency services (000)	2	2%
Interpreters/translators (131 450)	7	6%
Youth service	2	2%
Household appliances	12	10%
Australian law	2	2%
Drivers license/road safety	8	7%
Computer/internet	3	2%
Friendship	1	1%
English practice	3	2%
Employment	2	2%
Outings	2	2%
Sports	1	1%
I have never had a client	1	1%
Total	121	100%

Whether clients are benefiting

I feel my client is benefiting from my visits:

A lot	9	45%
A little	7	35%
Not at all	0	0%
Don't know	2	10%
I have never had a client	1	5%
N/A	1	5%
Total	20	100%

Positive comments about Mission Australia include:

The staff are very helpful and friendly. I have been getting information through emails and newsletters

Have enjoyed the Xmas and volunteer week lunches. It was nice to see other volunteers who I know. Thanks Mission Australia.

It is doing a wonderful service, helping the new migrants settle quickly into their new country

More contact from staff this year. Have had more training. Keep it coming.

Further help and service improvement:

We need to meet each other and have opportunity to know each other and the VCU team. I do not receive the newsletter any more

Yes by playing bigger role. For example: make an excursion for the new arrivals every three months. I know that needs a lot of money and organisation but that is very important to the new comer because he needs to visit the places, that will help him a lot and he will never forget Mission Australia believe me.

Please send new forms for the reimbursement of expenses, more than 4 phone calls to sort out and redoing forms. Thanks

More regular "training" sessions, involving discussion of problems struck by other volunteers and how they solved/overcome the problems (ie "how to…"). [Obviously different families will have different problems, but a 'be prepared' approach will be beneficial and volunteers who have struck problems will realise "they are not alone"!]

The clients benefit most from contact with people from the same community. B) I believe that none of volunteers have sufficient knowledge to guide refugees about Australian law. Seminars for refugees could be organised instead

Give the work more time with clients, More workshops and training, monthly meetings with workers and clients?

4.6 ADVOCACY AND COMMUNITY AWARENESS RAISING SERVICES

EXPECTED OUTCOME

- the community at a local level, including mainstream services, has an appreciation of the issues relating to humanitarian entrants and generates support for their settlement and inclusion in the community.

4.6.1 Provision of information, training sessions, advice and consultancy services to mainstream agencies

KPI

- extent to which the department is satisfied that agreed activities have been undertaken and reported on.

STANDARD

- the department is satisfied that **all** agreed activities have been undertaken in a satisfactory manner.

Provide a brief overview of progress on implementing Quality Assurance recommendations (where relevant):

N/A

Please complete the following:

Has an annual plan for advocacy and awareness activities been developed and agreed upon?	No
Has this plan been monitored and updated as required?	No
Comments: Due to contract end, a 2010-2011 plan was not formally developed and implemented. However, numerous activities were conducted during this reporting period which are consistent with previous plans and activities undertaken by the Consortium. Please see section below.	

Provide an overview of progress on implementing activities contained in the annual plan in this reporting period.

ACL:

1 Participate in Interagency meetings and working groups in contract regions, including formal reporting where appropriate

The ACL Manager Community Relations, Manager IHSS and Promotion and Training Coordinators have continued to attend and participate in various refugee service provider networks such as (but not limited to):

- FECAP – Fairfield Emerging Communities Action Partnership
- FMI – Fairfield Multicultural Interagency

- Hunter Refugee Support Network
- ICAP - IHSS Community Advisory Panel (convened by ACL)
- IRIF – Illawarra Refugee Issues Forum (convened by ACL)
- NSW DEEWR Multicultural Advisory Forum (Community Co-Convenor)
- Mt Druitt and Blacktown Migrant Interagency
- NSW Department of Community Services, Multicultural Affairs Advisory Group (name change)
- NSW Community Services Southern Region Multicultural Advisory Committee (Illawarra region to border)
- NSW Department of Education and Training Community Consultative Committee (South West Sydney)
- NSW Department of Education and Training Refugee Support Group
- Western Sydney Housing Coalition (replaces NESB Housing Taskforce)
- RHIN – Refugee Health Improvement Network
- Wollongong City Council Multicultural Advisory Group

ACL is also an active participant in the NSW STARTTS Communities In Cultural Transition project advisory committee.

As a Community Co-Convenor for the NSW MAF, ACL is a member of the MAF convening group which undertook a survey of Forum members, a review of the terms of reference and prioritizing of program and policy issues for the period ahead.

