## **QUESTION TAKEN ON NOTICE**

**ADDITIONAL ESTIMATES HEARING: 13 February 2006** 

#### IMMIGRATION AND MULTICULTURAL AFFAIRS PORTFOLIO

### (100) Output 2.1: Settlement Services

### Senator Hurley asked:

- (1) Is there a system of standards and penalties for breaches of the contract similar to that of detention service providers? If so, please provide the standards.
- (2) Has a settlement services provider ever been breached?

#### Answer:

(1) All Integrated Humanitarian Settlement Strategy (IHSS) contracts incorporate extensive details of service delivery requirements and performance standards. Relevant extracts from the IHSS Contract are included (see Attachment). Services must also be carried out in accordance with best practice, industry standards and all relevant Commonwealth, State and local Government legislative requirements. Both the IHSS and detention service contracts contain a comprehensive system of standards to measure and monitor service delivery outcomes. The actual standards between the two types of contract can not be compared as they benchmark quite different types of service delivery outcomes. The difference between the IHSS contract and the detention contract is that the detention service contract contains direct financial penalties for breaches, which the IHSS contract does not.

If a breach was to occur, there are a number of options available to rectify the situation, depending on the nature of the problem. The Australian Government may terminate the contract or reduce the scope of services required under the contract. However, it is a requirement of the contract that where a material breach has occurred, that termination of the contract can only occur once the service provider has been given an opportunity to remedy the default.

(2) No settlement service provider has been notified of a breach of their contract either under the current contracts or past IHSS contracts.

# **Schedule 3 – Service Delivery Outcomes and Key Performance Indicators**

- 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.

	KPIs & PERFORMANCE STANDARDS	METHODS OF MEASUREMENT
NEEDS ASSESSMENT AND CASE COORDINATION PLAN  The Service Provider must appoint a Case Coordinator for each Entrant/group of Entrants to be a single point of contact for that Entrant/group of Entrants.  The Service Provider must establish emergency contact details in accordance with Clause 7.2 (c) of this Contract.  The Service Provider must conduct a needs assessment for each Entrant family (and Proposers where applicable) using the DIMIA assessment tool and develop a Case Coordination Plan for each Entrant family. The assessment and plan are to be commenced as soon as practicable after a new Entrant/Proposer has been referred and both finalised within the first week of arrival.  The assessment is to identify:  • Whether a pre-embarkation briefing has been provided and the extent to which it has assisted Entrants;  • What IHSS Services need to be accessed:  1. On arrival reception and assistance;  (a) meeting at airport, (b) initial orientation, and (c) emergency needs (eg, clothing/footwear, medical).  2. Accommodation Services; (a) initial/longer term accommodation support, (b) food, (c) assistance with documentation, (d) assistance with basic household goods, and (e) tenancy training.	The extent to which Entrants and Proposers are assessed for IHSS service delivery and case coordination plans are developed.  STANDARD  Assessments and plans are established consistent with the specifications for one hundred per cent of clients.	<ul> <li>Monthly invoices against Services delivered to Entrants; and</li> <li>Departmental random checks.</li> </ul>
<ol> <li>Pre and Post-Arrival Health Assessments to be undertaken as per DIMIA's Health Screening Protocols         <ul> <li>(a) Ensure that any Entrants who have had a pre-departure health screen have a post-arrival health screen conducted within one week of arrival.</li> <li>(b) Ensure that any entrants who have had a pre-departure health screen and been flagged as requiring immediate on-arrival health assistance or assessment are linked to health providers within 24 hours of arrival.</li> </ul> </li> <li>Short-Term Torture and Trauma Counselling; and</li> <li>Assistance with developing networks</li> <li>What referrals need to be made to other services:         <ul> <li>Income support (Centrelink);</li> </ul> </li> </ol>		

- 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.

denvery.		
OUTPUT SPECIFICATION	KPIs & PERFORMANCE STANDARDS	METHODS OF MEASUREMENT
<ol> <li>Medicare;</li> <li>Banking;</li> <li>Health assessment;</li> <li>Immigration;</li> <li>Education and training (eg, AMEP, children's' schooling); and</li> <li>Employment (eg, Job Network, qualifications recognition).</li> <li>What additional orientation and information support is required in order for the Entrants to understand money and budgeting, operate bank accounts and access financial services, purchase goods, and have a basic understanding of the local area (eg, transport), the law (including driver's licence requirements and road rules), childcare, school life etc;</li> </ol>		MARAGENERY
<ul> <li>Language support needs;</li> <li>The level of likely dependence on support to access services based on the confidence and independence of the Entrants, and taking into account other avenues of support, including community or Proposers; and</li> </ul>		
<ul> <li>Any additional support needs of the Entrants or issues which are specific to the needs of these particular Entrants.</li> </ul>		
The Case Coordination Plan should reflect the assessed needs (refer above) and detail arrangements for implementation, including:		
• service delivery arrangements (when/what/by whom) including requirements for volunteers arranged through the Volunteer Coordinator;		
• exit interview arrangements and referrals to post-IHSS services; and		
• the time and manner of seeking feedback on satisfaction with IHSS Service delivery.		

