

NESA

CDP Member Consultation Feedback Summary 2023



Community Development Program

NESA Summary of Feedback from Member Consultations

Over recent months NESA has held workshops with its Community Development Program (CDP) provider members to discuss the design of the new program moving forward. Our members have provided feedback on the challenges and context of CDP service delivery to date, the overarching purpose, guiding principles, core elements and critical success factors required for the new program to deliver real jobs for communities.

Need for a Remote Program

Providers have confirmed the need to maintain a program that specifically focuses on remote job seekers, the vast majority of whom are first nation's people; and which is culturally appropriate and supports the workforce and community development needs of remote regions.

Challenges

Providers are pleased that NIAA has consulted with so many communities on the design of the new program. One area requiring further discussion is the reality of remote servicing. The key challenges that impact on CDP provider servicing and their ability to achieve results are:

Resourcing (financial)

• The funding shifts that have occurred over the last 6 – 12 months have impacted providers' ability to deliver their business. The administrative functions of the contract have increased with the addition of the Pathways projects. While providers understand the desire of the National Indigenous Australians Agency to see more money staying in communities, changes have impacted on funding available to administer the program. This is especially a concern for not-for-profit providers and those without other external funding sources.

• Providers are pleased with the assistance being offered for 'Right Fit For Risk' (RFFR) set-up costs. However, there is still concern about the upkeep costs to keep accreditation, including ongoing staffing needs and IT accessibility.

Resourcing (staffing)

• The high turnover of staff in the employment services industry impacts CDP providers to a greater extent than their mainstream counterparts. In remote locations, CDP providers have difficulty in finding suitable staff (both in numbers and capability).

• Providers are also restricted by the availability of housing (which impacts staffing numbers), the safety of staff in community, and the mental stress for staff living away from home, working alone, constantly travelling long distances and the high cost of training.

Working with and in remote communities

• Remote servicing takes time. More time than mainstream employment servicing. Every aspect of service delivery takes longer to set up, to find and keep staff, to travel to sites to collaborate with communities, to connect with participants, to find opportunities in thin labour markets, to work with other services to target assistance.

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• Providers are committed to working with communities; however, the timeframes needed to consult with communities often does not align with contract timelines. Provider experience in many communities is that getting community decision makers together to consult on ideas and potential solutions can take anywhere between three and twelve months. Communities are not bound to contract timelines or providers' needs to meet contract requirements.

Relevant performance requirements

• Providers are highly motivated to have performance measures that help them to measure what is working and what is not. They are keen to have measures that both meet the Agency's needs as well as being a useful tool for their own performance appraisal. Providers find it challenging that the current performance framework is narrow in how it defines success and call on NIAA to take account of the realities of remote community life and an individual's unique progress in determining what success looks like, and the widely varying stages of development of remote workforces and economies.

IT accessibility

• Providers in remote regions often face issues with internet availability, and this impacts on their ability to fulfil their contractual obligations.

Purpose

The purpose of any new program needs to be clear with the overarching wellbeing of individuals and communities being the main driver focussing on improving social and economic participation and inclusion.

Any program should recognise that economic participation through employment is a core component of wellbeing, in that it provides individuals with meaning and purpose in life, self-worth and dignity and is a protective factor, against poor physical and mental health, family dysfunction and poverty. The new program should work within a continuum of individual and community wellbeing, including: social and economic inclusion and participation; community and individual development; and employment and post-employment supports with a case management approach that recognises this continuum.

Guiding principles

Providers have suggested the following guiding principles be followed in the development of for a new program to replace CDP:

- A place-based, community-centred approach, relevant to the context, social and economic conditions, aspirations and needs of each community. Each community is different, and one model won't work for all. Not everyone is ready for employment. And many communities just do not have enough jobs. It also needs to be recognised that a significant percentage of the CDP Caseload who are on Newstart payment have undiagnosed medical conditions due to the lack of adequate assessment services in remote areas, and these job seekers would likely be on other types of benefits if they could be properly assessed.
- A human-centred approach co-designed and co-led with participants, providers, employers and community, with flexibility a key feature to meet the changing needs and circumstances of each community and the lived experience of each participant.

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- Respect for and strengthening of culture and cultural frameworks
- Tailored, individualised supports with participant's input as to what this looks like for them and creation of agreed reciprocal obligations
- Respect for existing community relationships, and acknowledgement of the consequences that changes to relationships can have on community, individual participant, provider and sector wellbeing
- A trauma-informed 'do no harm' approach, having regard to the high incidence and history of individual, inter-generational and community trauma and the impact of obligations including any compliance or sanctions on those experiencing trauma
- A planned 'lessons learnt' approach, focussed on continuous improvement that considers each participant's lived experience, with a focus on community, individual, provider and employer transition and growth that adapts and changes with them
- Excellence in government stewardship, with government working with community and other stakeholders to understand the consequences of actions and inaction by government on communities, individuals, providers and employers so that it can fulfil its responsibilities with care and due diligence.

Program components

Providers considered any new program needs to be 'more than a job' and should include:

- a wage-based component
- an economic development and / or business creation component independent of government (to prevent jobs disappearing with cessation of government funding)
- a community development component with support for cultural ceremonies
- a youth engagement and participation component given more than 50% of many communities comprise children and young people
- an infrastructure component given a significant number of community issues such as safe and secure housing and access to vehicles are critical to economic inclusion and participation
- a workforce development component that recognises the varying stages of workforce development in remote communities and is focussed on the supports needed to enable the workforce to continually develop and succeed in achieving outcomes for individuals and the community as a whole.
- Reciprocity should be a feature of individualised tailored agreements (as opposed to current approaches to mutual obligation) having regard to the wellbeing consequences arising for individuals, their families and communities from low economic participation. It is important to take an evidence-based, 'what works' approach and consider where fair reciprocal obligations could or would sit in any new program
- an allied health and telehealth component, having regard to high levels of long term chronic health conditions, undiagnosed disability and mental health issues and identifying and addressing these issues is foundational to achieving sustainable employment and other wellbeing outcomes.
- Homeland services should be considered in any model, where relevant.

Critical success factors should also be considered, as their absence can impact on outcomes and impact of any new program. These include:

- Housing: Access to safe, secure housing
- Transport: Access to safe, accessible transport to and from work, training and development activities
- Systems: User-friendly, intuitive and simple systems that don't detract from frontline work
- Service stability: Contract continuity to enable local partnerships to be built and solidified and achieve impact with a view to continuous improvement and flexibility to address changing community needs
- Communication: engagement is considered critical for successful implementation with regular, preferably face-to-face, consultation between government, providers, business and community. Additionally, timely written advice on program or service delivery changes to ensure all relevant parties are aware of new arrangements and how they might affect them.
- Partnerships: all parties involved should promote and nurture partnerships with state and local governments and other service providers
- Measure what matters: performance frameworks should ultimately focus on measuring impact and outcomes aligned to the purpose and goals of the program and output measures should be fully aligned to achievement of those goals and the key milestones along the way. Consideration should be given to individual and community goals aligned with the Government's Wellbeing Framework
- Smooth transitions: disruptive tender processes can have a significant impact on service continuity for remote communities with loss of local knowledge and fractured relationships impacting the achievement of productive outcomes for participants. A transition or rollover arrangement to the new CDP rather than a full tender process could be explored to provide communities more certainty about the future; support service continuity and not divert resources to expensive tender processes. Providers would welcome an open discussion on alternative approaches.
- Localised decision-making: consideration should be given to the delegation of some decisions to empower local Agency staff to make decisions with providers at a local level to remove service delivery barriers and meet local community needs.



