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## Interim Evaluation of the Career Pathways Pilot for Humanitarian Entrants

Department of Home Affairs July 2019

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## Glossary

Acronym	Full name
AHPRA	Australian Health Practitioner Regulation Agency
AMES	AMES Australia
atWork	atWork Australia Pty Ltd
AWP	Activity Work Plan
CAGR Compound Average Growth rate	
CatholicCare	CatholicCare Tasmania
CRM	Client Record Manager
CSV	Comma Separated Values (file type)
DEX	DSS Data Exchange
DSS	Department of Social Services
FAM	Funding Agreement Manager
HREC	Human Research Ethics Committee
HSP	Human Settlement Program
IELTS	International English Language Testing System
MDA	Multicultural Development Australia Ltd
Navitas	Navitas English Pty Ltd
NSW	New South Wales
OET	Occupational English Test
PIR	Post Implementation Review
PTE	Pearson English Test
RESP	Refugee Employment Support Program
RPL	Recognition of prior learning
SCORE	Standard Client/Community Outcomes Reporting
SPMP	Skilled Professional Migrants Program
SSI	Settlement Services International Limited
TAFE	Technical and Further Education

## **Executive summary**

### Introduction

Deloitte Access Economics were engaged to undertake an interim evaluation of the Career Pathways Pilot for Humanitarian Entrants (the 'Pilot), aimed at assessing progress against intended short to medium term objectives and to identify suggestions for potential areas of improvement.

### **About the Career Pathways Pilot for Humanitarian Entrants**

The Australian Government established a three year Pilot aimed at helping for Humanitarian Entrants pursue relevant and satisfying careers. Pilot services commenced in March 2017.

The Pilot was implemented as an acknowledgement that skilled refugees represent an untapped economical potential for the labour market, yet often experience specific barriers to finding employment, such as a lack of Australian work experience.

The Pilot aimed to assist humanitarian entrants within five years of settlement, and with vocational level English, to access employment opportunities that utilise their pre-arrival qualifications and skills. Pilot services include tailored career advice and targeted financial support to assist with the cost of the qualification recognition process.

Pilot sites are located across six humanitarian settlement sites (Sydney, Melbourne, Canberra, Toowoomba, Perth and Hobart).

### **Evaluation background and methodology**

This interim evaluation brought together a range of quantitative and qualitative data sources including: a short survey of Pilot clients and telephone interviews with a small sample of clients; consultations with key stakeholders (including service providers, employer and industry bodies, departmental staff); and a review of relevant program data and documentation.

Data was collated and analysed to answer a number of questions set out in the evaluation framework and addressing the Pilot's appropriateness, processes, effectiveness and efficiency.

Investigating longer-term outcomes (including the economic or social benefits of the Pilot) were deemed out of scope as insufficient time has elapsed for these outcomes to be realised.

## **Key findings**

There is limited specialist career advice available to humanitarian entrants who have newly recently settled in Australia.

Broadly, the eligibility criteria for the Pilot has been found to be appropriate.

Implementation of the Pilot and recruitment of clients by providers was slow, with lower than anticipated clients participating in the Pilot and, six months out from the Pilot's cessation, half the providers had achieved less than half the expected number of clients. As at December 2018, DEX data shows that the number of clients enrolled in the Pilot was 784, representing 65 per cent of the expected amount. A range of factors impacting take-up were identified.

There is evidence that the pilot program has been effective to some degree in supporting participants to meet short term objectives, including:

- Pilot participants were generally well informed of Pilot services and reported services were accessible and easy to use.
- Career advice and planning was identified as the most important activity and the majority of participants had completed a career plan.
- Financial support was considered a fundamental feature of the Pilot and half of all participants had received financial support. However there was a lack of clarity to clients about the intention of this support and differing opinions about whether the level of financial support was sufficient.

In terms of the intended medium term outcomes, the interim evaluation found:

- In terms of the Pilot's overall goal of re-employment in the same or similar roles, this appears to be a work in progress, with 11 to 17 per cent of participants having found employment in the same job as their pre arrival occupation.
- Over half of survey respondents reported they had achieved employment at some point during participation in the Pilot.
- There were a range of barriers and challenges to achieving outcomes.
- A third of survey respondents had engaged in further training or bridging courses, however there is insufficient evidence to determine if this is relevant to achieving reemployment in a like career.
- A third of respondents reported that their qualifications had been recognised or were in the process of being recognised.

The flexibility of the Pilot model was a valuable aspect allowing for innovation and local adaptation, yet providers identified that greater guidance and centralised processes (tools and templates) from the Department would have been beneficial. Duplication of effort was identified in relation to the mapping of career pathways.

There was insufficient data for the interim evaluation to determine whether the Pilot was efficient. However, the flexible models meant there was substantial variation at this point in time across providers in relation to the indicative average cost per client and per service (session).

## Suggested areas for improvement

The key findings have informed ways in which career pathways services could be improved in future.

Suggestions for Government (for policy development and program improvement):

- Running future Pilots for longer or building in mechanisms to extend a Pilot.
- Establishing a centralised knowledge hub, outsourced to a third party, for accessible careers information.
- Enhanced integration with other settlement services.
- Clear, streamlined reporting requirements.

Suggestions for providers (for program improvement):

- More formalised employer/industry advocacy strategies.
- More detailed career plan templates.
- Additional workplace readiness training for clients.
- More frequent inter-provider information sharing

## 1 Introduction

## **1.1** The Career Pathways Pilot for Humanitarian Entrants

The Australian Government allocated funding in the 2016 Federal Budget for a Career Pathways Pilot for humanitarian entrants. The Pilot has run from October 2016 and is set to conclude in June 2019.

The Career Pathways Pilot (the Pilot) is funded by the Department of Social Services (DSS)<sup>1</sup>; it seeks to assist newly arrived humanitarian entrants to pursue relevant and satisfying career pathways, utilising professional skills, education and experience acquired prior to arrival in Australia.

The Pilot was developed to provide targeted career support to a specific cohort of humanitarian entrants. Current eligibility includes those on and offshore humanitarian visas (200, 201, 202, 203, and 204). To be eligible for the Pilot, the prospective client must meet the following criteria:

- Have arrived in Australia in the last five years through the offshore humanitarian program
- Speak English 'well', as assessed by providers
- Have professional/trade skills or qualifications applicable to the Australian workforce
- Want to be re-employed in the same (or similar) career they held prior to their arrival.

A number of mainstream, and targeted, settlement and employment services exist for newly arrived humanitarian entrants in Australia, funded across all levels of Government, as well as through non-Government services. As such, in developing the Pilot, DSS mapped existing services to ensure the Pilot would be filling a gap without duplicating services. The following key objectives were ultimately identified for the Pilot as a result of this process:

- The provision of timely, comprehensive career advice and employment information to participants
- Assisting participants to develop individualised and targeted career pathway plans
- Allocating targeted financial support to participants most likely to benefit to assist with the qualification recognition process

The Pilot is delivered under DSS' Grants for Community Settlement and received funding of \$5.2 million in the 2016-17 budget for the 2017-18 to 2018-19 financial years. Of this, \$4.5 million was spent on service delivery, and the residual was used for departmental administration, evaluation and communication products.

## **1.2** International example – Canada

A similar program is currently in operation in Canada. This model was used to inform the design of the Australian Pilot. The Canadian model was developed in response to a number of widespread national labour market challenges. These challenges included the underutilisation and unemployment of newcomers, skills shortages, and the lack of awareness of the importance of transferrable skills.

The Canadian government funds the 'Alternative Careers Pathways' initiative. The objective of this program is to assist internationally-trained individuals to make use of their existing skills and training in related, meaningful careers. This goal is achieved through face-to-face careers sessions and by funding industry organisations to develop alternative career guides and resources.

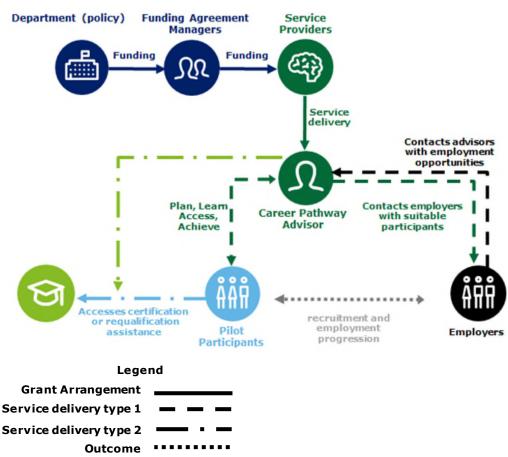
The Canadian government has reported overwhelming success of this program in helping newcomers realise that alternative careers are a viable option for employment, either as a career in itself, or as an interim employment opportunity while pursuing licensure.

<sup>&</sup>lt;sup>1</sup> Note: the pilot program was transferred to the Department of Home Affairs as part of the May 2019 Administrative Arrangements Orders.

### **1.3** Overview of the Careers Pathways Pilot

An overview of the Pilot operating model is provided in Figure 1.1.

Figure 1.1: Overview of the Pilot model



The Pilot is delivered in six locations across Australia through individual service providers. The types of providers selected include settlement services operators and employment service providers, as shown in Table 1.1.

Provider	Provider type	Location
Settlement Services International (SSI)	Settlement services	Sydney
AMES Australia	Settlement services	Melbourne
Multicultural Development Australia (MDA)	Settlement services	Toowoomba
CatholicCare Tasmania	Settlement services	Hobart and Launceston
NAVITAS English	Settlement services	Canberra
atWork Australia	Employment services	Perth

Various reviews and studies have been undertaken to provide assessment of the Pilot. Review and analysis is intended to support future government decision-making processes. This Evaluation is supported by a Post Implementation Review undertaken in 2017 and a Counterfactual Study undertaken in 2018.

A summary of the PIR and the Counterfactual study is at A.1 Post Implementation Review and A.2 The Counterfactual Study.

## **1.4 Purpose and scope of this interim evaluation**

Deloitte Access Economics was engaged by DSS to undertake an interim evaluation of the Pilot. The evaluation aimed to assess the effectiveness and efficiency of the Pilot against its intended intermediate outcomes and the delivery aspects of the Pilot model itself.

An evaluation framework was developed to assess the appropriateness, process, effectiveness and efficiency of the Pilot. The key lines of enquiry for this evaluation included:

- 1. Is the Pilot model the appropriate vehicle for assisting eligible humanitarian entrants to identify and pursue similar or 'like' career pathways?
- 2. Has the Pilot design led to successful implementation of services to clients?
- 3. How effective is the Pilot in achieving its intended outcomes?
- 4. How efficiently has support to eligible clients been provided throughout the Pilot?

The following sections set out the Pilot Interim Evaluation methodology, findings and suggestions for future improvement.

## 2 Methodology

## 2.1 **Project methodology**

To undertake the evaluation, a six-stage approach was conducted across the three key phases (Planning and Design, Conduct, and Reporting). This approach was followed to ensure the evaluation was efficient and able to provide detailed and robust findings, distilling practical and actionable suggestions for ongoing refinement of the program.

Data sources informing the evaluation's key lines of enquiry include:

- A Pilot client survey
- Consultation with key stakeholders
- Program document review

These are discussed further in the sections that follow.