- 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.

OUTPUT SPECIFICATION	KPIs & PERFORMANCE STANDARDS	METHODS OF MEASUREMENT
COORDINATED DELIVERY OF SERVICES AND PROVISION OF REFERRALS	STANDARDS	WILASUREWIEWI
<ul> <li>The Service Provider, through the Case Coordinator, must coordinate the delivery of IHSS Services, provide referrals to other services and maintain/review/update the Case Coordination plan, by:</li> <li>making appropriate referrals (refer paragraph 5.6.26 of the RFT) for, and assisting Entrants' access to other services, including: <ol> <li>Medicare, Centrelink (within two working days of arrival);</li> <li>banking (within one week of arrival);</li> <li>general and specialist health and medical services as required and including: <ol> <li>any required follow-up on medical examinations conducted overseas; and</li> <li>immunisation programs;</li> </ol> </li> <li>AMEP (as soon as most immediate needs have been met and accommodation is stable); and</li> <li>employment agencies (eg. Job Network).</li> <li>50ordinating, monitoring and reviewing the delivery of IHSS Services, ensuring that Services are delivered in a seamless manner and at a time and at a pace to suit the Entrants' needs, adjusting the plan as new issues are identified and ensuring appropriate actions are taken or referrals made where new issues are identified;</li> <li>recording how and when Services were delivered and issues arising from the delivery of the Services;</li> <li>recording of Short-Term Torture and Trauma counselling sessions attended;</li> <li>liaising with the Volunteer Coordinator to ensure volunteers are used effectively in the delivery of IHSS Services;</li> <li>making transfer arrangements as required (refer Part One, paragraph 5.5.11 of the RFT) and notifying the Department;</li> <li>conducting an exit interview with the most appropriate members of each Entrant household, and including Proposers where appropriate. The interview with the most appropriate members of each Entrant household, and including Proposers where appropriate. The interview with the Entrant's experiences in relation to the appropriates of the preembarkation training and information (where relevant) and IHSS service delivery. In addition, it will provi</li></ol></li></ul>	The extent to which clients are satisfied with the scope, timeliness and effectiveness of service delivery.  STANDARD  Seventy five per cent of Entrants are satisfied with the scope, timeliness and effectiveness of service delivery.  All transfers notified to the Department.	<ul> <li>Six-monthly report on client feedback</li> <li>Feedback from Service Provider and Entrant on any pre-embarkation training and information received by the Entrant.</li> <li>Departmental random checks.</li> </ul>

- 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.

delivery.		
OUTPUT SPECIFICATION	KPIs & PERFORMANCE STANDARDS	METHODS OF MEASUREMENT
The assessment and tailored information, assistance, referrals and interviews must be provided in a manner that is consistent with IHSS principles and that:		
<ul> <li>is appropriate to the circumstances of the Entrant;</li> <li>provides on-going assessment and review;</li> <li>minimises gaps and duplication in Services accessed by Entrants;</li> <li>uses comprehensive and clear referral systems and guidelines;</li> <li>is at a pace suited to the Entrant;</li> <li>uses translation and interpreting services wherever required;</li> <li>ensures that Entrants retain control over any referral processes that are necessary;</li> <li>ensures that Entrants have a basic level of information that equips them to conduct their day to day affairs and to access Services confidently and independently;</li> <li>is culturally sensitive;</li> <li>is non-intrusive; and</li> <li>is able to be understood by Entrants.</li> </ul>		
PROPOSER SUPPORT  The Service Provider must conduct a needs assessment and assist Proposers according to their identified needs. This assistance must be provided in a manner consistent with IHSS Principles. Service Providers may need to work intensively with Proposers and their SHP Entrants to assist Entrants to access Services.  If required, information and guidance must be provided for example on:  issues Proposers may face in assisting Entrants to settle;  realistic expectations in relations to assisting Entrants; and  how Proposers can assist Entrants to access services eg income support, Medicare, English language tuition through the AMEP, financial services, budgeting advice, community services, housing, childcare and immigration advice.  While DIMIA does not provide specific information for this purpose, the DIMIA website contains some information that may be useful.	KPI The extent to which Proposers are satisfied with the level of support received. STANDARD Seventy five per cent of Proposers report that they are satisfied with the level of support received.	Six-monthly report on client feedback;     Feedback to DIMIA from other providers/stakeholders; and     Departmental random checks.
ASSISTANCE IN DEVELOPING COMMUNITY NETWORKS  The Service Provider is required to introduce Entrants to local ethnic, religious and other community support organisations, and to provide information, guidance and practical assistance to help Entrants to adjust to life in Australia. These Services must be provided in a manner consistent with IHSS Principles.	KPI The extent to which Entrants are satisfied with the assistance provided.	Six-monthly report on client feedback; and     Feedback from other

- 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.

