

## BIZLINK Discussion Paper Response

BIZLINK is a Disability Employment Service that provides Employment Support Services to the Central and West Metro of Perth from our offices in East Perth, Fremantle and Rockingham. BIZLINK has been dedicated to securing and supporting quality open employment since 1992. BIZINK is a standalone, not-for-profit Incorporated Association, our sole purpose is employment support services for people with disabilities. We employ 38 staff and assist 410 participants with employment assistance and/or ongoing support.

This response is based on our experience of the current ESS model and 25 years of providing Disability Employment. We have staff that have been at BIZLINK since the mid to late 90's, so our knowledge is extensive and current. Our response refers to the DEA submission, whilst not its officially uploaded one, a draft version provided to members on 14/12/2016 with the key ideas and referred to herein.

<b>Discussion Point 1: More Choice for Participant</b>	<b>Response</b>
1. What, if any, restrictions should there be (for example, region or distance) on participants choosing to attend a provider?	This should be a joint decision of participant and provider. The participant can discuss logistics and any associated costs/time impacts on travelling to attend any appointments with the provider and ascertain if this is a good choice for them personally.
2. How often should participants be allowed to voluntarily transfer or switch providers?	A concern here is when progressing towards an outcome e.g. 13 week / 26 week / 52 week (if implemented) and how fees will be pro-rated. An additional concern in this scenario is the impact on employers. Employers have a partnership with the provider and have an expectation on the level of service. In an instance where a participant is encouraged to transfer by sharp practices e.g. refer to 4 Corners program February 2015 where participants were offered vouchers to sign off on forms that were not necessarily legitimate or indeed were outright fraudulent claims for outcomes. In a competitive market, providers could offer all sorts of incentives to encourage transfers – this type of practice needs to be monitored. A short-term gain for the participant could result in a job separation. Certainly, providers can work to alert participants to the perils of such transfers, but they may transfer none-the-less. Perhaps, as is the case now, participants could provide reasons for the transfer to enable the Dpt/providers to monitor. The number of transfers doesn't really impact the provider as the participant exiting will only effect that provider the one time they do it, unless they do a revolving door, which is less likely in an ESA with several providers to choose from.

	BIZINK otherwise concurs with the DEA response which considers that participants can voluntarily move providers up to three time in the first year of service and two in the second. Fees should be pro-rated with time with one provider and next.
3. What should be the basis of referral by Centrelink for participants who do not choose a provider?	Provider performance is a logical starting point.

<b>Discussion Point 2: Provider/Participant Contacts</b>	<b>Response</b>
1. Should face-to-face requirements remain as part of the DES service delivery?	Getting to know the participant is essential to developing a quality Job Plan that will assist with job matching and implementing strategies to address any barriers. Face-to-face meetings and the number required would be up to the provider and will reflect their service model. Having requirements placed on such matters is micro-management, the Dpt needs to step away from this and allow providers to determine, with each participant, the mode of contact which best meets the participant's individual needs. If the participant is not getting the service they want, they then have the choice to change providers.
2. How often should participants and providers be required to meet, either face-to-face or by other means?	As determined in consultation with the participant and agreed on their Job Plan. Again, the Dpt should not need to intervene here. If providers are assessed as eligible to be on the panel and if market competition prevails, then this need not be monitored. Quality Assurance via the National Standards for Disability Services, provides enough guidance on such matters to ensure providers, who maintain certification, are meeting participant's individual needs, including the number of contacts.

<b>Discussion Point 3: Job Plans</b>	<b>Response</b>
1. Should Job Plans have minimum requirements beyond what is necessary for mutual obligation requirements? Or should this be determined between each participant and their provider?	The National Standards for Disability Services uses individual plans as a centrepiece for ensuring that services are individualised and are aimed at meeting individual needs and are done in consultation with the participant and their support network, where involved. So, there is already a mechanism for monitoring that Job Plans go beyond just mutual obligation.

