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**The Australian Society of Rehabilitation Counsellors Ltd.
(ASORC)**

Response

To

The Department of Social Services (DSS)

On

New Disability Employment Support Model

Submitted via DSS website

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Introduction

The Australian Society of Rehabilitation Counsellors Ltd (ASORC) welcomes and thanks the Department of Social Services (DSS) for the opportunity to provide a submission on the *New Disability Employment Support Model – Consultation Paper* which lists 9 (nine) separate questions spread over the following key discussion topics:

1. [Who should be able to access a specialist disability employment program?](#)
2. [How can we simplify entry to the disability employment support model?](#)
3. [What employment services and supports would most help people with disability?](#)
4. [What employment services and supports would most help young people?](#)
5. [What support do employers need to attract, employ and retain people with disability?](#)
6. [How do we best tailor mutual obligation requirements to increase the likelihood of people with disability finding work in the future?](#)
7. [How can funding arrangements incentivise good work outcomes?](#)
8. [How do we drive high quality service and supports?](#)
9. [How do we measure success?](#)

For those unfamiliar with ASORC and the profession of Rehabilitation Counselling we take this opportunity to bring the following information to your attention.

Rehabilitation Counsellors are Allied Health Professionals who work within a counselling and case management framework, across the biological, psychological and social domains, to assist people with disability, health conditions and disadvantage participate in employment or education, or live independently and access services in the community to achieve their personal, educational and vocational goals.

Rehabilitation Counsellors possess advanced skills in personal counselling, (including adjustment to disability counselling), vocational assessment, vocational training, job placement, case management, injury prevention and management, service coordination and independent living planning. This provides Rehabilitation Counsellors with a deep understanding of the impact of disability, health conditions and disadvantage on a person's life, and especially the importance of work and education in attaining inclusion and fostering independence and self-esteem. Consequently, Rehabilitation Counsellors are highly qualified to provide services that are often not in the repertoire of other allied health professions.

Rehabilitation Counselling is concerned with a whole of person and biopsychosocial approach, drawing on a large discipline-specific body of knowledge in health science, disability management, vocational rehabilitation and human services. This makes Rehabilitation Counsellors highly skilled in areas such as:

- personal counselling
- vocational assessment, counselling and training
- job placement and aptitude matching
- adjustment to disability counselling
- motivational interviewing

- psychosocial assessment
- case management
- service coordination
- injury prevention and management
- mental health services
- independent living planning
- hearing services
- services for the ageing
- conflict resolution and negotiation

ASORC is the peak professional body representing Rehabilitation Counsellors throughout Australia and has been doing so since it was established in 1976. ASORC is a non-party political, non-sectarian and not for profit organisation. Its mission is to promote the profession of Rehabilitation Counselling and to foster the professional capability of its members.

ASORC provides:

- a long standing and respected voice for the profession (over 45 years since inception)
- resources, education, mentoring and supervision necessary for members to achieve career advancement and enhanced credibility in the profession and in the community
- a robust set of Competencies for Rehabilitation Counsellors and Code of Ethics
- access to the latest research and academic commentary through the ASORC Journal, the *Australian Journal of Rehabilitation Counselling*
- access to a network of similarly skilled and like-minded professionals across Australia.

We appreciate the opportunity to provide this response to the Department of Social Services.

ASORC response to Discussion Topics:

Our response includes the 9 (nine) questions and key discussion topics:

1. Who should be able to access a specialist disability employment program?

The program is very broad and addresses people at extreme ends of the disability spectrum and in-between. It would be helpful to have more clearly defined streams within the program to assist in minimising confusion while providing adequate resourcing to address the specific needs of the client. Whilst the current scheme does allow for some streaming of services to clients with differing degrees of disability, the practical differences in the services available to them within the different streams are much the same. Some specialisations in services for clients with more severe disabilities such as traumatic brain injury and complex mental health conditions, should be considered.

2. How can we simplify entry to the disability employment support model?

Key questions

2.1. How can the assessment process be improved to connect people with disability to the right employment services?

To improve the assessment process, ASORC suggest a greater collaboration with Allied Health professionals whose skills set incorporates the clinical aspects of disability along with a strong grasp of the local labour market. ASORC members (Rehabilitation Counsellors) are well placed to provide assistance at this stage of the process.

A number of ASORC members work in the DES space, along with colleagues from other Allied Health professions, including (but not limited to) Psychologists, Occupational Therapists, Physiotherapists, etc. ASORC encourages the continued recruitment of Allied Health Professionals with a background in Occupational Rehabilitation or Employment Services into these roles.