**************************************		
OUTPUT SPECIFICATION	KPIs & PERFORMANCE	METHODS OF
OUT OF SECURCATION	STANDARDS	MEASUREMENT
	STANDARD  Seventy five per cent of Entrants report that they are satisfied with the level of support received.	stakeholders
DEVELOPMENT OF COLLABORATIVE RELATIONSHIPS  The Service Provider must develop and maintain collaborative relationships with AMEP Service Providers, CSSS, MRCs/MSAs and mainstream service providers such as Centrelink, Medicare, Job Network and State and Local Government services to facilitate access by Entrants to the services they require.	KPI The extent to which the Service Provider is able to establish collaborative relationships.  STANDARD  DIMIA is satisfied with the extent of relationships established by the Service Provider.	Six-monthly reports by the Service Provider to DIMIA;      Feedback to DIMIA from other stakeholders; and      Random checks by DIMIA.

# ON ARRIVAL RECEPTION AND ASSISTANCE: 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.

OUTPUT SPECIFICATION	KPIs & PERFORMANCE STANDARDS	METHODS OF MEASUREMENT
REFUGEES ARE MET ON ARRIVAL AND TAKEN TO ACCOMMODATION		
<ul> <li>The Service Provider, on referral from the Commonwealth, must make sure that Refugees are met immediately on arrival at the airport or other points of arrival, and must:</li> <li>assist transiting Refugees to meet connecting flights, other forms of connecting transport or assist with overnight accommodation; or</li> <li>transport non-transiting Refugees to their accommodation.</li> <li>Refugees and their luggage must travel in a roadworthy vehicle driven by a licensed driver. Overnight accommodation must be equivalent to two-and-a-half star hotel accommodation and have adequate beds for Refugees.</li> <li>The Service Provider must be able to communicate effectively with Refugees and Refugees must be treated in a culturally sensitive, welcoming and courteous manner and in accordance with IHSS principles.</li> </ul>	KPI  All Refugees are met at point of arrival and provided immediate assistance in either continuing their travel or locating appropriate accommodation.  STANDARD  Seventy five per cent of Refugees are satisfied with the assistance provided.	Six-monthly report on client feedback; and     Departmental random checks.
ORIENTATION  The Service Provider must ensure that Refugees have the knowledge and skills to utilise the accommodation and its facilities by giving explanations on how to use:  • cooking facilities;  • cleaning facilities;  • heating and cooling facilities;  • hot and cold water taps;  • garbage disposal;  • plumbing;  • telephone;  • other public utilities such as gas, electricity and water;  • emergency services;  • security features; and  • any other matters relevant to the accommodation, including any issues with safety-related implications (eg hot water, electricity, gas).  The Service Provider must provide Refugees with an explanation of how they can obtain assistance should any facilities in the accommodation not function properly.	KPI  The extent to which Refugees are capable of confidently and safely utilising the accommodation and its facilities.  STANDARD  Seventy fiver per cent of Refugees are satisfied with the assistance and information provided.	Six-monthly report on client feedback; and     Departmental random checks.

# ON ARRIVAL RECEPTION AND ASSISTANCE: 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.

OUTPUT SPECIFICATION	KPIs & PERFORMANCE STANDARDS	METHODS OF MEASUREMENT
The Service Provider must provide Refugees with an explanation of the conditions of their stay in the accommodation.  The Service Provider must provide the Refugee with a \$20 phonecard and an explanation of its use.  The information and advice given to Refugees must be consistent with IHSS principles and must:  • be comprehensive;  • take into account the likely jet-lagged condition of Refugees on arrival;		
<ul> <li>be conveyed in a culturally sensitive, welcoming and courteous fashion;</li> <li>be able to be understood by Refugees; and</li> <li>be provided in a manner that is consistent with adult education principles which include opportunities for active and participative learning.</li> <li>PROVISION OF EMERGENCY MEDICAL ATTENTION AND/OR CLOTHING/FOOTWEAR</li> </ul>		
The Service Provider must confirm with Refugees whether they have any need for immediate medical attention or emergency clothing or footwear. Any urgent medical attention is to be provided as soon as possible and within 24 hours of arrival. Requirements for clothing/footwear suitable to the climate and the Refugees' needs are also to be addressed as soon as possible and within 24 hours of arrival.	KPI The extent to which Refugees have emergency requirements/needs after arrival.  STANDARD One hundred per cent of Refugees have emergency requirements/needs met within 24 hours of arrival.	<ul> <li>Six-monthly report on client feedback; and</li> <li>Departmental random checks.</li> </ul>