## 2.1.1 Evaluation data collection

## 2.1.1.1 Pilot client survey

A short survey was distributed to collect information from clients about their level of satisfaction with the Pilot. This was a rich data source for this evaluation with 168 completed survey responses and, with a response rate of 39 per cent. To incentivise greater engagement, clients who completed a final qualitative survey question entered a draw to win one of two \$100 gift cards.

The following data shows the breakdown of survey responses for each service location (Table 2.1). Seven per cent of survey respondents chose not to identify their provider. The distribution of survey respondents was skewed towards AMES and atWork, when compared with actual client numbers as reported through the DSS Data Exchange (DEX), for the December 2018 reporting period (December 18) as at April 2019.

Provider	Count	Survey per cent	Actual (DEX) per cent
AMES Australia	91	54	36
atWork Australia Pty Ltd	27	16	7
CatholicCare Tasmania	2	1	3
Multicultural Development Australia Ltd (MDA)	4	2	8
Navitas English Pty Ltd	6	4	6
Settlement Services International Limited	26	15	40
No response	12	7	N/A
Total	168	100	100

Table 2.1: Survey respondents by provider, count and percentage of the response

SSI is notably underrepresented in the survey responses, making up 15 per cent of the total number of survey responses, yet having 40 per cent of the total Pilot participant population.

There is a notable difference in the distribution of survey responses by provider, relative to the number of clients according to the DEX data. This is likely due to variation in recruitment of survey participants.

Due to privacy concerns and aligned with the ethics application, surveys could only be sent to clients upon the service provider firstly receiving their written consent. Following attainment of consent, the service providers then provided email addresses for clients to the evaluation team.

This two-step process lead to a significant degree of variation in terms of the number of email addresses provided, per provider.

The gender distribution of the survey responses for each provider were overall consistent with the actual gender distribution from DEX. The exception to this is CatholicCare, which could not be compared accurately due to the small number of responses.

## 2.1.1.2 Consultations with key stakeholders

Interviews were held with a number of relevant stakeholder groups, including Pilot clients, service providers, employer / industry representatives and Department staff.

## 2.1.1.2.1 Client interviews

Clients who indicated in the survey that they would be willing to participate in a further interview were representatively sampled and invited to participate in a follow-up phone interview.

Six client interviews were initially planned, with the aim of conducting one consultation per provider, with the aim of an equal gender split. However, no CatholicCare clients indicated they would like to participate in a further interview. As such, the following five Pilot participants were interviewed:

- AMES client (male)
- atWork client (male)
- MDA client (female)
- Navitas client (female)
- SSI client (male)

## 2.1.1.2.2 Service provider interviews

Consultations were conducted with each of the service providers via teleconference. Six consultations were held, with several staff from the service providers joining the calls. Upon request, an additional consultation was held with CatholicCare.

Following the interview, service providers were encouraged to contribute any additional insights, information or program data they deemed relevant for consideration in this evaluation. Several providers took this opportunity, sending through news stories, media releases, program statistics and example career plans.

## 2.1.1.2.3 Employer/industry interviews

Due to lower than anticipated response rates, only three consultations were held with this stakeholder group, and evidence from one interviewee was not considered useable due to the interviewee's inability to distinguish between the New South Wales Government-funded Refugee Employment Support Program (RESP) and the Australian Government-funded Career Pathways Pilot.

## 2.1.1.2.4 Department interview

Consultation with DSS was held via a 90 minute teleconference involving a range of staff. Data gathered through this consultation also assisted in gaining a more complete understanding of the Pilot from a program planning and overarching program management perspective.

## 2.1.1.3 Program document review

A review of relevant program documentation and data was undertaken, including information collected by service providers, such as provider Activity Work Plans (AWPs), or provided through DEX. This program document review built on the analysis of program documents undertaken as part of the PIR.

## 2.2 Evaluation framework

## 2.2.1 Program logic

The program logic outlines the intended chain of cause and effect of the Pilot. It depicts the theory of change upon which the program is based, illustrating the logical reasoning connecting program inputs and activities to their intended outputs and outcomes.

This evaluation report uses the program logic to determine the Pilot's maturity in meeting its objectives. The Program Logic is shown in A.3 Methodology overview.

## 2.2.2 Evaluation questions

The evaluation questions (refer A.3 Evaluation questions and Indicator framework) describe the scope of the evaluation and its lines of enquiry. The questions were developed with reference to the program logic for the Pilot.

The questions were categorised into four evaluation domains:

- 1. Appropriateness: Is the Pilot model the appropriate vehicle for assisting eligible humanitarian entrants to identify and pursue similar or `like' career pathways?
- 2. Process: Has the Pilot design led to successful implementation of service to clients?
- 3. Effectiveness: How effective is the Pilot in achieving its intended objectives?
- 4. Efficiency: How efficiently has support to eligible clients been provided throughout the Pilot?

## 2.2.3 Indicator framework

The indicator framework (refer A.3 Evaluation questions and Indicator framework) comprises multiple performance indicators from available data sources to provide a broad range of perspectives.

The data sources used include:

- Pilot program documents and data analysis supplied by the DSS
- Service providers' interviews/information
- Employer/industry representatives' interviews/information
- Pilot participant surveys and interviews

## 2.2.4 Ethics approval process

As this interim evaluation involves human participation through the use of surveys, consultations and interviews to collect data from humanitarian entrants, a human research ethics approval application was submitted to Bellberry Limited. Bellberry is a National Health and Medical Research Centre-approved Human Research Ethics Committee (HREC).

The following documents were submitted as part of the ethics application:

- Cover letter
- Completed e-protocol (online application document)
- Deloitte's public liability insurance certificate of currency
- Deloitte's professional indemnity insurance certificate of currency
- HREC form of indemnity
- Project plan

To ensure compliance with ethical standards, the following strategies and processes were also incorporated into the project design, including:

- Informed consent, formalised through participant information sheets and a survey consent form
- De-identification of data, such as:
  - No survey questions ask for participant names or addresses
  - Publishing aggregated data so individuals cannot be identified based on their characteristics
  - Administrative data provided by DSS is de-identified
  - Use of secure data storage for program data and documents

## 2.2.5 This report

This report outlines the results of the evaluation based on analysis of both the primary and secondary data sources and seeks to answer the evaluation questions.

Following this chapter, in alignment with the evaluation domains, the structure of the report is as follows:

- Chapter 3: Appropriateness, examines how the Pilot is engaging with participants
- Chapter 4: Process, outlines design elements that have affected how the Pilot impacts on clients
- Chapter 5: Effectiveness, assesses the success of the Pilot in achieving its goals

- Chapter 6: Efficiency, assesses the costs associated with delivering the Pilot
- Chapter 7: Suggestions for policy development and program improvement- draws on the key findings identified through the evaluation and suggests possible policy and program improvements

## 3 Appropriateness

This chapter considers whether the design of the Pilot is evidence-based and whether there is evidence of demand for the program. This builds on the findings of the PIR.

## Summary of findings

- 1. This program broadly supports clients to identify and pursue similar or like careers. Providers suggested that having specialised support through the Pilot is warranted and that there is demonstrable need. Working in a job different to that which a client is skilled and qualified for represents a missed opportunity financially and economically for both them and the community more broadly.
- 2. Over the course of the Pilot up until December 2018, there have been less clients than originally anticipated. Within the first year the Pilot had recruited far fewer clients than anticipated (12 per cent of the total target expected number). However, within the 12 months that followed, providers all showed significant year on year growth, with growth ranging from 2.2 up to 8.2 times the number of new clients based on the numbers in the previous year. As at December 2018, 65 per cent of the target expected number of clients was achieved. Three of the six providers achieved less than half of the expected number of clients (CatholicCare Australia, 23 per cent, atWork, 31 per cent and Navitas, 48 per cent). There are numerous reasons as to why this is the case, with providers citing reasons such as changes in the demographics of humanitarian entrants settling in each region and possible barriers created by the Pilot's eligibility criteria.
- 3. Broadly, the eligibility criteria suffice, although several ideas to broaden them were identified, including loosening the five year cut-off for eligibility into the Pilot, broadening of the eligible visa subclasses and loosening the English-proficiency requirements (as occurred during the course of the Pilot).
- 4. DEX SCORE reporting and client interviews demonstrate that the majority of client respondents have been satisfied with the services they have received through the Pilot. On average, all measures of client satisfaction received greater than a 4 out of 5 on average across all respondents.

## **3.1** Is the Pilot model appropriate for assisting eligible humanitarian entrants to identify and pursue similar or 'like' career pathways?

The Pilot specifically intended to identify pathways for humanitarian entrants that correlate with their previous experience. The expressed intent of the program is to 'help newly arrived humanitarian entrants to use their professional or trade skills and qualifications in Australia'. Once clients are deemed eligible to participate in the program, a career plan is devised. Providers reported that this involved them undertaking research to determine the most suitable pathway for clients, including identifying suitable alternative pathways (e.g. a doctor retraining as a nurse) or working with them to support the attainment of recognition of prior learning in the instance that the relevant paperwork was available. This process broadly supports clients to identify and pursue similar or like careers.

Providers expressed support for the Pilot's focus on finding clients work corresponding with prior employment versus immediate employment, recognising the importance of getting clients into their preferred careers where they have existing skills. Providers suggested that having specialised support through the Pilot is warranted and that there is demonstrable need, with several giving examples of doctors who may be working as taxi drivers, representing a missed opportunity financially and economically for both them and the community more broadly.

It was noted that the Pilot should not seek to replicate other more general employment services, such as *jobactive*. Providers instead noted that the Pilot should complement the existing suite of employment services available to the client cohort.

## 3.1.1 Number of clients in the Pilot

At the outset of the Pilot, the expected number of clients during the pilot period was 1,200, across the six providers. As at December 2018, DEX data shows that the number of clients enrolled in the Pilot was 784, representing 65 per cent of the expected amount.

Service provider	Expected number	Actual (as at Dec 2018)	Per cent achieved
SSI	360	318	88
AMES	360	280	78
atWork	190	58	31
Navitas	96	46	48
MDA	96	60	63
CatholicCare	96	22	23
Total	1,198	784	65

Table 3.1: Client numbers per provider (expected number versus actual as at December 2018)

As shown in Table 3.1, Navitas, CatholicCare and atWork achieved the lowest percentages of their expected number at 48 per cent, 23 per cent and 31 per cent respectively. SSI achieved the highest percentage of their expected number at 88 per cent. SSI also serviced the greatest numbers of clients in absolute terms, with 318 enrolments as at December 2018.

Overall, as identified through the PIR, the number of clients recruited in the first year was significantly less than expected. Lower than expected client numbers were in part due to delays in contracting, and an inability to readily identify potential clients due to most providers not having an existing client base to recruit from.

Unlike other providers for whom recruitment in the first year was relatively subdued, SSI reported that they in fact received approximately 150 applications on the first day of the Pilot (noting that not all the applications satisfied the eligibility criteria). This may be because they already provide settlement services, including the NSW Government's RESP, and as such can readily access a base of potential clients.

Building from these lower than expected numbers in the first year, providers made significant gains in client numbers over the second year of operation. While none achieved their total expected number, in part due to the hangover effect of low recruitment numbers in the first year, there was commendable growth in client numbers across each of the six providers. Chart 3.1 shows the year-on-year growth across all providers from December 2017 to December 2018.