<p>2. How can we ensure that participants are actively involved in the development of their Job Plans, or will the ability of participants to change providers if unsatisfied be sufficient?</p>	<p>Again, referring to the National Standards for Disability Services, Auditors interview participants and ask them about their involvement in developing their plan. Participants can also change providers if dissatisfied.</p>
<p>3. How should providers be held accountable to ensure activities in the Job Plan are undertaken and supports are delivered? Will the ability of participants to change providers if unsatisfied be sufficient?</p>	<p>Quality Assurance via the National Standards for Disability Services, provides an audit on such matters to ensure providers, who maintain certification, are meeting participant's individual needs, including the manner and quality in which they deliver any strategies. If participants can change services when unsatisfied it diminishes the need to monitor such matters in addition to the NSDS audit.</p>
	<p>As regards Job Plans generally, BIZINK concurs with DEA's response:  DEA has a very strong opinion of Job Plans. They should sit outside the DSS/DoE centralised system. They should be constructed and signed-off, first by the participant and then the provider. (This is an example of the difference between compliance/administration and a regulatory model – DEA strongly supports a regulatory model where the provider ticks a box in the centralised system (or even uploads the Job Plan) but does not complete a Job Plan in a centralised template with drop down boxes.</p>

<b>Discussion Point 4: Better Information for Participants</b>	<b>Response</b>
<p>1. What information should be available to participants, providers and employers?</p>	<p>The Dpt developed "Connections for Quality" to provide information about the services offered by providers. "This information is available to help you make an informed choice of provider and is designed for your individual needs." – so there is already a platform in place.</p>
<p>2. Should there be mechanisms to ensure no false or misleading claims are made against DES providers?</p>	<p>There must be a system to safeguard providers and ensure that information is correct and not defaming or misleading.</p>
<p>3. Should the Department facilitate access to information on accessible and user friendly platforms, or should this be purely market led (with providers offering such information on</p>	<p>Yes, as per Connections for Quality – it is annoying how tax payers fund such platforms and then they are apparently discarded. Perhaps it is not the best, but improve it rather than spending limited funds on yet another platform that will no doubt have limitations and flaws too. Of course providers will have their own</p>

platforms of their own choosing)?	websites, Facebook etc to promote, but the Dpt must also have a central system i.e. Connections for Quality.
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<b>Discussion Point 5: Participant Controlled Funding</b>	<b>Response</b>
1. There is considerable literature and experience in participant controlled funding in personal care. Is there any evidence of the effectiveness of participant control of third party funding in employment services?	These questions are answered by saying that this should be at provider discretion. The Dpt need not get involved in monitoring, or developing complex guidelines and acquittals.  This type of funding is not new or additional, but taken from service fees to be quarantined for participants to use as they like. Sounds like a great idea and gives choice and control...however, in trials many clients didn't know how to use the funds effectively for employment related services, so the money didn't get used and was then not made available to the provider. So, BIZINK proposes that individual providers use this as a point of difference, e.g. could advertise that if come to x provider we give you \$500 to spend on anything you like (related to helping you get or keep a job e.g. clothes, course, child minding, phone, travel etc).
2. In such a model, how much funding, if any, should be quarantined for job seekers to use through an account, how should this funding be made available to participants, and how could there be simple clarity as to what costs are to be met from participant controlled funds versus provider controlled funds?	If the Dpt gets involved e.g. saying every service must quarantine \$1000 for client discretionary funds this will result in guidelines, red tape and potential to not be used effectively.
3. What principles should guide the appropriate expenditure of any individualised funding?	
4. What restrictions should apply to the use of the funds by participants?	
5. How can participants who are unwilling or unable to use individualised funding be supported during the decision-making process?	
6. What restrictions should apply to the expenditure of the funds on services from a participant's provider or an associated organisation?	

<b>Discussion Point 6: Entering the DES Market</b>	<b>Response</b>
1. How often should the Panel be open to entry by new providers?	At the mid-point of the contract. The Dpt can otherwise review ESA by ESA, some will be saturated whilst others will be desperate for new entrants. The Dpt

	<p>needs to be mindful of balancing choice, access and viability. If providers see that too many services are given status on the panel, then the economics of servicing an area could be questioned as the risk of setting up must be met with some level of referral flow. Certainly, a providers name in the market place will help, but market saturation will be damaging, as will duopolies or monopolies of large National providers. Striking a balance will be a key challenge in ensuring success of the new framework.</p>
<p>2. How often should panellists be reviewed and what criteria should they be reviewed against?</p>	<p>A performance framework remains a must in ensuring some level of service quality. As time is needed to attain a level of performance to reflect the outcomes, a schedule like our current contract would suffice.</p> <p>Whilst the Star Ratings have been questionable in measurement of service quality and, indeed, have been manipulated by sharp practices e.g. the February 2015 ABC 4 Corners program which exposed fraudulent claims being made by some providers. The broader and perhaps even more alarming concern not raised in that program is that these same providers were awarded more business conceivably based on falsified outcomes.</p> <p>Outcomes (such as the falsified claims for jobs shown in the program) generate a Star Rating. Stars range from 1 to 5 Stars. Providers with 4 and 5 Stars can be offered more business at “Business Reallocation” points in the contract which sees low performers (1 &amp; 2 Stars) lose business that is then reallocated to high performers (4 &amp; 5 stars).</p> <p>In the 2013–2018 Employment Support Services tender, community-based not-for-profit providers that had been operating for up to 20 years lost contracts to the likes of those featured in the 4 Corners program. Given that these providers have been shown to use systemic gaming and outright fraud to achieve results calls in to question the validity of that tender process. Some providers survived but with reduced business and others were wiped out completely. Losing community capital built up over years of service to be replaced by so-called high performers.</p> <p>So, with that in mind, the Dpt must ensure that such gaming practices are not being inadvertently rewarded with larger and national contracts.</p>