OUTPUT SPECIFICATION	KPIs & PERFORMANCE S'	
PROVISION OF INITIAL ACCOMMODATION (WHERE APPLICABLE)  The Service Provider must provide fully furnished accommodation which:  is safe, secure and suitable to the size and needs of the group;  is approved by DIMIA;  provides easy access to public telephone facilities;  is located close to shops; and  is easily accessible by public transport to all relevant services.  If the accommodation is in a hotel/motel, it must:  meet as a minimum a national motoring organisation two-and-a-half star rating;  have culturally and religiously appropriate food available (or else Service Provider must ensure that there is an alternative way for entrants to obtain appropriate food);  include access to laundry facilities; and  provide, as far as possible, single adult Entrants with their own bedroom.  The accommodation, if it is other than a hotel/motel must provide at a minimum:  single Entrants with their own bedroom and access to bathroom and dining/ cooking facilities;  Entrants travelling as a couple with a bedroom, bathroom facilities, a separate living room, a main bedroom,	The extent to which Entrants are accommodated in accommodation that meets the standard requirements.  STANDARD  Seventy five per cent of Entrants are satisfied with the standard of accommodation provided.  One-hundred percent of Initial Accommodation arrangements meet the contractual specifications	Six-monthly report on client feedback.     Departmental random checks.

OUTPUT SPECIFICATION		KPIs & PERFORMANCE STANDARDS	
and:			
1.	an additional bedroom for every adult family member or couple (some exceptions may be made for larger families);		
2.	an additional bedroom for every two teenage children where they are of the same sex or for every teenage child where		
	they are not of the same sex;		
3.	an additional bedroom for every three children under the age of 12 (some exceptions may be made for larger families);		
4.	furnishings which are appropriate to the needs of Entrants, fully functioning fittings and equipment including:		
	(a) adequate beds, bedding and towels for all family members;		
	(b) a wardrobe and/or set of drawers for each bedroom;		
	(c) a dining table and adequate chairs for all occupants and lounge chairs;		
	(d) adequate glassware, crockery, cutlery, and pots and pans, and other necessities;		
	(e) a television, radio and clock;		
	(f) a refrigerator;		
	(g) a heater and fan;		
	(h) window coverings;		
	(i) iron and ironing board;		
	(j) cleaning equipment; and		
	(k) access to a washing machine.		
The acco	mmodation must:		
• be	thoroughly cleaned at the end of each Entrant's stay (if the Entrant does not enter a longer-term lease for the premises);		
• hav	ve sufficient space for children to play without impinging on neighbours, or being exposed to traffic;		
• be	maintained and repaired, including the grounds, according to Commonwealth and State/Territory tenancy standards;		
• pro	ovide security for Entrants; and		
• be	pest-controlled.		

OUTPUT SPECIFICATION	KPIs & PERFORMANCE S	
The Service Provider must hold the leases for all Initial Accommodation or have approved arrangements with State Housing Authorities or community-based housing associations. The Service Provider is responsible for all the costs associated with the leases or other arrangements. Where hotel, motel or similar style accommodation is to be used, Service Provider are expected to have appropriate arrangements in place to ensure places are available and the special needs of Entrants are met (refer Section 5 of Schedule 2).  The Service Provider must:  • cover the cost of the first week of accommodation for Entrants;		
<ul> <li>not seek a rental contribution exceeding 30% of the income received from Centrelink of household members over the age of 18 or agreed rent, whichever is less for weeks two to four;</li> <li>collect a utilities contribution not exceeding \$5 per person up to a maximum of \$25 per household unit per week for weeks two to four; and</li> <li>collect fair market rental for the premises and full cost of utilities after week four.</li> <li>The same requirements apply where entrants are immediately accommodated in Longer-term Accommodation.</li> <li>Also, for Longer-term Accommodation, Tenderers are required to subsidise the payment of rent in advance and rental/utilities bonds for single Entrants who will not be sharing accommodation and for single parents with children. In this case the Entrants contribution for rent, rent in advance and rental and utilities bonds combined must not exceed 30% of the income received from Centrelink.</li> </ul>		
PROVISION OF FOOD  The Service Provider must provide food supplies consistent with the size of the family for the first week or until income support is received; the food provided must be culturally and religiously appropriate and consistent with the household size. Where hotel/motel style accommodation is used, the Service Provider must ensure that culturally and religiously appropriate meals are available for the duration of the Entrants' stay.	KPI The extent to which Entrants have adequate supplies of appropriate food until income support is received.  STANDARD Seventy five per cent of Entrants are satisfied with the standard of food provided	Six-monthly report on client feedback.