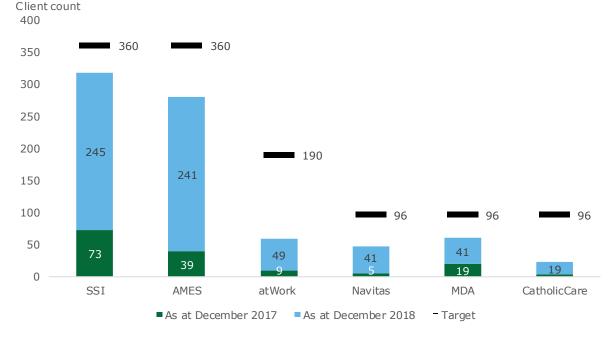


Chart 3.1: Provider client numbers at December 2017 to December 2018

## 3.1.1.1 Factors impacting client numbers

Providers and clients identified factors that contributed to lower than anticipated client numbers. The two key issues identified included changes in the demographics of humanitarian entrants within each region and limitations imposed by Pilot eligibility criteria.

## **3.1.1.1.1** Changes in demographics of humanitarian entrants

Several providers reported anecdotally that, over the course of the Pilot, the demographic profile of humanitarian entrants settling in the local catchment area changed. For example, one provider noted that over a period of six months the mix of clients in the area changed considerably. The provider was initially working to support skilled Syrian and Iraqi humanitarian entrants with their career plans, and then over a rapid period, was more frequently working with African humanitarian entrants with lower levels of formal education and work experience.

Providers also noted that they were not able to anticipate the changing demographics of humanitarian entrants settled in their local area, and prepare for this cohort. They were not able to engage early enough with potential clients, nor did they receive sufficient information about any potential client's previous employment or levels of education in advance. It is noted that DSS engaged the Department of Home Affairs on this matter during the design of Pilot phase, and has reported that data collection has since improved.

## 3.1.1.1.2 Pilot eligibility requirements

Humanitarian entrants were identified as a cohort that would benefit from the Pilot intent. The eligibility criteria were developed in accordance with existing settlement program eligibility criteria. Overall, providers deemed the eligibility criteria to be appropriate. Many noted that the eligibility criteria enabled the Pilot to focus on a specific cohort in order to demonstrate value in investment from the outset.

However, some providers noted that broadening the eligibility criteria may now be warranted. Specifically, CatholicCare stated that the historical context of referrals into Tasmania meant there is only a limited population in the region that meets the specific characteristics required, limiting the potential reach of the program.

A summary of the insights related to the eligibility criteria is outlined in Table 3.2.

Theme	Summary of findings
Five year cut off for eligibility into the pilot	<ul> <li>The majority of service providers reported that the strict five-year cut off period for eligibility was unnecessarily restrictive, but did recognise that skill currency was an important consideration. They felt that the time restriction should instead be a proposed guideline, as opposed to limiting access all together. Reasons for this included: <ul> <li>Comments that skill currency may be more of a concern in certain professions over others (e.g. dexterity in dentistry)</li> <li>Humanitarian entrants settling in new countries need time to settle, access specific support (e.g. related to trauma), learn about Australian culture and often to acquire sufficient English skills. This means that a cut off period may be too restrictive given the individual circumstances of each of the Pilot clients</li> </ul> </li> <li>However, it was recognised that a proposed time period is important and it was not suggested that the period should be infinite. Some humanitarian entrants may be out of their chosen profession for a lengthy period of time by the time they arrive and successfully settle, and thus may work and become ingrained in new professions where they may also thrive.</li> </ul>
Visa subclasses	<ul> <li>Many stakeholders noted that the visa eligibility criteria could be broadened. However, DSS noted that eligibility for the program is broadly consistent with that of other settlement programs offered by Government. Pilot eligibility includes those on refugee and humanitarian visas (200, 201, 202, 203, and 204).</li> <li>The primary additional visa type proposed by providers for inclusion was the Subclass 866 visa (Temporary Protection).</li> </ul>
language proficiency	<ul> <li>Providers would like to see the eligibility criteria expanded, specifically the English requirements, reporting they had success with clients with lower proficiency in English.</li> <li>The Pilot has well defined eligibility in terms of expectations of English proficiency. This is the case because many of the regulated professions which clients are pursuing require at least conversational levels of English (e.g. doctors or dentists need to be able to relay complicated medical information to patients). While some clients may not have sufficient English at the outset of their settlement in Australia, this skill is able to be developed over time. However, this may require more than five years (the cut-off point for eligibility in the Pilot). Providers felt that humanitarian entrants with a lower level of English who have the potential to actively participate in the skilled workforce may not end up doing so without active direction, coaching and monitoring from a career planner.</li> <li>It is recognised that over the course of the Pilot, given providers had the flexibility to determine what constituted speaking English 'well', that the English proficiency requirement was lowered, underscoring this issue.</li> </ul>

Table 3.2: Overview of provider perceptions on eligibility criteria

## 3.1.2 Client reflections on support elements under the program

Clients provided their views on support provided via the Pilot through the survey and through consultation. Client satisfaction scores are also recorded in DEX.

## 3.1.2.1 Valuable source of information

Most clients interviewed found the Pilots to offer a valuable knowledge hub for career information, especially for humanitarian entrants new to Australia who have to navigate a number of obstacles but don't know where, or who to speak to, to get support. Offering a central, streamlined point of knowledge for skilled humanitarian entrants has been beneficial in increasing clients' access to relevant information.

"Going through hurdles is a part of life, but this program has made everything easier" - Pilot client However, one client noted that while one of the workshops organised through the Pilot was helpful in highlighting which companies clients should be targeting for employment opportunities, not all workshops offered were relevant or helpful (e.g. one client who had a background in Information Technology was offered a course in how to use Microsoft Word).

#### 3.1.2.2 **One-on-one tailored support**

Personalised support sessions with a single careers adviser has been commonly cited as a positive component of the Pilot through client interviews. However, it has not always been implemented in practice with one client providing an example of having more than one adviser and also poor targeting of support.

With the exception of one client, all interviewees were complimentary of the tailored support that the Pilot careers advisers offered reflecting positively on the flexibility of the Pilot in meeting individual needs:

"I told the [Pilot] staff that I was struggling to get to my volunteer placement each week, so they helped me get my drivers' license and lent me (a) car to use" - Pilot client

Interviewees also expressed appreciation of the efforts of their assigned careers advisers in helping their clients meet their goals within the scope of the Pilot:

## "[My careers adviser] works very hard to help her clients. Even if she isn't able to get you exactly what you need, she'll do what is in her capacity to help you. She won't let you leave empty handed"

- Pilot client

#### 3.1.2.3 Financial support

Clients have different opinions about whether the level of financial support the Pilot offered was sufficient. This was largely dependent on the type of services they were seeking and the varying expectations they had of the Pilot.

For example, one client noted their career path didn't require substantial financial assistance, as they were pursuing a free course. However, they stated they were surprised and grateful that the Pilot funded the full cost of their partner's diploma. Another client felt the financial assistance they were offered was very limited, and that there didn't appear to be clear guidelines regarding what the Pilot would pay for.

#### 3.2 How well is the Pilot focusing on client needs?

Grant service providers are required to report performance information into the DSS DEX system.

In addition to reporting mandatory data, all Pilot grant providers participate in reporting an extended data set under the DEX Partnership Approach. The extended data set focuses on client outcomes.

There are three types of Standard Client/Community Outcomes Reporting (SCORE) data collected pertaining to a clients: circumstance, goals and satisfaction. As shown in Chart 3.2, the number of clients that have recorded data against these outcome types has rapidly increased in the last reporting period.

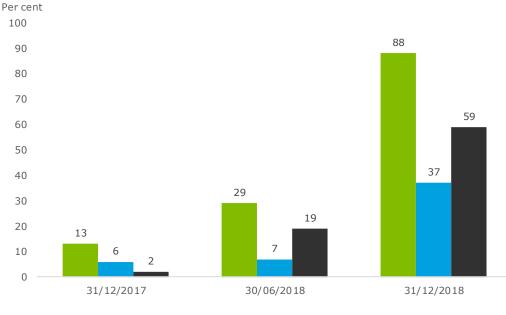


Chart 3.2: DEX SCORE data reporting rates for each reporting period by outcome type

■ Circumstances ■ Goals ■ Satisfaction

Considering the low rates of SCORE reporting in previous reporting periods, data for the December 2018 period was used to estimate the how well the Pilot is focussing on clients' needs.

As shown in Table 3.3, clients are very satisfied with the services they are receiving. On average, all measures of client satisfaction received greater than a 4 out of 5 on average across males and females.

However, given careers advisers ask clients to rate the services they have received, as part of SCORE reporting, it is possible that this mode of data collection may be resulting in response bias, most likely social desirability bias (a tendency of respondents to answer questions in a way that will be viewed favourably by others).

Table 3.3: Average SCORE response for selected client satisfaction reporting on aspects of the provider's service

DEX SCORE item	Persons	Females	Males
I am better able to deal with issues that I sought help with	4.08	4.11	4.06
I am satisfied with the services I have received	4.44	4.52	4.39
The service listened to me and understood my issues	4.57	4.61	4.55

## 4 Process

This chapter considers the aspects of the Pilot's design that led to the successful implementation of services. This includes any factors that may have impacted client referral into the program, as well as ways the Pilot has been innovatively implemented.

## Summary of process findings

- 1. DEX data shows that the number of Pilot clients has increased over time, particularly for males whose numbers have increased at a higher rate. This reflects improvements in processes over time for identifying and on-boarding clients.
- 2. For the year ended December 2018, the majority of clients had been in Australia for less than 12 months prior to joining the Pilot. This shows that the majority were recruited relatively soon into their settlement journey.
- 3. Providers identified elements of the Pilot design that led to successful implementation of services. The flexible nature of the program was considered appropriate, given the client cohort. The ability to maintain contact and personalised support with clients across their re-employment journey was also identified as a positive design element.
- 4. Providers' trialled innovative approaches to services offered. Examples include offering tailored short courses and running career forums with local employers. This suggests that place-based approaches, and nuancing for the local context, is a desirable component of the Pilot's design.
- 5. Insufficient time given to achieve long-term outcomes was identified as a key limitation of the Pilot design. The Pilot could also have benefited through providers having better interlinkages with other services and programs. Other areas identified for improvement related to inefficiencies and duplication of effort. DSS could have played a stronger role in coordinating, guiding and centralising some processes, including providing clearer reporting guidelines and more streamlined tools. A more efficient process to map career pathways would have also led to greater efficiencies, as this task was duplicated across providers and learnings from these were shared in an ad-hoc way across the service provider network.

## 4.1 Has the Pilot design led to successful implementation of the services to clients?

## 4.1.1 Aspects of the Pilot design that worked well

Recognising that client numbers have increased over time, providers identified two key aspects of the Pilot design that facilitated the successful implementation of services. These are expanded on further below, and include: flexible service delivery and continuous, personalised services.

## 4.1.1.1 Flexible service delivery

As noted in the PIR, the Pilot design granted providers considerable flexibility across the following domains:

- Clients' English language requirement, as assessed by providers
- The level and types of the skills or qualifications clients require
- Types of services provided
- Type, and extent, of financial support offered
- Tools and templates used as part of the Pilot

Providers reported they had never experienced delivering a government program with such a high degree of flexibility and that they were initially unsure of how services were to be delivered. However, they expressed overwhelming support for the limited 'red tape' and flexible Pilot design. With no explicit KPIs to meet, providers found they had been able to more intently focus on client needs.