The general level of activity has been lower than in past years due to contracts being extended a number of times and an increased focus on facilitating a smooth transition out of the IHSS contract (and into the Illawarra/Hunter HSS). Mainstream agencies such as Centrelink and DET Refugee Students Support group have continued to show great interest in changes to the contract and services to clients and as such we have provided updates and presentations to them as requested, including a presentation to Centrelink Social Workers on IHSS/HSS services.

Refugee Week

ACL has continued the practice of being major sponsor for the Refugee Council of Australia, NSW Refugee Week launch that was held at the Pitt Street Uniting Church.
In Wollongong, ACL co-sponsored the Refugee Week “Welcome Here” celebrations in the Mall in Wollongong; this event was conducted in partnership with a range of agencies that are part of IRIF, with overall leadership for the event being the responsibility of the Multicultural Communities Council of the Illawarra.

In the Hunter, ACL joined with other local settlement service providers, volunteer groups and humanitarian entrants to celebrate Refugee Week
At local levels, IHSS clients enrolled across AMEP Colleges also participated in Refugee Week activities that were conducted either in Colleges or at local Town Halls.

NSW Department of Community Services
Through ACL membership and participation in the DoCS MAAG, ACL has made considerable input to the development of the "Keep Them Safe" child protection community education and reporting procedures seminars and associated multilingual information. A standing item on the MAAG agenda has been the unresolved matter of responsibility for Unaccompanied Humanitarian Minors in NSW with consistent and unanimous calls from MAAG members for a resolution between the NSW Government and the Commonwealth Government regarding this matter – to date this advocacy has not been successful. More recently, this impasse has been compounded, according to DoCS, by the placement of asylum seeker unaccompanied minors in Alternative Places Of Detention that exist in NSW presently.
On general awareness of child protection matters for newly arrived communities, ACL is working with NSW DoCS to develop curriculum material on this subject for humanitarian e64ntrants who are enrolled in AMEP Colleges; this will systematize the delivery of this important information.

Community Consultation and Feedback
As referred to earlier, the ACL ICAP has been an important tool to, a) facilitate feedback from key community organisations and government departments concerned with coordinated and integrated humanitarian service delivery, and, b) report against service delivery work that has already occurred, identification of emerging settlement trends and to clarify the scope of the IHSS in terms of support provided to new entrants.
ACL IHSS has maintained consistent participation and reporting to the broader community of interest of the humanitarian settlement sector, through bi-monthly meetings of the NSW Refugee Support Network (RSN). ACL has ensured that written reports are provided by all ACL IHSS Consortium partners. This has contributed to overall transparency of the nature of ACL IHSS service delivery and (self) imposed additional accountability as a service provider.
Over the past 12 months, ACL has also facilitated meetings with (refugee) Community Leaders. Individual Community Leader meetings allow feedback to be provided by them in a manner that is non-competitive and with direct access to senior ACL management. ACL has met with:

Chaldean Australian Resource Centre
Federation of Congolese Communities in Australia
Chinese SGP Workers and Chinese Health Workers
Australian Tamil Congress

The outcome of most community leader meetings is a greater clarity regarding the settlement status of particular communities (trends, locations, source countries and characteristics of settlement), fine tuning of communication channels on day to day service delivery issues and identification of future areas of collaboration and partnership of mutual benefit.

Sponsorship and Capacity Building

- Sponsorship of existing substantive and relevant ACL-community partnership initiatives have been recommitted to and funded in this reporting period, along with smaller one-off events and projects. ACL Community Sponsorship support includes the following commitments:
    1. Sierra Leone Radio
    2. Assyrian Radio
    3. Sudanese Radio
    4. Nepalese – Bhutanese Radio
- Chaldean Australian Resource Centre – previously assisted with preparation of two funding submissions to Fairfield City Council and Clubs NSW for a Senior's Healthy Lifestyles program and for traditional costume procurement to establish a Youth Dance group to perform at Chaldean weddings, Harmony Day and Refugee Week events in the Fairfield and South West

Sydney area. The Youth Cultural Dance project has been funded, with outcomes for an Iraqi Senior's Healthy Lifestyles submission, still pending