<p>3. What should the basic criteria be for joining the Panel?</p>	<ul style="list-style-type: none"> <li>• Must meet the National Standards for Disability Services – must be accredited not certification pending.</li> <li>• Demonstrated ability to provide individualised disability employment service with an outcome focus.</li> <li>• No previous evidence of fraudulent claims.</li> <li>• Financial viability.</li> </ul>
<p>4. How much time do providers need before entering into a market to set up their operations?</p>	<p>Three months would be a suitable minimum. Providers that propose to deliver services to an area need to be ready to go and should not expect much lead time to prepare.</p>
<p>5. In order to supply DES in a specific ESA what should the requirements be for: a) a minimum caseload? b) ESA coverage?</p>	<p>This is up to the provider to analyse the market. They may be able to put on a panel application their minimum and maximum caseload, however, as is the case now, there are no guarantees of referral flows.</p> <p>The provider can offer to cover postcodes or entire ESA's and then the Dpt decides if can join the panel as regards providing participant choice, whilst still ensuring existing providers viability.</p>

<p><b>Discussion Point 7: A Single DES Contract</b></p>	<p><b>Response</b></p>
<p>1. Would all providers have the capacity to deliver DES-DMS, DES-ESS and Ongoing Support under the proposed simplified contract arrangements?</p>	<p>No they don't, the experiment of giving contracts to new players in ESS did not work and in our ESA three have failed, with one exited in the 2015 reallocation (of 12 providers) and two will exit from the 2016 reallocation. There are providers performing at 1 and 2 stars, who replaced providers performing at 3 Stars in the June 2012 Star Ratings.</p> <p>These exiting providers did not support our participants that transitioned to them, they did not understand ongoing support. However, this will be our point of difference in the new market place. We provide quality ongoing support, participants that need this will (hopefully) choose us. Of course, others will market that they can do the same, so therein lies a problem – certainly in their tenders these same providers would have said all the right things and then proceeded to deliver nothing of the sort.</p>

	DES-ESS should have the capacity and experience to deliver all aspects of the combined program. DES-DMS only providers do not necessarily have experience with ongoing support – this need not exclude them, however, participants needing ongoing support should be offered a variety of providers with capacity to provide the services required.
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<b>Discussion Point 8: Removing Market Share Restrictions</b>	<b>Response</b>
1. What mechanisms should be adopted to ensure universal coverage in an ESA while maintaining a competitive marketplace?	This point was covered by the current Market Share arrangements. The rural and remote will need something to ensure continued and adequate coverage. Metro will face viability issues if too many endorsed to the panel. There must be some sort of Market Share arrangement underlying a free and competitive market. The notion that under the current arrangements poor providers are still guaranteed referral flows needs to be addressed. This is possibly addressed by the set up. To get on the panel will review coverage and diversity and then to get referrals will rely on performance and self-promotion.
2. How should provider diversity be maintained to ensure participants have adequate choice of provider?	A range of providers could be selected to the panel, including not-for-profits and small to medium sized providers to ensure a choice for participants.

<b>Discussion Point 9: ESAs</b>	<b>Response</b>
1. Should there be ESAs, if so, how many ESAs should there be?	Not sure how Star Ratings work without ESA's? If based on local Labour Market conditions, then ESA's remain necessary for that assessment. For comparison of performance to competitors too I am not sure how this is done without some form of location parameter.
2. Should the number of ESAs be reduced if market share is removed?	ESA's could align to the Job Active model, they are larger areas that encompass existing ESA's but merge them to form broader areas of coverage. If there is concern that smaller providers won't be able to cover an entire ESA then that should be allowed, i.e. provider stipulates the postcodes it will cover within the Employment Region.