2.2. What should be considered during the assessment process when determining support required to help a person reach their work potential?

There are two key factors:

1. Biopsychosocial factors – impacting on employment: Rehabilitation Counsellors are experts in assessing and developing strategies for addressing barriers in a holistic framework.
2. The labour market: skilled Rehabilitation Counsellors understand the labour market including the new labour market – self-employment – microbusiness – etc. Rehabilitation Counsellors understand the Australian Qualifications Framework and other career development options.

Understanding of these key factors is unique to the Rehabilitation Counselling profession and critical to the achievement of successful outcomes during the assessment process.

2.3. How can the assessment process stream an individual with disability toward the right type of employment support, depending on need and goal?

The assessment process should start with an access and capacity assessment. This should ensure that the participant meets the eligibility criteria for the scheme, determine whether their condition is stable and confirm that they have current capacity for employment.

Following the access and capacity assessment, Vocationally focussed assessments for clients that are actually ready to participate in vocational services should be

considered. Good vocational assessment can deliver an assessment that addresses the complexity of a client's needs / barriers and what level of support the client requires to achieve a labour market outcome. Done well, a vocational assessment will help the participant to set clear and achievable employment goals from the outset of the program.

2.4. Are there different assessments needed at different stages of an individual's work journey, as they prepare for work, find and maintain employment, and progress their career?

Not really, as everybody regardless of life stage would benefit from a screening assessment to establish whether they have the capacity for work and a vocational assessment to identify employment goals.

3. What employment services and supports would most help people with disability?

Key questions

3.1 What has been your experience of receiving employment support from a DES or other employment services provider? What was good about the support? What improvements would you recommend?

The services offered by DES providers vary greatly from company to company and from office to office within the organisation and are largely dependent on the skill level of staff in individual offices as well as the general culture and mission of the DES provider.

Mature and experienced DES consultants can and do provide amazing support leading to very positive outcomes regardless of their qualifications. Currently, it very much comes down to the individual consultant delivering the services, so there is a lack of consistency even within individual providers.

We recommend that funding is allocated within the scheme to hire Rehabilitation Counsellors to perform the vocational assessment component of the job seeking program. This is likely to result in improved speed to placement and durability of employment outcomes, through realistic goal setting in the early stages of the program for participants.

3.2 What type of services and support would best help a person with disability find and keep a suitable job, and progress their career? Who should provide this support?

A key issue in the current scheme is that funding is linked to quick outcomes.

The current funding model encourages the behaviour of providers to fill jobs as

quickly as possible with a goal to retain the client in employment for 6 months. Durability is only really measured and rewarded for 6 months and so there is limited focus on finding long term employment for their clients.

Experience highlights that spending additional time up front on vocational counselling and goal setting is a key indicator of durability of employment outcomes. It has been demonstrated that clients who engage with a Rehabilitation Counsellor are more likely to report satisfaction with the program and with the outcome.

3.3 What education and training opportunities help people with disability overcome the entry barriers to employment?

Computer skills and communication skills are the key to successful outcomes. In the current environment these skills will make an enormous difference to long term unemployment.

3.3 How can people receiving disability employment services also be supported to address other barriers to employment (e.g. health service or housing assistance)?

Stable housing is one of the key indicators of vocational success. Stronger links between DES providers, housing providers and local health services would vastly improve outcomes.

At present these services operate in silos with very little to no communication between them. Having a Rehabilitation Counsellor on staff at DES providers or Centrelink in a case management capacity to act as the coordinator of services could be a potential solution. This role could also be filled by a social worker.

3.4 What employment support do mature age people with disability need to successfully gain or retain employment, or transition into new employment or a new career?

Many older clients accessing DES services struggle with accessing computers. Better access to Government funded computer courses would assist. Adjusting the expectation around the amount of time expected to retrain an older person with a disability would also help.

4. What employment services and supports would most help young people?

Key questions

4.1 What support do young people with disability need to successfully move out of education into suitable work?

It is important that this process starts much earlier than it currently does. There needs

to be a relationship between the school and the DES provider. Ideally, young people with disabilities would start engaging with a DES provider in year 11 in order to assist in the development of a transition plan for school to work or school to further study. The SLES program currently available to school leavers with NDIS funding operates well in this area with many clients experiencing a smooth transition between high school and their chosen SLES program.