OUTPUT SPECIFICATION	PECIFICATION KPIs & PERFORMANCE STANDARI	
PROVISION OF/ASSISTANCE WITH DOCUMENTATION  The Service Provider must  • provide a standard tenancy agreement that formalises the Entrants' stay in Initial Accommodation. The agreement must:  1. be approved in advance by DIMIA and be consistent with Commonwealth, State or Territory legislation, as applicable;  2. include a fair and reasonable provision for eviction when Entrants do not enter into a longer-term lease and do not move to available alternative Longer-term Accommodation;  3. include a mechanism by which Entrants can have maintenance or other concerns promptly addressed;  4. clearly and comprehensively set out the tenants' and the Service Provider's rights and obligations; and  5. be presented in a form which is able to be understood by Entrants and/or is explained by the Service Provider or an interpreter in a manner that Entrants can understand.  • assist Entrants with the completion of property condition reports; and  • Consult with DIMIA (through the Contract Manager) if any eviction proceedings are commenced. The Lead Agency is to be kept informed.  The Service Provider must assist Entrants with documentation related to Longer-term Accommodation, including:  1. signing applications for rental properties;  2. entering into a property lease; and  3. completing a property condition report.  All Services must be provided in accordance with IHSS principles.	The extent to which:  • an appropriate and acceptable tenancy agreement is explained, understood and signed by Entrants using Initial Accommodation.  • an appropriate and acceptable property condition report is explained, understood and signed by Entrants in Initial Accommodation.  • DIMIA's contract manager is consulted prior to the commencement of any eviction proceedings in relation to Entrants in Initial Accommodation.  • Entrants are provided with the assistance they need to understand and deal with documents in relation to Longer –Term Accommodation	Six-monthly report on client feedback.     Records maintained by DIMIA's contract manager reconciled against records of eviction proceedings.

AFFORDABLE AND APPROPRIATE LONGER-TERM ACCOMMODATION IS FOUND FOR THEM AS SOON AS POSSIBLE.		
OUTPUT SPECIFICATION	KPIs & PERFORMANCE STANDARDS	
	<ul> <li>Seventy five percent of Entrants are satisfied with the standard of their tenancy agreement in terms of ease of understanding and fairness.</li> <li>Seventy five percent of Entrants are satisfied with the assistance they received in relation to the completion of their property condition report.</li> <li>DIMIA's Contract Manager is consulted in one hundred per cent of cases prior to the commencement of any eviction proceedings.</li> <li>Seventy five percent of Entrants are happy with the assistance they received in relation to understanding and dealing with documentation associated with Longer-term Accommodation</li> </ul>	
LONGER-TERM ACCOMMODATION  The Service Provider must provide support to Entrants as needed to enable Entrants to locate and lease suitable longer-term stable accommodation (where Initial Accommodation is not available or acceptable for long-term leasing) as soon as possible after arrival. The support must:  • take into account the Entrants' specific needs  • assist and advise the Entrants in their negotiations with real estate or other agents;	KPI The extent to which Entrants are able to find and lease appropriate and affordable Longer-term Accommodation. STANDARD	Six-monthly report furnished by the Service Provider to the Contract Manager; and     Six monthly report

AFFORDABLE AND APPROPRIATE LONGER-TERM ACCOMMODATION IS FOUND FOR THEM AS SOON AS POSSIBLE.			
OUTPUT SPECIFICATION  KPIs & PERFORMANCE STANDA			
<ul> <li>assist eligible Entrants to obtain Government rental and/ or utilities bond assistance.</li> <li>assist with the arrangement of bonds;</li> <li>subsidise payments of rent in advance and rental and utility bonds for single parents with children and single Entrants not sharing accommodation.</li> <li>arrange for the removal of the household unit's possessions from Initial Accommodation;</li> <li>assist in the connection of utilities; and</li> <li>identify up to three housing options that are consistent with the Entrants' stated needs with particular regard for: <ol> <li>family composition;</li> <li>proximity to social support</li> <li>proximity to shops, AMEP and other educational and community services;</li> <li>the Entrant's health and income;</li> <li>the safety, security and standard of the rental accommodation; and</li> <li>any special needs</li> </ol> </li> <li>After four weeks supported accommodation, the Service Provider is required to recover full market rental and full cost recovery of</li> </ul>	Seventy five per cent of Entrants are:  I located in longer-term stable accommodation within four weeks of arrival.  satisfied with their Longer-term Accommodation.  satisfied with the level of support they receive in relation to long-term accommodation	on client feedback.	
utilities.  Assistance with Basic Household Goods  The Service Provider must ensure, by supplying and installing as necessary, that all households in Longer-term Accommodation are in possession of at least the following goods:  • per household:  1. washing machine; 2. refrigerator (of a capacity appropriate to the size of the family); 3. sofa; 4. table and chairs (size of table and number of chairs adequate for size of household); 5. cooking pots and utensils; 6. dinner set and cutlery; 7. five tea towels; 8. kettle; 9. toaster; 10. iron and ironing board; 11. heater and/or fan; 12. broom, dustpan and brush;	KPI Entrants' assessed needs are met within the overall budget and on time. STANDARD One hundred per cent per cent of Entrants receive goods of a satisfactory standard in a timeframe which meets their requirements.	Six-monthly report on client feedback.     Departmental random checks.	