- Provision of meeting space and after hours College access for a Families In Cultural Transition (FICT) Hazara group at our Auburn College for a duration of nine weeks free of cost. Further collaboration is planned with the FM Kateb Association to establish a Homework Help to be based at our Auburn College.
- Sponsorship of the NSW launch of the African Professionals in Australia at Rosehill
- Sponsorship of HARDA Cultural night and Refugee Week event

AUSCO Exchange Program

Although April to June was a busy period for all staff as ACL continued to wind up the IHSS service, at the same time ACL participated in the AUSCO exchange program. Daria Rzasa, IHSS Promotion and Training Coordinator ,was chosen to participate in the AUSCO exchange and flew to Beirut, Lebanon for 10 days where she observed, contributed to and provided feedback to the AUSCO trainers. Later in June, ACL hosted Serin Hetou, an AUSCO trainer from Syria who was in Sydney for a two-week period in order to gain a better understanding of the services available to humanitarian entrants and the Australian lifestyle. Some of the activities undertaken by the AUSCO trainer included participation in the Refugee Conference at UNSW including a Q&A session; visit to Fairfield ACL AMEP college; meetings with SSI (HSS provider in Sydney) and Resolve FM (HSS accommodation provider in Sydney); meeting with Centrelink Refugee Unit and MSO at Fairfield, attendance at the RSN and a visit to Wollongong.

Internal staff training

As the IHSS contract neared the end, staff in Sydney were supported in transitioning into new roles with the new HSS provider or in finding new employment through a series of workshops which focussed on resume writing, job application and interview skills. For remaining staff in the Illawarra and Hunter regions, training was organised which focussed on changes/enhancements to service delivery in the HSS. Significant time and resources were also invested in the recruitment and induction training of new staff for those two regions.

Resolve FM:

1. Work with the other members of the Consortium in providing information to community groups and attend community group meetings as required.

Attend ICAP, IRIF, RSN and Interagency meetings to raise community awareness of the service and gather feedback of current issues to assist in bettering the delivery of accommodation services to IHSS clients.

At these meetings we provide reports on accommodation services.

2. Promote alternative specific innovative housing models, in conjunction with the NESB Housing Taskforce and other social housing advocates such as Shelter NSW.

Discussions were conducted regarding varieties of models and it was proven that the current model in place complies with the current legislation for tenancy laws in NSW.

3. Manage client expectations by providing more comprehensive information to community and advisory groups regarding the current rental market conditions and, in such a market, what clients might expect to find as "suitable and affordable" housing in Sydney.

Information provided at ICAP, IRIF, RSN and Interagency meetings to raise community awareness of any updated information on the current rental market including statistics which goes into detail of the main areas in which our clients are settling on a Monthly basis at community group meetings.

NSW STARTTS:

Please see Attachment 18 for details on NSW STARTTS' activities related to Advocacy and Community Awareness Raising Services.

Mission Australia:

Representative from the Mission Australia Volunteer Coordination Unit continued to attend key network meetings and provided reports to meetings such as the Hunter Refugee Network meeting, the Refugee Support Network meeting, the Illawarra Refugee Issues Forum and the IHSS Community Advisory Panel meetings.

4.6.1 ADVOCACY AND COMMUNITY AWARENESS RAISING SERVICES	
Method/s used to determine KPI result the department is satisfied that **all** agreed activities have been undertaken in a satisfactory manner.	**Result** **Met**
Methodology: Activities undertaken throughout the year are measured as appropriate for this reporting period and in the context of contract end.	Results: Met
Comments: *Service provider should rate own performance, and explain how they made the rating* *STO contract manager will comment whether they agree with rating*	

SECTION 5 – FINAL IHSS REPORT-SPECIFIC QUESTIONS

In respect of the fact that IHSS services concluded on 31 July 2011, please respond to the following questions:

(i) Has all STTC service delivery information been entered into HEMS?

Yes

(ii) Has Client Exit service delivery information been entered into HEMS for all exited clients?

Yes

(iii) Have Clients who have had all services claimed and have exited IHSS been finalised in HEMS?

Yes

(iv) For that small number of cases where DIAC has granted approval for IHSS clients to transfer to HSS, has the transfer been effected in HEMS?

Yes

(v) Have all IHSS invoices been lodged with DIAC?

No – Transition Out invoicing is outstanding.

(vi) Has all IHSS DIAC and contract material (including client records) been returned to DIAC?

No – final archive boxes will be returned to DIAC as soon as the final filing cabinets have been emptied and the IHSS database has been de-populated. Due early September 2011.