Providers reported using the financial assistance funding for a variety of client needs that would ordinarily be barriers to employment, such as funding for a computer, funding international police checks and paying for driving lessons. This degree of flexibility for the financial assistance funding is likely appropriate, due to each client having unique career paths and support requirements.

## 4.1.1.2 Continuous, personalised services

The ability for designated career advisers to offer long-term, one-on-one personalised services throughout clients' career journeys was flagged as an integral component of the Pilot. Providers

felt that without this feature, clients may feel overwhelmed or lack the confidence to engage in the Pilot's services.

## 4.1.2 Aspects of the Pilot design that could be improved

Providers identified a number of areas of the Pilot design that could be improved. These areas largely related to inefficiencies and duplication of effort, including: insufficient timeframes to achieve long term outcomes, poor communication both between Pilot providers and across broader service providers, and unclear administrative and reporting requirements.

## 4.1.2.1 Insufficient time frames

All providers noted that the Pilot duration was not long enough, as there was a lack of understanding by providers in terms of how long it takes and complex it is to support clients along these specialised career pathways. Given how time-consuming the accreditation process for many careers has proven to be, an even longer timeframe (up to ten years) was proposed.

Some providers felt not only was the Pilot duration too short, they also felt under-resourced. One provider stated that only having one operational staff member meant that the career adviser role was very demanding, as this role was expected to offer a multitude of services, including providing expert advice for a number of different career pathways, as well as taking on a broader advocacy and industry engagement focus.

## 4.1.2.2 Linkages with other government programs

As shown by Chart 4.1, 40 per cent of survey respondents stated that they also used other related services. More than half of whom used *jobactive* or the Adult Migrant English Program.



Chart 4.1: Proportion of the survey respondents who use other relevant services

*Note:* The former Humanitarian Settlement Service (HSS) program was replaced by the HSP in October 2017. The AUSCO program is offered offshore before humanitarian entrants arrive in Australia; the responses however indicate a low overlap with AUSCO before entering Australia.

As clients are engaged with multiple government and non-government services and programs, providers reported that the Pilot could have benefited from greater interlinkage with these other services, such as *jobactive*. It was found that conflicting priorities across different services could result in counterproductive efforts and providers noted ensuring all service providers were aligned towards a shared goal for the client would be beneficial. For example, if the significance of exam preparation over finding short-term, unrelated employment was more widely understood across service providers, the pass rate for accreditation exams may be higher.

## 4.1.2.3 Communication across Pilot providers

Community of Practice meetings have been held to share experiences, resources and best practices, with a goal to improve knowledge amongst practitioners and outcomes for clients. The Community of Practice ensured providers often worked together to solve problems, and share good news stories. This group also shared progress updates, such as level of financial assistance allocation and commencement numbers. However, while providers recognised this effort, several suggested that additional benefits could have be derived from information sharing in a more systematic way.

## 4.1.2.4 Administrative and reporting requirements

Some providers presumed that the DEX system would offer appropriate functionality as a CRM, yet found this was not the case; as such, several needed to create a bespoke CRM (or some variation of a client management tool, such as a rudimentary Excel spreadsheet). As a result, in many instances, data had to be doubled handed in order to satisfy the Pilot's reporting requirements.

While DEX provides data on client demographics (age and backgrounds), additional reporting to DSS (finance reports, AWPs, Service Stocktake reports) needs to be created outside of DEX, resulting in further duplications of effort.

Providers also faced challenges when importing and uploading these reports into DEX periodically, as per acquittal processes. In planning stages of the Pilot it was advised that the data collected by providers would be able to be uploaded to DEX via CSV or Excel. However, this functionality was not readily available and providers reported that the technical requirements to do so were excessive and not intuitive. As such, much of the rich client data providers captured has not been made available to DSS. Service providers stated that only limited information can be added to DEX as the fields for data entry are all prescribed.

It was suggested by providers that DSS could have played a stronger role in coordinating, guiding and centralising data collection and reporting processes, namely a more usable CRM and providing consistent tools and templates.

## 4.2 What factors have impacted uptake and referral into the program?

Qualitative data has been used to determine why providers failed to reach expected recruitment numbers.

## 4.2.1 Qualitative factors effecting uptake and referral

## 4.2.1.1 Eligibility criteria

As previously noted in Chapter 3, Appropriateness, the Pilot's eligibility criteria impacted the number of clients enrolled in the Pilot. Service providers reported that many potential clients who expressed an interest in receiving the Pilot's services have been ineligible to apply for a variety of reasons including visa type, level of English language proficiency and the clients' years in Australia.

## 4.2.1.2 Location of services

The location of the Pilot sites is likely to have contributed to the varying levels of success that providers have had in relation to client recruitment. Compared to metropolitan providers, regional providers (MDA, Toowoomba and Catholic Care, Hobart/Launceston) reported experiencing challenges in both recruiting and retaining clients.

Regional providers also suggested that the catchment area impacted on the number of clients who could access the service in their local area. MDA, for example, noted that they had received calls from Brisbane-based contacts and services, but were limited to servicing Toowoomba only.

Regional providers also cited the need to exit some clients who have chosen to move to metropolitan areas, often for family or study reasons.

## 4.2.1.3 Cautiousness

Some providers stated that clients expressed caution about the benefit of joining another program may have been a barrier for uptake into the Pilot. One provider suggested that the number of services operating in Australia catering to the humanitarian entrant population has led to a level of scepticism within this cohort. It was their view that some clients may have been hesitant to commit to the Pilot, until such time that the benefits of participation were clearer.

## 4.2.2 Number of clients in the Pilot, over time by gender

Chart 4.2 considers whether gender impacted recruitment into the Pilot. As shown, a gender gap of Pilot clients started to emerge across December 2017 to December 2018. Approximately 90 new males joined the Pilot each reporting period, compared to just 60 new female clients. This may not be a finding specific to this evaluation, and is more likely to be a reflection of gender differences that exist across humanitarian entrants with skilled professions more broadly.

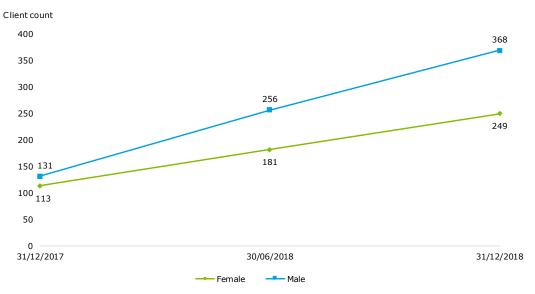


Chart 4.2: Number of clients in the Pilot over time, by gender

## 4.2.3 Average years spent in Australia before joining the Pilot

Chart 4.3 shows the distribution of how many years clients spent in Australia prior to joining the Pilot, by the reporting period when they joined. It should be noted that this is not a mandatory data reporting item, so data is limited. However, the data available shows that providers have increased their reporting rate over time. The percentage of clients with an unknown amount of years in Australia has fallen from 40 per cent in the December 2017 cohort to less than 10 per cent of the December 2018 cohort.

For the December 2018 cohort, the majority of participants joined the Pilot in their first year in Australia. The two previous cohorts show a more even distribution of clients joining the pilot in their first, second or third years in Australia.

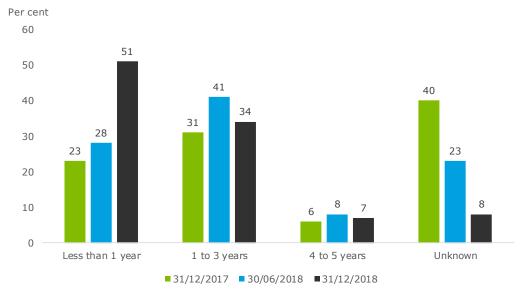


Chart 4.3: Years in Australia spent in Australia prior to entering the Pilot

Chart 4.4 explores this in further detail by looking at the data by provider. It should be noted that between 2017 and 2018, providers increased their DEX reporting completion from 60 per cent to more than 90 per cent.

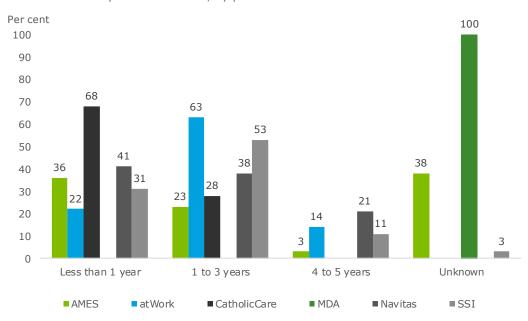


Chart 4.4: Clients' years in Australia, by provider

Some key differences to note include:

- CatholicCare's client base is skewed towards new migrants with nearly 70 per cent of clients joining in their first year in Australia
- AtWork is servicing a cohort with a longer settlement period settled , with over 60 per cent of clients having been in Australia for more than one year when they joined the Pilot
- No reported data exists for MDA

## 4.2.4 Client recruitment into the Pilot

Table 4.1 highlights the importance of word-of-mouth in raising awareness of the Pilot, with almost half of survey respondents reporting that they joined the Pilot following recommendation by family or a friend. Thirty seven per cent of clients stated they were referred by another service provider. However, based on the available data, it is unclear from which providers these referrals have come. Table 4.1: Referral methods into the Pilot (survey responses)

Response	Per cent
I was told about it by a friend or family member	49
I was referred by a different service provider	37
Other	10
No response	3
I read about it online	1

Providers reported experiencing varying levels of success when utilising different referral methods. However, similar to the data reported via the survey, the most common referral pathways cited were word-of-mouth and via other services, including through the HSP service providers and *jobactive*.

## 4.2.4.1 Word-of-mouth

Aligned with the survey responses, most providers reported word-of-mouth to be a common method of recruitment of clients into the Pilot, citing that communication among cultural groups and families had been critical in increasing client numbers.

## 4.2.4.2 HSP providers

Although all providers reported positive interactions with HSP service providers, they experienced differing levels of success in terms of the number of client referrals received. A number of Pilot providers are also HSP providers. While some providers found HSP service providers to be their main referral pathway (including those referring from other services within their own organisation), others viewed HSP service providers' role to be more supplementary, but valuable in their function to inform Pilot providers of potential clients who have 'slipped through the cracks'. One provider stated they had been disappointed with the number of clients they received through their local HSP service provider, highlighting the need for the Pilot program to be well integrated with existing settlement services.

## 4.2.4.3 jobactive

Many providers recognised *jobactive*'s role in the referral process, stating that they collaborated well with *jobactive* providers due to their different service offerings. Some Pilot providers are also *jobactive* providers. Some Pilot clients may not be eligible to use *jobactive* services at times due to their employment status.

Providers recognised that *jobactive* and the Pilot intended to support clients in related, yet distinct ways. Several of the Pilot providers noted the desire to maximise value for public money and that they had taken active steps to ensure that the Pilot was complementary to and building on (as opposed to replicating) the services already being provided to some clients.

Broadly, these observations suggest that having well-formed networks across existing services (namely settlement services) and into refugee communities is likely to positively impact on recruitment.