OUTPUT SPECIFICATION	KPIs & PERFORMANCE STANDARDS	
13. mop, bucket and toilet brush;		
14. vacuum cleaner;		
15. television;		
16. radio clock; and		
17. wall clock;		
• per person:		
1. 1 bed base (or cot);		
2. 1 mattress;		
3. 2 blankets;		
4. bedspread;		
5. 2 sheets;		
6. 1 pillow;		
7. 1 pillow slip; and		
8. 2 towels;		
The Service Provider must ensure:		
Mattresses and linen are new;		
<ul> <li>Items supplied to Entrants are in a reasonable condition with choices being available where possible;</li> </ul>		
• Items are available at the time the household unit is moving to Longer-term Accommodation. Further, the goods must be delivered to the Entrants' Longer-term Accommodation and assistance provided with assembly and installation;		
<ul> <li>All items supplied are compliant with any relevant Government regulations; and</li> </ul>		
All services are to be delivered in a manner consistent with IHSS principles		
TENANCY TRAINING	KPI	The six-monthly
The Service Provider must provide support to Entrants to ensure that Entrants are able to successfully meet their obligations as tenants in Australia. The guidance must cover the following issues:  • House cleaning;	The extent to which Entrants are in possession of good household management skills	report to the Contrac Manager (to include details of references
Health and hygiene;	at the end of the training	issued).
<ul> <li>Household safety, including in relation to hot water and electrical/gas appliances and outlets;</li> </ul>	program.	Six-monthly report
<ul> <li>Household security;</li> </ul>	STANDARD	on client feedback.
• General maintenance;	Seventy five per cent of Entrants are satisfied with	Departmental random checks.

OUTPUT SPECIFICATION	KPIs & PERFORMANCE STANDARDS	
<ul> <li>Basic use and care of utensils;</li> <li>Basic care and use of appliances;</li> <li>Public health and safety issues;</li> <li>Tenancy agreements; and</li> <li>Vacating inspection list.</li> <li>Taking into account the size and composition of the household, training will be provided:</li> <li>within the first three days of arrival;</li> <li>in the language that is understood by the Entrants and using interpreters if required;</li> <li>on a consistent basis (i.e. produces consistent outcomes for Entrants in comparable circumstances); and</li> <li>in a manner that is consistent with IHSS principles, culturally sensitive and sensitive to the particular settlement issues of Entrants.</li> <li>The Initial session can be conducted on an individual or group basis and should be no longer than one-and-one-half hours. Follow-up sessions of one hour duration should be provided as needed but within the first four weeks of arrival.</li> <li>On completion of the training program, the Service Provider may provide a reference to enhance the Entrants' capacity to rent in the</li> </ul>	the tenancy training provided.  Seventy five per cent of Entrants are provided with a reference to assist them secure long-term accommodation.	
NETWORKING The Service Provider must establish networks with housing providers, including State/Territory Housing authorities, community housing services, and private sector rental providers to:  • generate more and earlier housing options for Entrants; and  • promote fairness and equity for Entrants in obtaining housing. All networking activities are to be consistent with IHSS principles.	KPI The extent to which the Service Provider is able to offer appropriate and affordable Longer-term Accommodation. STANDARD Seventy five per cent of Entrants are:  • located in longer-term stable accommodation within four weeks of arrival.  • satisfied with their long-term accommodation.	Six-monthly report furnished by the Service Provider to the Contract Manager; Six-monthly report on client feedback.

#### SHORT-TERM TORTURE AND TRAUMA COUNSELLING SERVICES:OUTCOME:

ENTRANTS ARE ABLE TO ACCESS TORTURE AND TRAUMA COUNSELLING; AND THEIR HEALTH ISSUES ARISING FROM THEIR EXPERIENCE OF TORTURE AND TRAUMA ARE UNDERSTOOD BY OTHER MEDICAL SERVICES AND HEALTH PROFESSIONALS.