4.2 What best practices from existing DES or other employment programs help young people with disability find and maintain a job?

The inclusion of work experience placements, job search preparation programs, assistance with funding of clothing, equipment and workplace modifications are important for young people with a disability to find and maintain a job. Currently the wage subsidies available for under 25s work well because they encourage employers to offer opportunities to young people.

As noted above, the current practices employed by SLES providers working with NDIS participants transitioning between high school and post school options provide for continuity of support for the young people with disability they support. A similar model could be adopted by DES providers for participants in this age bracket.

4.3 Should there be assistance to prepare young people to think about work much earlier than after they leave school?

Yes. It should be easier for DES providers to link in with school careers advisors to offer career coaching to senior high school students with disabilities. At the moment, most services commence in the December/January, after the young person has finished school and there is an opportunity for improvement in the way this transition is managed.

4.4 How can disability employment services work better with the education system to enhance employment prospects for young people?

DES providers could link in with school careers advisors to offer career coaching to senior high school students with disabilities. If this occurs in the middle of the school year, or ideally commenced in Year 11, it provides greater opportunity to think about options and successfully manage the transition.

5 What support do employers need to attract, employ and retain people with disability?

Key questions

5.1 What are the most important things that can be done to build an employer's

confidence to employ a person with disability?

Employers want to participate - most employers would be happy to employ a person with unique needs, particularly if they have someone to help manage recruitment, onboarding and ongoing issues as they arise. Employers tend to need the most support during the first 6-12 weeks of employment, following which support can be withdrawn and accessed on an as needs basis.

The ability to refer back to the provider when they need assistance is likely to lead to improved employer confidence in hiring people with disabilities.

5.2 What services and supports does a disability employment support service need to offer employers to enable them to recruit people with disability, maintain their employment and promote career growth?

Most employers want lots of support for the first 6-12 weeks by which time they know whether or not the employee is going to work out. After this stage continuous liaison with the DES provider just creates more work, particularly for a small business. As discussed above, having the ability to refer back to the provider as the need arises gives the employer the opportunity to seek out support when they need it.

Employers also benefit from support from providers to understand the communication, access and support needs of their employees with disabilities. Providers with the ability to provide disability awareness training to staff and managers are likely to be of benefit.

5.3 What are examples of good practice of employer engagement and employer-led initiatives that have been shown to improve employment outcomes for people with disability? How could these be scaled in the disability employment program?

It is important to provide coaching for employers to ask potential workers about their access needs during the recruitment process. For example, instead of asking if they have a disability or health condition, ask whether the candidate has any access needs that the employer can help to meet during the recruitment process. Disabled workers who have their access needs met by employers tend to stay with the business in the long term.

5.4 What other information, services and supports do employers need to support employees with disability?

Access to disability awareness training. Autism awareness and Deaf awareness training, for example can be very successful in helping new managers of people with these disabilities to understand their employees and to support them at work. The DES provider can either provide this or link the employer to the appropriate service provider. Funding for this is often available through NDIS plans.

6 How do we best tailor mutual obligation requirements to increase the likelihood of people with disability finding work in the future?

This is tricky. If the clients are properly assessed in the first place, and referred at the appropriate time, they have fewer issues in meeting mutual obligations. Providers can adjust mutual obligations to fit with individual client circumstances.

7 How can funding arrangements incentivise good work outcomes?

At the moment the only way to run a profitable DES service is to place as many clients as possible into work as quickly as possible and keep them there for 6 months. The big players in the scheme have relationships with big employers and act like an employment agency for the businesses. If a worker does not work out, there is always another one ready to fill the gap. This “square peg in round hole” approach has led to workers coming on and off the DES scheme and payments every 6-12 months. It is also not financially viable to provide much in the way of post placement support to a client after they have been in the role for 6 months.

Training needs to be re-instated as an outcome fee option for providers. It was removed as an option in 2020 as too many participants were doing multiple courses rather than moving on to employment. There needs to be more of a balance here with funding arrangements supporting some training especially with the ongoing changes brought about by the pandemic and increasingly remote workforce.

8 How do we drive high quality services and supports?

High quality services need adequate funding. In order to set clients up for success through the vocational assessment process, funding would need to be allocated to providers to allow them to hire tertiary qualified professionals such as Rehabilitation Counsellors, for the vocational assessment portion of the service and to assist with interventions when required. Employment consultants and post placement support officers can then continue the valuable roles they currently perform in working with the client during the job seeking phase and monitoring the placements. The Rehabilitation Counsellor could then step back in if any issues were identified by the client or employer during their employment.