## 4.3 How have providers innovatively implemented the Pilot?

The Pilot's flexible design, in combination with the differences in client cohorts serviced, has led to different implementation approaches across providers. The following are examples of the ways in which providers have innovatively implemented the Pilot to suit their clients, as reported during consultation:

- <u>Navitas</u> conducted writing and storytelling competitions, which they believe have been very beneficial in enabling clients to build confidence and tell their stories that may not have been heard otherwise. Navitas have also referred four clients to external agencies to support starting small businesses.
- <u>CatholicCare</u> organised a careers forum which included a networking event and workshop/reflection session on the following day to consolidate learnings through the process.

- <u>AMES</u> navigated the difficulties faced in getting clients with trade skills recognised. They negotiated with Victoria University to develop non-paper-based ways in order to allow existing trade skills to be recognised. Victoria University is now developing a physical test to map client skills levels alongside Australian curriculum requirements.
- <u>SSI</u> ran short courses with training providers, designed specifically for their clients. The courses/programs are introductory in nature, allowing clients to understand what professions look like in Australia before continuing with the process. SSI also runs 'The Experience Centre', which delivers paid services to corporate clients on a fee-for-service basis. This offers humanitarian entrant clients the opportunity to gain local experience.

These innovation demonstrate that the program benefits from place-based nuances and that allowing providers a degree of flexibility in design and delivery of the Pilot is likely productive.

## 5 Effectiveness

This chapter considers whether the Pilot has achieved its intended objectives. This includes exploration of unintended consequences, as well as considering barriers, enablers and lessons learned to inform future policy and program decisions.

## Summary of effectiveness findings

- 1. Pilot clients reported feeling valued, supported and included within the Australian community. The sense of commitment to the Pilot client base, and supporting them to be able to live their best lives upon settlement in Australia, was evident throughout all provider consultations. It is likely that clients may have felt this sense of commitment, evidenced by the fact that eighty nine per cent of survey respondents reported a positive overall experience with Pilot services.
- 2. All providers reported more than 75 per cent completion rate of career plans. However, career plan templates, and hence the utility of career plans, vary across providers. The small sample of career plans retrieved from providers do not appear to capture the sufficient level of detail required to determine whether clients are on track to meet long-term career goals.
- 3. No significant difference was found between providers in terms of having more people in employment. There is also no significant difference in the distribution of their unemployed clients or those undertaking further study/training.
- 4. Most clients reported career progress since joining the Pilot. 35 per cent of survey respondents reported undertaking further study and less than 10 per cent reported receiving a job offer since joining the Pilot. However, 20 per cent of survey respondents failed to answer this question, suggesting there are clients who are not experiencing much progress, or chose not to answer for other reasons.
- 5. Many clients are currently on a career pathway however, may not yet be in relevant meaningful employment. 19 per cent of survey respondents indicated that they are in related employment (similar role/similar industry/same job). Between 11-17 per cent of each provider's clients, based on the survey sample, indicated that they were in the same job as their job before migrating to Australia. Given the challenges related to the timeliness to establish the pilot, as well as the length of time required for many clients to gain recognition of prior learning or to retrain, this result is arguably reasonable at this point in time.
- 6. A small proportion (only 13 per cent) have not been employed, or studied while in the Pilot. It is noted that the Pilot has continued to accept new clients, so it may be that some of these clients are relatively new to the program.
- 7. Four out of the five client interviews demonstrated that Pilot clients were generally informed of the variety of services that the Pilot offers. This suggests that the short term outcome, for clients to be aware of Pilot services, was reached.
- 8. DEX SCORE data showed that the number of clients who rated their experience neutrally has decreased over the period of the Pilot. This infers that clients have started to form stronger opinions on whether the Pilot has been valuable in improving their employment circumstances. The final reporting period demonstrated a slightly positive SCORE of 3.1 out of 5.
- 9. Several components of the Pilot's design were valuable in enabling the program to deliver on its intended outcomes to date. These include the employer-client networking opportunities, custom pathways to 'like' employment, financial support offered and the service accessibility and ongoing, personalised support offered through career advisers.
- 10. Several key barriers to the Pilot delivering on its outcomes were identified. These barriers largely relate to challenges inherent in client profiles as well as insufficient buy-in from relevant stakeholders. Specifically, barriers include English language proficiency, clients' lack of local experience, access to existing qualifications, limited employment opportunities at partner organisations (and relevant opportunities more broadly) and competing client priorities.

## 5.1 How effective is the Pilot in achieving its intended outcomes?

In determining the effectiveness of the Pilot to date, this interim evaluation has considered the extent to which the program has delivered on short and medium-term outcomes, as outlined in the Program Logic.

In summary, the types of short and medium-term outcomes the Pilot sought to deliver centred on:

- 1. Clients:
  - a. Awareness of the service and networks
  - b. Utilisation of services and ease of usage
  - c. Types of services used
  - d. Previous skills and qualifications recognition
  - e. Have defined career pathways
  - f. Satisfaction of progress against defined plans
  - g. Access to the necessary financial supports
- 2. Providers:
  - a. Are well equipped to meet participant needs

These categories of short- and medium-term outcomes are explored further below.

## 5.1.1 Awareness of services and networks

As shown in Chart 5.1, the number of sessions providers deliver has increased over time. This indicates that utilisation has increased over time. Analysis provided in Chapter 3 (at Chart 3.1) clearly demonstrates that there has been a substantial increase in the number of new clients accessing the service between 2017 and 2018, indicating that awareness of the Pilot has increased.

Notably, there has been a marked increase in sessions delivered in the last reporting period. This is largely due to the considerable increase in SSI sessions. In the December 2018 reporting period, SSI delivered over four times as many sessions compared to the period before. However, in this same period AMES and MDA reported a slower rate of growth.

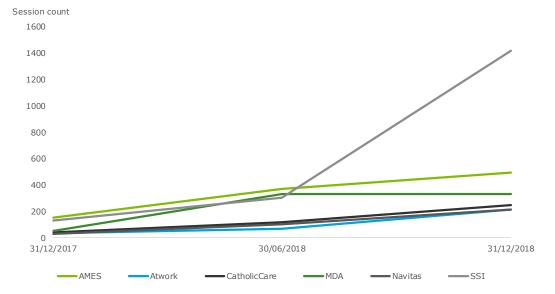


Chart 5.1: Careers adviser sessions delivered in each reporting period, by provider

## 5.1.2 Service utilisation and ease of usage

Quantitative data analysis highlighted considerable differences across providers both in terms of the number of clients serviced, and the intensity at which they are providing services.

Table 5.1 shows there is a tendency for smaller providers to run sessions at a higher intensity (i.e. more sessions per client), compared to those with a larger client base. This variation is unlikely to be entirely due to local context. It may also suggest inconsistency in the type and intensity of service that clients may be receiving.

Table 5.1: Average session intensity per provider

Provider	Clients	Sessions	Average sessions per client		
AMES	280	1,013	3.62		
atWork	58	313	5.40		
CatholicCare	22	405	18.41		
MDA	60	707	11.78		
Navitas	46	342	7.44		
SSI	318	1,840	5.79		
Total	784	4,620	5.89		

Client consultations demonstrated that clients were generally well informed of the variety of services that the Pilot offers, explicitly citing the following services as having been made available to them:

- Resume help
- Mock interviews
- Assistance in sourcing and applying for appropriate training courses
- Assistance in sourcing workplace volunteer or work experience
- Contacting and negotiating with tertiary education providers on their behalf
- Helping clients get their qualifications recognised
- Paying for training/courses

It is noted that one client reported they were poorly informed of the scope of services that the Pilot offered, even after visiting the centre for two career planning sessions. This client further noted that the first time they found out what services the Pilot offered was following an email announcing the Pilot's scheduled completion date.

## 5.1.3 Types of services used

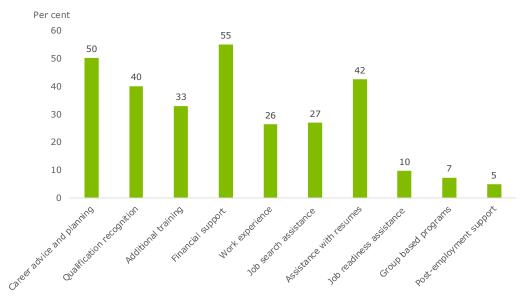
Chart 5.2 demonstrates the range of services used, as reported by survey respondents. 'Financial support' services proved to be the most frequently accessed service, with more than half of respondents noting they had received financial assistance from the Pilot. This was closely followed by 'Career advice and planning' (50 per cent). These top two most commonly accessed services reflect the specialised support that the Pilot was designed to deliver. 'Assistance with resumes' (42 per cent) was the third most used service.

However, as resume assistance is also offered to some clients through other government programs (such as *jobactive*), to avoid duplication of services, future iterations of the Pilot should consider focusing on specialised supports and leaving generic employment readiness skills as the responsibility of existing services.

Based on the survey data, the following services have proven to be least popular:

- Job readiness assistance (including the provision of information on workplace technology, workplace culture, Workplace Health and Safety, and rights and responsibilities)
- Group based programs
- Post-employment support.

Chart 5.2: Pilot services used by survey respondents



There does not appear to be significant variation, across providers, in the types of services accessed, as shown by Chart 5.3. However, respondents who were atWork clients reported higher levels of work experience through the program. This is unsurprising, given that atWork is primarily an employment service, and likely has pre-existing relationships with potential employers.

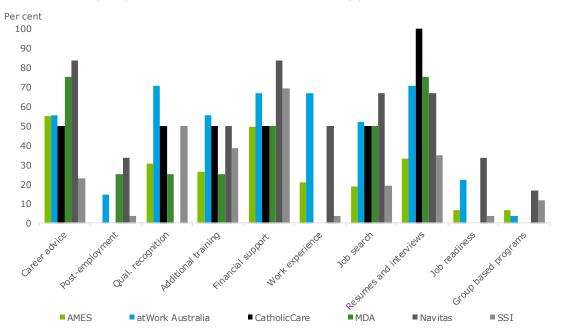


Chart 5.3: Survey respondents' utilisation of Pilot services, by provider

Through the DEX system, career advisers are able to report the primary activity undertaken within each of their client sessions. These activity categories include:

- Advocacy/Support
- Education and skills training
- Employer engagement
- Facilitation of employment pathways
- Information/advice/referral
- Intake/assessment
- Material aid

The distribution of sessions according to these categories are shown in Chart 5.4. This data demonstrates that providers have either adopted varying approaches to reporting sessions or undertaken differing activities in their sessions. Specifically, SSI predominantly categorises its sessions as undertaking 'Information' activities. This may be due to the broad, encompassing nature of the category. More specific categorisation could be valuable in producing more useful program data.