<b>Discussion Point 10: Preventing Market Failure</b>	<b>Response</b>
1. What specific circumstances should be recognised as market failure warranting intervention?	These questions pertain to rural and remote providers.
2. What interventions should be used to address market failure and ensure service availability?	

<b>Discussion Point 11: Ratio between service fees and outcome fees</b>	<b>Response</b>
1. What should the ratio between service fees and outcome fees be and why?	A 60% - 40% split between service fees and outcomes, we still need payments up front to ensure we assist people to get job ready and do a thorough job matching prior to achieving an outcome.

<b>Discussion Point 12: 4-week and 52-week Outcome Payments</b>	<b>Response</b>
1. What should constitute an employment outcome under DES in a modern Australian economy?	<p>BIZLINK values quality, individually placed jobs that are secured in open employment. Using job matching and job creation BIZLINK has been highly successful in assisting people with disability to be included in main stream employment. 95% of our registered workers receive Award or above Award pay – testament to our job-matching, employment support and commitment to quality open employment.</p> <p>It is the view of BIZLINK that the current contract's Star Ratings do not give an indicator of a placement's "quality" i.e. well-matched, sustainable job in a legitimate employer-employee relationship. They simply reflect that a service is achieving the "outcomes" defined by the performance framework which are not necessarily aligned to the requirements of the National Standards for Disability Services.</p> <p>Jobs must be individually placed, open employment that meets the participants individual needs, considers their choice and assists them towards achieving independence (all notions expressed in the NSDS).</p>
2. How should the DES funding model incorporate the growing number of short term	Cumulative outcomes will make a big difference here i.e. weeks in employment, regardless of the number of



jobs available in the economy?	jobs be counted towards 13, 26 and 52 week outcomes.
3. Should the new model replace the job placement fee with a 4-week outcome payment, and how many 4-week outcome payments should be available for each job seeker?	<p>BIZLINK concurs in part with the DEA draft response - accepts the 4 week and 52 week outcome on the basis that the Ongoing Support performance framework weighting is discontinued and that weeks in employment (regardless of the number of jobs) counts towards 26 weeks and 52 week outcomes. This compromise observes the precarious labour market and the need to increase Ongoing Support.</p> <p>The 52 week outcome is a concern in terms of additional administration in confirming the outcome is achieved.</p>
4. How should job seekers be supported in the period between the 26-week outcome and the 52-week outcome?	As their support needs require.
5. What level of payment should be attached to the 52-week outcome while keeping total DES expenditure within the current funding envelope?	<p>As money will simply be shifted around, whilst good to encourage tenure it is potentially reducing total income i.e. in instances where a participant does not attain the 52 week outcome – so providers need to be aware that no additional money is being gained just shifted from Services Fees and existing outcome Fees.</p> <p>In that respect, for viability as little as possible should be shifted. BIZLINK doesn't need a financial incentive to focus on quality jobs and tenure, it is in our culture.</p>

<b>Discussion Point 13: Service Fees</b>	<b>Response</b>
1. How should service fees work in the context of a funding model with risk-adjusted outcome fees?	As per the DEA draft response, BIZLINK is interested to know more about risk based outcome fees. DEA would not like to see an extensive sliding scale of risk based outcome fees, thinking 3 or 4 levels would provide adequate difference across a range of participants and probability calculations. We appreciate linking individual characteristics and labour market characteristics to determine probability. However, we are concerned that the information is correct and robust enough for such calculation.

<b>Discussion Point 14: Pro-rata service and outcome fees</b>	<b>Response</b>
1. How should pro-rata service and outcome fees be calculated?	Week for week. If a participant exits during the 13 week outcome period and starts with a new provider at week 7, 7 weeks (54%) of the outcome goes to the provider that secured the job and the remainder to the new provider.
2. How should pro-rata fees apply in the event that a provider ceases to be a member of the Panel?	Such providers should be paid up and until they are officially exited. They may lose status on the panel, but would have earned that income and budgeted accordingly and so should not be unduly penalized for losing panel status. If they are exited for dubious practices payments would be recouped in the usual manner.