OUTPUT SPECIFICATION	KPIs & PERFORMANCE STANDARDS	METHODS OF MEASUREMENT
Assessment of the Psychological Needs of Entrants  The Service Provider must ensure that the psychosocial and psychological health assessment and referral process meets the following specifications and is provided in accordance with the IHSS principles. The psychosocial and psychological health assessment must:  • commence within two weeks from the date an Entrant indicates that they are ready for an assessment;  • be conducted in a non-threatening manner, at a pace suited to the Entrant, in a language easily understood by the Entrant (or utilising the services of interpreters if required and if acceptable to the Entrant) and takes into account cultural sensitivities and the specific needs of women; and  • be conducted by appropriately qualified and experienced staff.	KPI The extent to which Entrants are able to access the counselling support that they need in a timely manner.  STANDARD One hundred per cent of Entrants report that they have had the opportunity to access appropriate Short-term Torture and Trauma Counselling Services.	<ul> <li>Six-monthly reports on client feedback; and</li> <li>Departmental random checks.</li> </ul>
DETAILED CASE PLAN OF INTERVENTIONS		
The Service Provider must establish and implement a case plan of short-term psychosocial and psychological interventions that will: <ul> <li>assist Entrants to manage their recovery from serious traumatic and psychological difficulties;</li> <li>assist Entrants to benefit from the health, community support and resettlement programs available to them;</li> <li>prevent deterioration of Entrants who need long-term counselling by providing interim counselling; and</li> <li>consist of a range of possible strategies including:</li> </ul>	The extent to which the counselling sessions provided meet the needs of Entrants.  STANDARD  Seventy five per cent of Entrants are satisfied with the Service provided.	<ul> <li>Six-monthly reports on client feedback; and</li> <li>Departmental random checks.</li> </ul>
<ol> <li>psycho-educative strategies designed to strengthen the Entrant's understanding of issues affecting them and their families and how these could be managed;</li> <li>discussion of symptoms of psychological distress and reinforcement of the Entrant's capacity to cope independently;</li> <li>working through the case plans arising from the assessment with the interventions required and agreed to by the Entrant;</li> </ol>		

#### SHORT-TERM TORTURE AND TRAUMA COUNSELLING SERVICES:OUTCOME:

ENTRANTS ARE ABLE TO ACCESS TORTURE AND TRAUMA COUNSELLING; AND THEIR HEALTH ISSUES ARISING FROM THEIR EXPERIENCE OF TORTURE AND TRAUMA ARE UNDERSTOOD BY OTHER MEDICAL SERVICES AND HEALTH PROFESSIONALS.

	OUTPUT SPECIFICATION	KPIs & PERFORMANCE STANDARDS	METHODS OF MEASUREMENT
4.	the provision of short-term counselling sessions that will assist Entrants in addressing those emotional and psychological difficulties which are significantly affecting their ability to cope in the early stages of the resettlement process; and		
5.	facilitating referrals for longer-term counselling and casework services in situations where the psychological difficulties have been compounded by new information or experiences, or where the traumatic effects of past experiences require long-term interventions.		
The inte	erventions must be conducted in accordance with IHSS principles and:		
ser	a non-threatening manner, at a pace suited to the Entrant, in a language easily understood by the Entrant (or utilising the vices of TIS/interpreters if required and if acceptable to the Entrant) and taking into account cultural sensitivities and a specific needs of women; and		
• by	appropriately qualified and experienced staff.		
Each se	ssion attended by Entrants/household is to be recorded by the Case Coordinator on the case coordination plan.		
ADVOC	ACY AND TRAINING	KPI	Six monthly reports
	vice Provider must provide an annual plan of advocacy and training of other medical services and other health onals in relation to the impact of torture and trauma on mental and physical well-being of Entrants.	The extent to which DIMIA is satisfied that agreed activities have been undertaken and reported on.	
		STANDARD	
		DIMIA satisfied that all agreed activities have been undertaken in a satisfactory manner.	