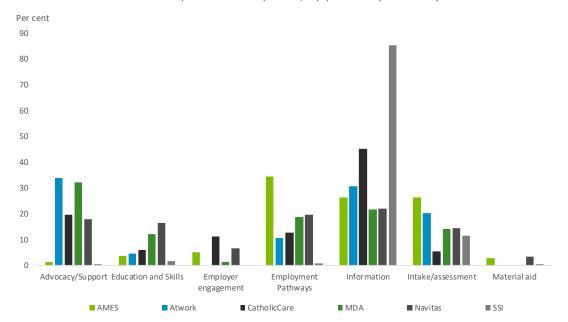
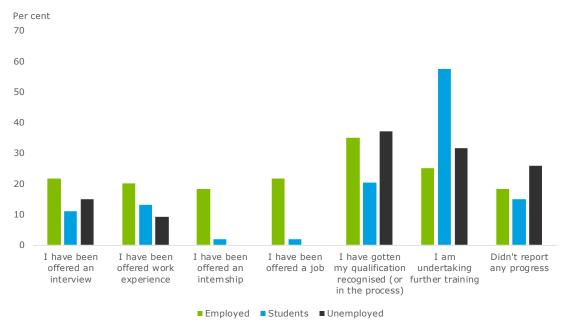


Chart 5.4: Sessions of service provided as reported, by provider (DEX data)

## 5.1.4 Previous skills and qualifications recognition

Linking the activities against the progress that survey respondents have achieved allows for a better understanding of the relative effectiveness of each of the activities. As shown by Chart 5.5, most students (78 per cent) reported that they are either undertaking further training/a bridging course or are in the process of getting their qualification recognised.

Chart 5.5: Proportion of activities/progress of survey respondents, by employment status



All those who reported being offered a job/internship were employed at the time of completing the survey. This indicates that when these opportunities have arisen, they are suitable and have led to ongoing employment. This is further supported by the fact that a similar number of respondents have been offered an interview and have also been offered a job.

Currently employed respondents are also more likely to have been offered work experience. From this, it could be extrapolated that providers should focus on connecting their clients with internships as an effective pathway into employment. This has been corroborated by interview data, through which clients have echoed the importance of local work experience as a pathway to gaining successful employment.

It should be noted that the response 'I have gotten my qualification recognised (or in the process)' is potentially misleading due to the two situations that it represents. These are having a qualification recognised or still progressing the process. Those that are unemployed may have completed their qualification recognition process, while those who are unemployed may still be in progress. Intuitively, qualification recognition should be causal, leading to employment. The similar number of employed and unemployed people in this category suggests a similar amount of clients have completed and are still progressing recognition of their qualification.

## 5.1.5 Defined career pathways

According to each providers' latest Activity Work Plan reports (received in December 2018 or early 2019), the proportion of clients with a completed career plan is shown below in Table 5.2. All providers reported their level of completed career plans to be over 75 per cent.

Table 5.2: Percentage of clients with completed career plans, by provider

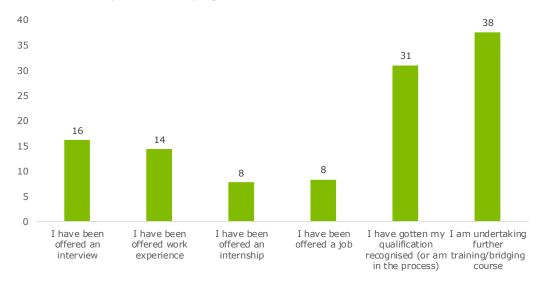
	AMES	atWork	CatholicCare	MDA	Navitas	SSI
Percentage of clients with completed career plans	75	100	88	86	93	100

Career plan templates and the use of career plans vary across providers; reducing the potential to compare across providers accurately. A small number (2) of career plans were reviewed as part of this evaluation. The sample of career plans provided by providers do not appear to capture the sufficient level of detail required to determine whether clients are on track to meeting long-term career goals. As such, career plans appear to be a limited source of data when assessing the Pilot's effectiveness.

Chart 5.6 shows the self-reported progress that clients have achieved since joining the Pilot. It should be noted that data from survey respondents who reported no progress have been excluded from this dataset.

As shown, engaging in further training or bridging courses is the most common activity undertaken, having been selected 38 per cent of survey respondents. Less than 10 per cent of survey respondents have received a job offer. This finding is aligned with providers' reflections that more time is required to reach the long-term program outcomes of re-employment in same or similar roles.

### Chart 5.6: Self-reported career progress



It should be noted that for the data presented above survey respondents were given the opportunity to select multiple activities. As such, the following chart (Chart 5.7) shows distribution of this progress to determine whether progress across multiple dimensions has been concentrated in a small number of respondents, or more broadly.

Chart 5.7 shows that less than a quarter of respondents are commencing, or have commenced, more than one activity. Of the remaining 76 per cent of survey respondents, undertaking further training is the most common activity and is most commonly the only activity that a participant will be engaged in.

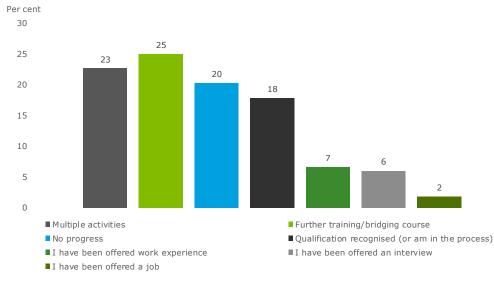


Chart 5.7: Progress reported on a per person basis

## 5.1.6 Client satisfaction

Survey results showed that respondents were satisfied with the services they had received under the Pilot. Eighty nine per cent of respondents reported a positive overall experience with Pilot services, 57 per cent of whom were 'Very Satisfied' (Table 5.3). However, it should be noted that a proportion (6 per cent) were 'Very Dissatisfied'.

Table 5.3: Survey respondents' overall satisfaction with Pilot services (per cent)

	Very dissatisfied	Dissatisfied	Neutral	Satisfied	Very satisfied	No response
Overall satisfaction (per cent)	6	0	2	32	57	2

Additionally, survey respondents reported being satisfied with the various support services offered under the Pilot, with the majority of respondents reporting they were 'Very Satisfied' with individual support elements offered (Table 5.4).

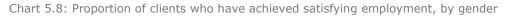
Table 5.4: Survey respondents' satisfaction with the support elements of the Pilot (per cent)

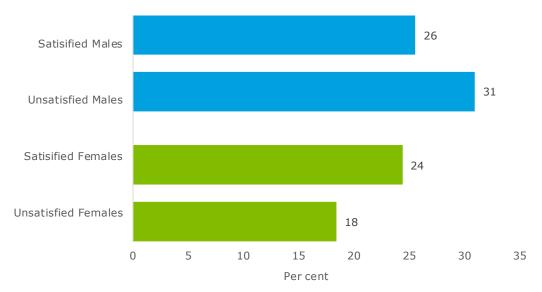
	Very dissatisfied	Dissatisfied	Neutral	Satisfie	ed Very satisfie		lo response
Information and communication received	٤	3	- (	6	30	54	2
Accessibility of the services	-	7	1 4	4	35	51	2
Range of services offered	-	7	- :	2	35	55	1

#### "I found my dream job"

- Pilot client

Chart 5.8 shows survey respondents' success in gaining satisfying employment, distributed by gender. As previously cited, the sample is skewed towards males. While female clients are slightly more likely to report that they are satisfied with their employment, there is no significant difference between the different groups.





When the above survey data is layered with employment categories ('same job, same industry'; 'similar job, same industry', etc.), the following observations were made:

- Approximately 90 per cent of respondents in the 'the same job in the same industry' category reported finding satisfying employment.
- For the rest of the 'like' employment categories, approximately half of survey respondents reported having achieved satisfying employment.

It is too early to tell if the respondents reporting employment in different roles should be viewed as negative outcomes. Clients could be using this employment as work experience opportunities, and hence, a stepping stone to re-employment in similar or same roles. However, it should be noted that the Pilot's design was informed by the Canadian Alternative Careers program, which strongly advises against placing skilled humanitarian entrants in 'survival' jobs at the expense of spending time finding employment that will contribute to the achievement of their career pathway.

#### 5.1.7 Necessary financial support

Insights around the financial assistance provided to Pilot clients has been derived from each providers' latest AWP report. As shown in Table 5.5 some progress reports for the December 2018 reporting period were not available therefore earlier reports were used. There was considerable variation in the average funding amounts providers expended on financial assistance, as reported in AWPs.

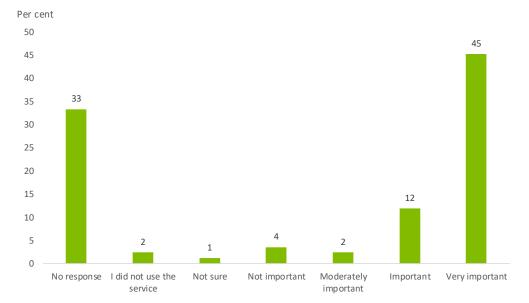
Number of clients receiving financial assistance	Per cent	Average dollars per client (\$)	Reporting period
157	50	2,481	December-18
42	80	290	December-18
6	75	334	June-18
Not available	Not available	500 (for study) 8000 (for regulated professions e.g. medical)	June-18
13	30	611	December-18
60	60	1,417	June-18
	receiving financial assistance 157 42 6 Not available 13	receiving financial assistance 50 42 80 6 75 Not available Not available 13 30	receiving financial assistanceClient (\$)157502,4814280290675334Not available Not

Table 5.5: Financial assistance information for each provider

Providers were inconsistent in their AWP reporting approaches. Notably, MDA did not report the number of clients provided with financial assistance. However, through qualitative commentary, the MDA AWP highlighted that different professional cohorts required differing levels of funding support, a notion corroborated throughout all provider interviews.

Due to the flexible financial support component of the Pilot, providers reported it was initially unclear how financial assistance should be used. Rather than prescribing stricter guidelines regarding the 'nature of requests' that financial assistance should be provided for, the Department strongly encouraged providers to develop their own financial support tools to guide decisionmaking. While these financial assistance tools were referenced in providers' quarterly reports, they were not discussed during consultations with providers.

As shown in Chart 5.9, approximately 85 per cent of respondents indicated financial support was 'Important' or 'Very important' in successfully gaining employment, after excluding respondents who selected 'No response'.



#### Chart 5.9: Survey response to 'Was financial aid important to you gaining employment?'

#### 5.1.8 Providers equipped to meet participant needs

Three categories of provider resourcing where identified during consultation; including infrastructure (including information technology), workforce capability and access to information.

In relation to infrastructure, providers were given access to DEX as a partial client record management system. This did not necessarily serve the purpose presumed by some providers and as such, several providers reported having to create client databases outside of DEX. There were no other reported infrastructure shortages.

In terms of workforce and capability, there was a range of reported client-to-career planner ratios, with some providers reporting that 1 worker-to-40 clients represented maximum capacity for them, yet others reported higher caseloads (close to 1:100). These figures would be influenced by the intensity of service being provider, and the general level of demand being experienced by the service. All providers reported their staff to be suitably qualified and experienced to perform the requisite functions of their roles. Given the complex nature of the client group, it is likely desirable that a workforce readily able to work with humanitarian entrants, who understand settlement issues, are most suitable to work with this group of clients.

Arguably, in the first year of the Pilot providers were not sufficiently equipped to meet participant needs. Pathway processes (e.g. knowing about regulated professions and how to map like professions) were more complex than envisaged and for some provider staff, navigating the higher education system represented a relatively new skill that required time to develop. Other necessary elements (e.g. career planning templates) were still largely under development and were being refined as the Pilot was running. Over time, providers became better equipped to work with clients, as evidenced by the large increase in client numbers across the second year.

#### 5.2 Has the Pilot delivered any unintended outcomes?

Although it was not explicitly captured as an intended outcome in the program logic, a recurring theme throughout all stakeholder interviews was the extent to which the Pilot has led to outcomes relating to social belonging.