<b>Discussion Point 15: Determining Eligibility and Employment Outcomes for ESLs</b>	<b>Response</b>
1. Who should be able to qualify under revised assessment criteria for ESL?	<p>Year 11's can benefit from access to School Based Traineeships.</p> <p>For the contract prior to the beginning of this current one (March 2013), 2009 to February 2013 BIZLINK supported 13 SBTs. Since the changeover and the strict guideline amendments we have supported 0.</p> <p>We are continuing to support Traineeships and Apprenticeships, supporting 20 to-date for this current contract. BIZLINK remains committed to quality employment and the belief that Traineeships and Apprenticeships offer career paths and ongoing sustainable employment for people with disability.</p> <p>BIZLINK would like to see flexibility in the ESL Guidelines, such that a student in the last term of year 10 could be considered for registration so that an SBT could be secured for year 11 and 12. If this required Contract Manager approval there would be some way of assessing the validity of the registrations purpose, but presently the Guidelines are very restrictive and prevent opportunities, innovation and the development of mutually beneficial partnerships with local schools.</p>
2. How could the level of disadvantage and work	These current guidelines are an obvious reaction to the plundering of ESL in the past by providers claiming dubious outcomes or just registering Level 2 ESL's

capacity be assessed for secondary school students?

then parking them. BIZLINK hopes that common sense will prevail and the Dpt sees that providers intent is centred around the student/school leaver achieving a quality job. The Dpt obviously wanted to make an example of some providers with the repayment for ESL's that did not meet the strict new guidelines. They have perhaps scared most providers out of the ESL market. So now those that are assisting ESL's are doing it with the right intent and with the documentary evidence to back it up.

BIZLINK has experienced difficulty over the semantics of the guidelines. Here in WA we have a different name to that in the guidelines, so the Dpt were focused on the definition of special school – in WA we call them Education Support Units, or indeed, students with disabilities are supported in main stream classes – we have an inclusive approach.

Anecdotally a BIZLINK employee noted from her experience that:

“When I am approached by a school regarding a year 11 student, I will always inform them that a discussion will need to be had as different situations may result in different approaches. The key thing that I will explain to families is about the legal age that they are able to leave school (in WA, the end of the year that they have turned 17 and 6months or 18- whichever comes first). I will also explain how this may affect them in terms of Centrelink requirements if they are not eligible for DSP.

The difficulty now of signing an ESL up for a School Based Traineeship within the current guidelines i.e. modified curriculum in year 11 is that it is so hard to do and then get approved by the contract manager.

Explaining this to a family or a child with a disability is tough. Some parents will spend a couple of hours each morning just to get their child to school (causing disruptions within the home and ultimately at school). These parents are aware that other students (without a disability) can do a School Based Traineeship, however, their child is limited because of the assistance they may require due to their disability, let alone the red-tape of the DES compliance for ESL”.

To improve the ESL system, consider:

	<ul style="list-style-type: none"> <li>• DAAWS : guidelines state that students need to be in receipt of DAAWS whilst DAAWS states you can't get DAAWS until you are working.</li> <li>• Guidelines state that to undertake an SBT in year 11 with contract Manager approval that the units of competency need to be modified. This does not happen - it is the delivery that is modified.</li> <li>• Eligibility: either Centrelink along with the State Education Department /Catholic Ed /Independent Schools should determine eligibility based on the student receiving additional funding that assists them with their education. Dpt needs to look more broadly than the current funding models used as these differs state to state. WA also use a tiered funding system that sits out side of the traditional schools plus model.</li> <li>• As previously mentioned, the Dpt must consider the terminology used as this is also different in each state especially in WA where we have inclusive classes.</li> <li>•</li> </ul>
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<b>Discussion Point 16: Improving the Gateway</b>	<b>Response</b>
<p>1. How can gateway arrangements be improved to enable a better connection to employment services for people with disability?</p>	<p>BIZLINK concurs with the DEA draft response: The gateway and assessment system overview (and overhaul) is welcomed. DEA is concerned that it is unaligned to the introduction of the new DES. However, DES sees the new choice/control and market model as the opportunity for DES providers to work more closely with local communities and demonstrate to potential participants why to choose them. The more providers invest themselves in local communities the less control the gateway will have. Direct registration process could/should be overtaken by participants choosing providers based on knowing about them before going through the Centrelink process.</p>

<b>Discussion Point 17: Assessments Review</b>	<b>Response</b>
<p>1. What other aspects of ESAts/JCAs should be examined in the review?</p>	<p>Providers are best placed to do the assessments and the ESAt/JCA can be a basic tool as a starting point. Providers have more time and an employment focus, so their questions and assessment will suit their needs</p>
<p>2. Should there be:</p>	