VOLUNTEER COORDINATION: OUTCOME: VOLUNTEERS HAVE DEFINED AND MEANINGFUL ROLES IN THE DELIVERY OF IHSS SERVICES WITHIN AN ACCOUNTABLE MANAGEMENT FRAMEWORK.		
OUTPUT SPECIFICATION	KPIs & PERFORMANCE STANDARDS	METHODS OF MEASUREMENT
ESTABLISHMENT AND MAINTENANCE OF A VOLUNTEER MANAGEMENT FRAMEWORK INCORPORATING A POSITION OF VOLUNTEER COC	PRDINATOR	
The Service Provider must establish and maintain a volunteer management framework, which is to be agreed by DIMIA and is in accordance with the National Standards developed by Volunteering Australia. The framework must incorporate:  • a position of Volunteer Coordinator to manage the framework implementation and to coordinate and encourage the contributions of volunteers;  • specific roles to be offered to current CSR groups and other groups/individuals that are engaged by Service Providers;  • a plan for recruitment, engagement, vetting (including police checks) and training (both induction and ongoing training) of volunteers over the life of the contract;  • processes for task assignment to volunteers and management of the tasks to be undertaken to ensure appropriate support and accountability. These processes must take into account the rights of volunteer workers (i.e. The right to determine the number of hours volunteered and when those hours will be worked);  • procedures for communication between volunteers and the Volunteer Coordinator in relation to such matters as reporting on tasks undertaken, issues encountered, any identified special needs of clients, and provision of volunteer support when required;  • mechanisms to ensure that the Service Provider's policies for volunteer involvement are understood, implemented and maintained at all levels of the organisation;  • procedures to control all documentation and personnel records that relate to the management of volunteers;  • policies and procedures, including both a Code of Conduct and a grievance mechanism, for ensuring that the rights and responsibilities of both volunteer workers and the Service Provider are respected and maintained;  • an arrangement for agreeing and paying volunteer's out-of-pocket expenses incurred in the performance of their assigned duties; and  • a risk management plan for the engagement of volunteers including the maintenance of written policies and the implementation of procedures to ensure the safety and well-being of volu	The extent to which the management framework is established and implemented in accordance with the requirements.  STANDARD  Seventy five per cent of Entrants satisfied with volunteer support provided; and  Seventy five per cent of volunteers satisfied with volunteers satisfied with volunteer management arrangements.	<ul> <li>Volunteer feedback addressed in the annual report; and</li> <li>Contract evaluation process (refer Part One, paragraph 5.14.5 of the RFT).</li> </ul>

### ADVOCACY AND COMMUNITY AWARENESS RAISING SERVICES: 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.

OUTPUT SPECIFICATION	KPIs & PERFORMANCE STANDARDS	METHODS OF MEASUREMENT
PROVISION OF INFORMATION, TRAINING SESSIONS, ADVICE AND CONSULTANCY SERVICES TO MAINSTREAM AGENCIES		
The Service Provider must identify, document and, where appropriate, establish networks with any organisations, services, agencies and individuals that are important to the delivery of IHSS Services within the contract region. Those organisations, services, agencies and individuals may include:  • medical practices (especially those where bulk-billing is available to Entrants);  • schools;  • mainstream agencies such as Centrelink, Medicare, health centres, domestic violence centres and employment agencies.  The Service Provider must provide information and training, according to need, to relevant organisations, services etc on the particular needs of Entrants, including:  • the need for cultural sensitivity, particularly in relation to women;  • the need for, and availability of, interpreting services;  • the needs of refugee children;  • the effect of past experience on Entrants; and  • any other issues relevant to client groups.  The Service Provider must identify gaps in the provision of mainstream services, or barriers to access, for Entrants. Gaps will be identified through conducting some or all of the following activities:  • identifying and analysing client needs, and whether there are services/resources available to meet them;  • liaising with other agencies in the service delivery network; and  • research.  The Service Provider must address identified gaps/barriers by initiating appropriate activities and/or projects and by participating in meetings with other service providers to improve the responsiveness of mainstream services to the needs of Humanitarian Program Entrants.	The extent to which DIMIA is satisfied that agreed activities have been undertaken and reported on.  STANDARD  DIMIA satisfied that all agreed activities have been undertaken in a satisfactory manner.	Six-monthly report against the Advocacy and Awareness Raising activities plan.
The Service Provider must develop and agree with DIMIA an annual program of activities and report against it on a six-monthly basis.		

#### ADVOCACY AND COMMUNITY AWARENESS RAISING SERVICES: 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.

OUTPUT SPECIFICATION	KPIs & PERFORMANCE STANDARDS	METHODS OF MEASUREMENT
The Service Provider must employ the most appropriate staff to undertake advocacy and training activities.		
The Service Provider must not charge any other IHSS Service Providers for the advice, information products, consultancy and activities/ initiatives provided against this output specification.		
The Service Provider must consult with post IHSS agencies, including MRCs and CSSS, to ensure that their activities are complementary and do not overlap.		
All advice, information products, consultancy and activities/ initiatives provided by the Service Provider must be:		
• consistent with international best practice in the delivering Services to humanitarian Entrants;		
accessible, comprehensive, easily understood and current; and		
targeted and relevant.		