This Pilot has supported clients to feel valued, supported and included within the Australian community, as reported by clients, providers and employers/industry alike. The level of support some providers are providing, over and above standard services, is worthy of recognition. The sense of commitment to the Pilot humanitarian entrant client base, supporting them to be able to live their best lives upon settlement in Australia was evident throughout all provider consultations.

Compared to the point at which clients joined the Pilot, provider staff members personally observed improvements in clients' interpersonal interactions, including visible changes in demeanour and confidence and sense of self-actualisation. Providers perceived that this was due

to the client's participation in the Pilot, although it is noted that this could also be attributable to other improvements in the client's circumstances. Providers reported that such notions of self-actualisation and settling are likely to flow onto the broader community.

"I don't know the rules and places in Australia, I felt like a bird without a wing" - Pilot client

Further, employers have found that engaging with the Pilot has been mutually beneficial in terms of social outcomes for both clients and employers. For clients, employment and work experience opportunities gives clients a cultural interaction and normalises new workplace experiences. It was also reported that the program has facilitated some great friendships between clients. For employers, they reported that it improves their company brand. An employer commented they receive a lot of feedback from staff saying they're proud to work at a workplace that supports initiatives like this.

"It was like they came home to their profession"

- Pilot client employer

## 5.3 What aspects of the Pilot worked, for whom, when, where and in what circumstance?

As reported earlier, no gender difference was determined through the analysis in terms of participation rates. Demographic data via the survey and DEX was limited due to privacy and reporting requirements. As such, variation by provider has been considered in order to determine what aspects of the pilot worked best, and for which clients (based on their length of time in Australia).

Chart 5.10 shows clients' current employment status by provider, as reported by survey respondents. It should be noted that although CatholicCare and Navitas appear to have comparatively strong employment outcomes, these providers had very low response rates.

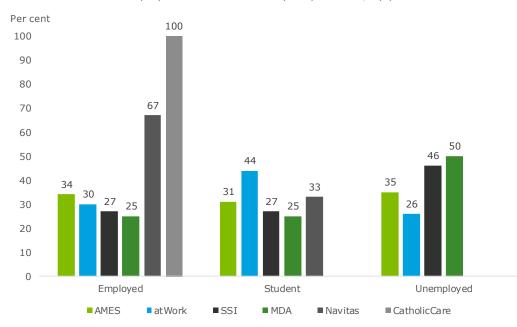


Chart 5.10: Current employment status of survey respondents, by provider

Excluding CatholicCare and Navitas, clients' current employment status appear to be relatively similar across providers.

Chart 5.11 shows the overall percentage of clients in employment distributed according to year of arrival in Australia, by provider. For the remainder of this section, only providers whose response size was large enough to allow comparison have been included (AMES, atWork, SSI). Across all three providers, employment is shown to be proportional to time. This finding reinforces the need for future calculations of employment success that controls for time.

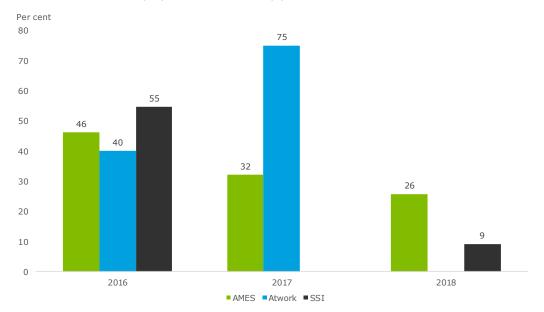


Chart 5.11: Current employment over time, by provider

There were insufficient cell sizes to conduct a nuanced statistical testing test that considers employment data, provider and time spent in Australia. However, statistical testing on an aggregate level for year-to-date employment outcomes has been conducted.

Table 5.6 describes the distribution of survey respondents' current employment status, by provider. Despite differences in response rates overall, there does not appear to be any significant differences in the proportions of different employment outcomes achieved.

	AMES	atWork	SSI
Employed	31	8	7
Student	28	12	7
Unemployed	32	7	12

Table 5.6: Current employment status of clients, by provider (total count of clients)

Client survey data demonstrates that a correlational relationship exists between years spent in Australia and gaining employment. Chart 5.12 shows the proportion of employment for each cohort by the year they arrived in Australia.

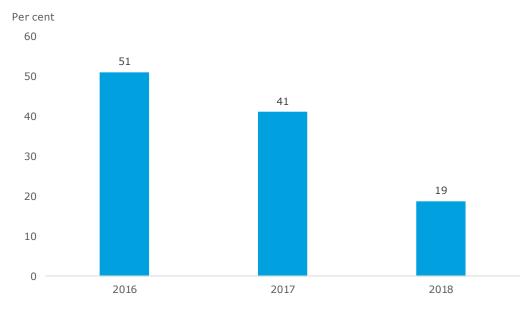


Chart 5.12: Percentage of clients currently employed, by year arrived in Australia

There is a clear downward trend between these two variables, indicating that the less time a client has been in Australia, the less likely they are to be employed. Clients have approximately a 50 per cent chance of being employed after three years in Australia, compared to less than 20 per cent chance after a maximum of one year in Australia.

#### 5.4 Is the Pilot on track to deliver its intended outcomes?

In terms of the Pilot's overall goal of re-employment in the same or similar roles, at this point in time, there has been limited success, if applying a binary definition. No providers reported having any clients who, at this point in time, had completed their career pathway plan in its entirety, end to end.

Providers and DSS attributed this to the insufficient time given to produce long-term outcomes. Providers and DSS reported being overly ambitious about the outcomes the Pilot could deliver in the short term. This correlated to an increase in understanding the complexities and time consuming nature of supporting clients to attain the same or similar employment in regulated professions and careers upon settlement in Australia.

While few clients have achieved their goal of reemployment in same or similar roles, many have achieved relevant employment sub-goals, such as training milestones. It is further noted that while progress was slow in the beginning, it has continued to improve with the active promotion of the Pilot. As revalidated via quantitative data analysis, many clients have shown progress towards intended outcomes. These findings corroborate early success signs that have surfaced through anecdotal good new stories provided during provider and client consultations.

Industry and employer interviews reflected similar observations. An industry representative from Dental Services Victoria, for example, stated they haven't seen outcomes for Pilot clients yet, but they are confident that one particular individual is likely to pass the upcoming dentistry example.

Another small employer reported success, having provided work experience opportunities to two Pilot clients. One has since been offered a paid position (part-time while they complete their studies). They are also hoping to offer the other client a permanent position upon completion of the work experience.

The DEX system enables providers to create and access simple client records. It is also able to capture client outcome ratings (which are captured by the service provider, based on their assessment or via the client provided self-reported rating). This includes capturing data related to client changes in circumstance. It should be noted that Circumstance SCORE reporting is not mandatory for all clients. As such, care should be taken, especially when interpreting the results from the earlier reporting periods where significantly fewer clients had been assessed for SCORE (Table 5.7).

Table 5.7: Count and percentage of clients who have recorded SCORE data for the circumstance outcome type

Reporting period end date	Number of clients with circumstance SCORE data	Unique clients (count)	Percentage
31-Dec-2017	31	244	13
30-Jun-2018	127	437	29
31-Dec-2018	545	617	88

The SCORE Circumstance data outcome type is further split into outcome domains. The two relevant domains used for analysis of client employment outcomes are: 'Employment' and 'Employment, education and training'. These are defined by the DEX Protocol as:

- Employment is selected as the reason for seeking to change the impact of a client's lack of employment on their independence, participation and wellbeing.
- Education and skills training is selected as the reason for seeking assistance where the client is seeking to engage with education and skills training on their independence, participation and wellbeing.

'Employment, education and training', is assumed to jointly cover these items. As shown in Chart 5.13, the number of clients who rated their experience neutrally (3 out of 5) has decreased. This suggests that clients have started to form more positive opinions on whether the Pilot has been valuable in improving their employment circumstances. Overall, the distribution of the final reporting period is very weakly positive, with an average SCORE rating of 3.1 out of 5.

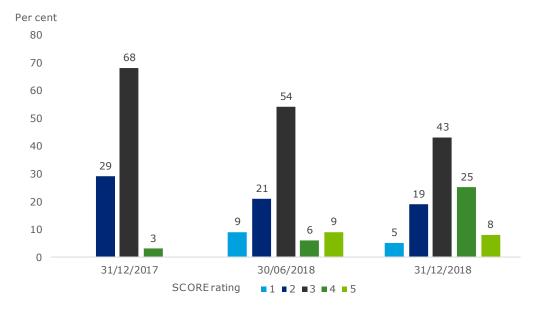


Chart 5.13: Distribution of SCORE Circumstance ratings for the employment domains

To better explore the effect of the Pilot, it should be considered how clients' journeys change through the program. This is shown through Table 5.8 which compares clients' employment status prior to joining the Pilot against their current employment status. Additionally, the survey asked clients if they had achieved satisfying employment through the Pilot, adding an additional dimension of potential employment over time.

This gives rise to a number of potential pathways or transitions that a client may have experienced, the outcomes of which are summarised in Table 5.8.

Table 5.8: Client transitions: comparison of current employment status to prior to joining the Pilot

Client transitions/journeys	Responses (per cent)*
Currently unemployed or studying, but have been employed during the Pilot	27
Gained employment, and still currently employed	24
Employed before and currently	15
Have not been employed since joining the Pilot	13
Continuing student	11
Have transitioned from unemployment into study	4
Have completed study and are currently unemployed	2

\*4 per cent of survey respondents did not complete this question, so have been excluded from the analysis.

Table 5.8 shows a number of positive outcomes for Pilot clients, including:

- Twenty four per cent of respondents have gained employment since joining the Pilot
- Twenty seven per cent of respondents are currently unemployed or studying but have achieved employment at some point in their journey, potentially indicating employment is often temporary or transitional for this cohort
- Four per cent of respondents have moved from unemployment into study.

Table 5.8 further reflects some neutral transitions, which without additional information are challenging to interpret, including:

- Fifteen per cent of respondents were employed before the Pilot, and are still employed now. This could include clients who sustained employment in the same role or moved into a new role. It is not clear if their employability has improved.
- Eleven per cent of respondents were continuing students, who were studying prior to joining the Pilot and have not been employed in the duration. These respondents may not be open to employment opportunities due to study commitments, or may not have found appropriate employment.
- Two per cent of respondents, have completed studies and are currently unemployed.

Table 5.8 also reflects some negative pathways, including:

• Thirteen per cent of respondents who were unemployed prior to joining the Pilot, are still unemployed, and have not experienced satisfying employment during the Pilot. The survey data points could potentially hide an intervening stretch of study. Regardless, this cohort has not experienced any positive employment outcomes.

Overall, the survey data demonstrates that, to some degree, the Pilot has assisted clients in gaining some form of employment. Over half of the survey sample reported experiencing employment at some point during their Pilot journey.