<p>a. greater separation of ESATs and provider’s own assessments, with ESATs focused on eligibility, work capacity and appropriate referral within DES and not extending to suggested interventions?</p> <p>OR</p> <p>b. should ESATs be developed and extended to provide more and better information on which providers could base their assistance, with less need to perform their own assessments?</p>	<p>and will consider the choice and individual needs of the participant.</p>
<p>3. How should the revised assessment process fit with other options for DES reforms outlined in this Discussion Paper?</p>	

<p><b>Discussion Point 18: Ongoing Support</b></p>	<p><b>Response</b></p>
<p>1. Should the fee-for-service funding model specify minimum contacts and hours of support?</p>	<p>With any changes made we must be mindful to not increase red-tape and administrative burden.</p>
<p>2. What minimum servicing requirements should there be for each level of support?</p>	<p>BIZLINK concurs with the DEA draft response: Flexible OGS should be removed. The compliance required to administer OGS be removed or significantly reduced and that OGS is provided in a manner that gives the participant confidence in developing interdependence and independence. The participant could be better placed to decide when to exit the support (knowing they have right of re-entry into OGS at any time, whether that be for incidental support, assistance to move to new employment, career guidance or even if their job is in jeopardy). Current payment method should continue.</p>
<p>3. How should payments be determined for each level of support?</p>	

<p><b>Discussion Point 19: Job-in-Jeopardy</b></p>	<p><b>Response</b></p>
<p>1. How can we better define when someone’s employment is considered to be at risk due to their disability?</p>	<p>If people with disability and employers have a better understanding and awareness of the supports available, they can contact a provider who can advise whether they can benefit from DES. The participant can then be empowered to act or their employer will know that such supports are available. So “defining”</p>

	<p>may not be necessary in terms of a list, but awareness of available support may encourage more people to access services. Additionally, job losses can be mitigated if JIJ is accessible not only when a person is at risk of losing their job, but at any time they need additional supports to e.g. improve work performance, learn new tasks etc. Employers may be reluctant to utilise JIJ purely because it implies that they are on the verge of sacking the employee with disability – this program is poorly named and so is poorly utilised. If employers and participants knew they could access DES at any time for appropriate and timely supports then everyone will benefit and jobs will be retained and participants will progress within their jobs.</p>
2. How can we increase employer awareness of JIJ?	<p>Providers can promote, and broader promotion through advertising campaigns and Job Access.</p>
3. Does the current fee structure reflect the services being provided and outcomes being achieved?	<p>If move to OGS have fees reflect that – less administration and part of the continuum of service where participants enter and get the service they need in a timely and individualised manner.</p>
4. What is a more appropriate name for Job-in-Jeopardy?	<p>As the person is already working, coming under Ongoing Support may be appropriate and simply Employment Assistance would cover that, rather than focusing on impending job loss, put the emphasis on job retention through timely assistance. DES could be seen as a continuum rather than distinct program points. With a greater emphasis on Career Development and quality sustainable jobs, participants will need varying degrees of Employment Assistance and Ongoing Support at times when they need it.</p>
5. If a JIJ participant chooses not to disclose their disability to an employer, how should providers assist them in the workforce?	<p>This is not uncommon and providers work with the participant directly to develop strategies to assist them in many ways that does not require employer involvement e.g. housing, transport, self-esteem, managing interpersonal relationships, counselling. Employer knowledge can be beneficial, but participant choice and control is paramount and most providers will have experience in providing supports that respect this choice. Having a provider to confide in and develop strategies to overcome the causes that are jeopardising the job do not always need employer engagement.</p>
6. Should the JIJ service be integrated with Ongoing Support?	<p>Yes, it makes sense that it is an Ongoing Support intervention and will likely be managed by employees who provide Ongoing Support (some providers don't</p>

	differentiate such staff roles, however, it is more aligned to these types of supports).
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<b>Discussion Point 20: Transition Issues</b>	<b>Response</b>
1. How can we ensure that DES providers continue to provide quality services to participants towards the end of the current contracts?	<p>Enable early transition to providers selected to the panel – based on participant choice, this allows exiting providers to wind down whilst linking their participants to their new provider.</p> <p>If this question is regarding existing providers that plan to roll over to the panel...well it's a sad indictment to even need to have assurances...but there will be providers without a purpose of meeting individual needs or a focus on quality employment so the Dpt will need to continue to monitor Star Ratings and ensure adherence to the NSDS.</p>