Key questions

8.1 How should an effective and efficient competitive provider market be structured and how should business be allocated?

In some ways this has already happened in the current form of the scheme. Clients are allowed to change providers up to 5 times during their 2-year program without giving notice or reason for the change of provider. This can result in clients changing provider when they are challenged by their provider to try something outside of their current comfort zone.

To avoid clients choosing to change providers as a result of being asked to challenge

their beliefs around employment, they should be required to have a conversation with the provider before being able to switch (providers) and have a conversation with Centrelink prior to approval of the transfer.

8.2 How can the future program settings encourage and reward innovation and continuous improvement? What works well in the current program?

The current program does not allow much scope for innovation, being quite prescriptive in nature. The administrative burden placed on providers at present is high. Simplifying the systems would allow for more time to be spent providing value, assisting and coaching the client.

8.3 What arrangements should be in place for market regulation and quality assurance of services?

A fairly rigorous auditing system is in place and providers are required to obtain ISO accreditation by the end of 2022 and participate in annual audits. Desktop audits are conducted on a quarterly basis by the department. The current time for feedback to providers from audits is taking 3 - 6 months. Facilitating delivery of feedback in a more timely fashion, within 30 days of the audit taking place, would provide a significant improvement.

8.4 What legal model would be most appropriate to manage the terms and conditions of the agreement between Government and disability employment services providers?

This is outside our scope.

8.5 What is needed to lift workforce capability and the quality of the workforce delivering disability employment services and supports for both participants and employers?

Increased funding for DES providers would allow providers to employ tertiary qualified staff such as Rehabilitation Counsellors to assess and support clients and DES consultants. Under the current funding levels this is not realistic for most providers. We recommend a review of the current star ratings system to make provision for those providers working with clients with complex disabilities who typically take longer to place into employment. The current model encourages providers to take on clients with less complex disabilities who can be placed into employment faster.

8.6 Is there a market need for specialist providers (disability/industry/age cohorts) that would increase employment opportunities?

The big providers in the current market do very well with clients with fairly simple disabilities, however, clients with more complex disabilities benefit from working

with providers that possess a strong understanding of their position. It is appropriate to see labour market participation as a cornerstone of good health. Often clients presenting to a GP for a mental health plan and a referral to a psychologist would be better channelled to a rehabilitation counsellor as their presenting issue centres on their work life.

There are many examples demonstrating improved return to work outcomes for clients with traumatic brain injury who were assisted by providers with expertise in this area. A similar model could be implemented and encouraged for clients with traumatic brain injury and other complex disabilities.

9 How do we measure success?

Key questions

9.1. What will success look like for:

- a) People with Disability (PWD) – safe and sustainable employment that is in line with their skills and attributes. A feeling of community contribution, community connection and participation. The ability to make earnings that enable people with a disability to participate in the goods and services market. Give people with a disability a voice and place in the labour market to represent their needs and wants.
- b) The Community – Raise community awareness of living with and working with people with a disability. Raise the profile and expectation of PWD as members of the community who can add value and contribute equally to society.
- c) Employers – Gain skilled and dedicated workers. Diversify and expand their workforce. Expand their service offering by hiring people who have different skills and abilities not considered before. Access to incentives to hire and maintain employment of PWD.
- d) Service Providers – Develop the skills, knowledge, expertise and processes to better support PWD to achieve independence through employment. By supporting PWD into employment service providers develop strong and long-lasting relationships with community members, business owners and other industry partners.
- e) Government – meet their responsibility to develop policy and protocol that supports the rights of PWD to live fulfilling lives, including access to suitable employment, improved employment rates and reduced program costs in the longer term, however, this may be linked to increased up front spend in the short term.

9.2. What data do we need to know if the program has been effective?

The systems currently in place allow easy collection of data. The program is currently measured on speed to placement, hours worked by participant and durability of employment.

9.3. How can people with disability, employers and providers help to measure and report on the performance of the new program?

- Client reports / repeat business
- Employer reports / repeat business
- Durability of paid work outcomes

9.4. What do people with disability and employers need to make an informed choice to select the best provider for their needs and how should this information be made available?

They need information on the qualifications and experience of the staff they will be working with. This could be made available through provider websites. At present, participants tend to choose the provider closest to their home rather than one offering specialist services. Addressing the incentives that some of the providers are offering to incentivise clients is recommended and should be against the guidelines.