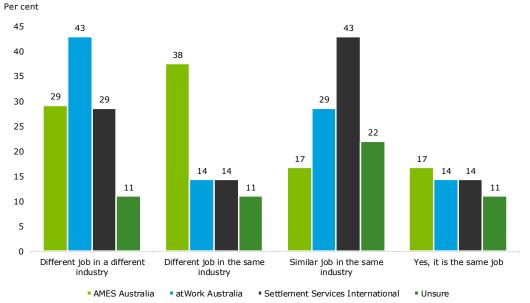


Chart 5.14: Proportion of employed clients by the degree of 'like' employment, by provider

Chart 5.14 considers the percentage of clients who have obtained same, similar or different roles, compared to their original employment before migration, by provider. Someone may have the 'same job' for example a doctor in their home country pre-migration and are now a qualified doctor in Australia. A similar job could refer to someone who previously worked as a dentist and is now working as a dental assistant.

This data suggests that:

- All providers reflected similar outcomes for the 'same job' category, ranging from 11 per cent to 17 per cent
- SSI has the highest percentage of its clients achieving 'Similar job in the same industry' at 43 per cent
- AMES clients' employment outcomes are predominantly 'Different job in the same industry' (38 per cent) and 'Different job in a different industry' (29 per cent).
- atWork has the highest rate of 'Different job in a different industry' (43 per cent); the next highest in this category is 29 per cent.

This data indicates that SSI has been the most effective at achieving 'like' employment for its clients. However, the small sample size should be noted when making any broader generalisations based on this dataset alone.

#### 5.5 What are the barriers and enablers?

#### 5.5.1 Barriers

Table 5.8 demonstrates that some considerable progress has been made towards meeting program outcomes. However, several barriers inhibiting the Pilot from achieving all of its intended outcomes have been identified. A key issue identified throughout this interim evaluation was the time and complexities associated with the skills and qualifications recognition process. A number of 'sub-barriers' have contributed to this including lower levels of English and gaining access to official qualifications from overseas, as noted in further detail below.

Additionally, clients' lack of local experience, and limited employment opportunities at partner organisations (and relevant opportunities more broadly) also acted as barriers to clients achieving career progress.

#### 5.5.1.1 English language proficiency

During consultation, one employer cited that while in the main Pilot clients had high levels of English, there were times where low levels of English had been problematic. Poor English can inhibit Pilot clients from being equipped for their exams, or from being work-ready in their chosen profession.

This concern was also reflected in client interviews, with clients reiterating the importance of strong English skills in obtaining employment. In particular, it was made mention that some professions have high standards of English set with specified English requirements set by regulatory bodies such as the Australian Health Practitioner Regulation Agency (AHPRA) for medical professions.

Almost half of survey respondents reported that they had taken a recognised English test or course in Australia (Table 5.9). The relatively high proportion of survey participants that reported completing any test indicates that English ability is a barrier to gaining employment. This is demonstrated by the fact close to half needed to access further English language capability training.

English Test/Course	Count	Per cent
International English Language Testing System	15	9
Occupational English test	25	15
Pearson English Test	6	4
TAFE Certificate	23	14
Other	14	8
Total	83	49

Table 5.9: English tests and courses undertaken, by survey participants

#### 5.5.1.2 Clients' lack of local experience

"[...] I started my life in Australia from zero"

- Pilot client

A key barrier to obtaining relevant employment outcomes cited through client interviews was the lack of Australian work experience. This was also discussed in the Counterfactual study, suggesting a lack of local experience is also a barrier for humanitarian entrants outside the Pilot:

"Participants conveyed they would like to do short term work placements initially, to break into the labour market, learn about the Australian employment context, and gain Australia work experience and referees. Participants proposed volunteer work could help them to gain Australian work experience, build local networks, and practicing conversational English language skills" [Counterfactual study]

There has been varying opinions on whether the Pilot has been able to sufficiently address this issue. The following is a good news story from atWork:

"After registering with the Pilot, <name removed> was offered a work experience placement with a large engineering firm, his first opportunity to apply his skills and knowledge in Australia. He was offered a full-time, casual position as a civil engineer. He says he is really enjoying the work and feels like he's living his dream in Australia"

In contrast, one client interviewed stated that even though he understood that providers offer work experience opportunities, these placements often only run for one to two months, which was insufficient time to gain a solid understanding of the Australian workplace.

One of the clients interviewed stated they were interested in gaining employment at a government agency, but considered this to be an unrealistic goal as they were competing against applicants with Australian academic and work experience. This client suggested that establishing employment quotas for humanitarian entrants at government agencies may help navigate this challenge.

Additionally, some interviewees felt that there may also be a degree of unconscious bias in the employment process, hampering humanitarian entrant applicants. As such, even if it were possible to navigate the system and get qualifications, inherent discriminations through the hiring process may also work against this client cohort.

#### 5.5.1.3 Access to existing qualifications

Although clients may have appropriate qualifications, they are not always immediately accessible. Clients and providers both stated that retrieving hard copy documents from overseas can be a challenging and time consuming.

#### 5.5.1.4 Insufficient buy-in from employers

Providers reported experiencing difficulties in gaining sufficient buy-in from employers. Providers offered a number of possible explanations for this, including limited relevant positions available at smaller companies, and potential inherent biases in recruiting individuals in this cohort. Advocacy and liaison was also flagged as a key challenge from the Counterfactual study, noting 'some participants felt that the difficulties related primarily to getting past the initial recruitment phases and being shortlisted for an interview, due to employers perceiving humanitarian entrants/migrants as "more risky" '.

**5.5.1.5 Limited employment opportunities within existing partner organisations** All employers and industry representatives interviewed stated that a key barrier to offering Pilot's employment or opportunities is job market capacity. For example, one small organisation interviewed shared that as a small organisation, vacant positions suitable for Pilot clients do not arise very often. Similarly, an industry interviewee stated that while they cannot exceed prescribed class sizes by placing additional Pilot clients into their courses, they believe it is their social responsibility to fill any existing available spots with Pilot clients.

This interviewee also stated that developing bespoke training programs for Pilot clients would be valuable. However, they then noted that while they have the facilities to run these additional trainings, they simply do not have the funding available to develop and implement them. It was noted that if there was specific funding for these individuals, industry bodies would be better positioned to meet this demand.

#### 5.5.1.6 Competing priorities (study versus work opportunities)

Clients cited the challenges inherent in balancing short-term work opportunities with requalification goals. For instance, one of the clients interviewed is currently preparing for exams to get re-qualified. However, he is managing competing priorities of work and study, with providing for his family working in a full-time role as a pharmacy technician. The client believed this requalification process should have taken just six months, but as a result of the demands of shortterm employment, it has instead taken three years to reach this stage.

#### 5.5.2 Enablers

Several components of the Pilot's design have been valuable in enabling the program to deliver on its intended outcomes to date. These include: employer-client networking opportunities, custom pathways to "like' employment, financial support offered and the service accessibility and ongoing, personalised support offered through career advisers.

#### 5.5.2.1 Client-employer networking opportunities

Employer and industry interviews discussed the value in professional networking opportunities that bring providers, clients and employers together. For example, Dental Services Victoria held a conference, and invited AMES clients to participate. The aim of this session was to highlight the regulatory environment, key points to note, and to outline support networks available.

These types of events were cited to be beneficial in preventing individuals from getting into a potentially less than ideal job due to misinformation or lack of information. Another employer interview corroborated this, stating that a positive relationship between providers and employers have been critical in progressing program goals.

#### 5.5.2.2 Offering pathways to 'like' job opportunities

Industry organisations have offered courses into same field/different job (such as dental assistance courses). This course of action is likely beneficial for clients who aren't yet ready to work in an identical role and/or are not ready for the exams but would like to work in their ideal profession. Additionally, Dental Services Victoria shares clinical materials with Pilot clients to keep them involved in the profession even though they may not be immediately ready to practice, due to their English level or level of readiness to work.

#### 5.5.2.3 Financial support

As previously noted (see 5.1.7), clients viewed financial support to be of vital importance in securing relevant employment opportunities. Four of the five clients interviewed reflected very positively on the level of financial support the Pilot offered in assisting with their career pathways.

## 5.5.2.4 Service accessibility and ongoing, supportive relationships with career advisers

A key theme presented through client interviews was the ease of access to the Pilot services. Most of the clients reported they found the process of booking an appointment with a careers adviser to be simple, an observation that was further reflected through survey responses.

Clients and providers both commented on the importance of the face-to-face, individualised support that is offered through career adviser sessions. One client interview stated the social benefits in having a dedicated adviser to offer continual support and to follow up on career goal progress. Further, providers reported offering mock interviews which both clients and employers have found to be valuable in improving client confidence and understanding of the Australian recruitment process.

## 5.6 What lessons can inform the Effectiveness of future policy and program delivery for the Pilot cohort?

Table 5.10 (below) draws together the lessons learned through this interim evaluation that could inform the effectiveness of future policy and program delivery for the Pilot cohort. This draws on the analysis conducted across the course of the evaluation.

Lesson title	Description
Evidence-based approach	There is evidence that this highly customised, individualised program has been (or likely will be) effective to some degree in supporting some individuals meet short- and medium-term employment goals.
Client-centric view	Given the diverse backgrounds of this cohort, this program allow a degree of flexibility in order to cater to client needs and priorities and this has proven to be a valuable approach.
Early engagement with cohort	Engaging this cohort early in their settlement journey has been flagged as beneficial, so individuals are approached when they are job-ready, and existing skills can be put to use as soon as possible. This also assists in recruitment of clients into the program.
Allow sufficient time to reach outcomes	Sufficient time must be allocated to enable programs such as this to meet medium and longer-term deliverables. Working with a complex client group, such as newly arrived humanitarian entrants, requires a program to be dynamic and open in its approach to time frames and expectation setting.

Table 5.10: Interim evaluation, lessons learnt

#### 5.7 Summary: evaluation against Pilot's intended outcomes

The following intended short and medium-term outcomes are those listed in the program logic. The Pilot's achievement of intended outcomes have been assessed and rated against the following scale:

Not achieved	Partially achieved	Achieved	Insufficient evidence
Evidence suggests that no progress has been made relative to the intended outcome	Evidence suggests that some progress has been made against the outcome, yet opportunity for improvement exists	Evidence suggests that, in the main, this outcome has been wholly realised	There is insufficient evidence to make an assessment of progress against this outcome

The 'Evidence' column references findings throughout the preceding chapter.

Table 5.11: Interim evaluation	findings, short-term outcomes
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Short-term outcome	Evaluation	Summary	Example evidence
Participants are aware of services and networks and utilise them as needed	Achieved	Clients were generally well informed of the scope of Pilot's services, and reported services were accessible and easy to use.	5.1.2
Participants have a defined career pathway, have identified steps to achieve this and are commencing activities identified	Partially achieved	More than 75 per cent of clients, across all providers, had completed career plans. However, an inconsistent, often insufficient, level of detail is captured in these career plans. Interim steps towards long-term goals should be more clearly outlined.	5.1.5
Participants have the financial support necessary to bridge needs gaps	Achieved	Approximately 85 per cent of survey respondents indicated that they received the financial support necessary through the Pilot to pursue their relevant career pathways.	5.1.7
Providers are well equipped to meet needs of participants	Partially achieved	With the exception of the limited timeframe of the Pilot period, the flexible design has meant that providers have been able to adapt services to meet the needs of their specific client cohorts. While broadly, the workforce was sufficiently and appropriately skilled, there were some elements that inhibited the provider's delivery of services. This included challenges with establishing a client management database and lack of standardised processes and templates.	5.1.8

Table 5.12: Interim evaluation findings, medium-term outcomes

Medium-term outcome	Evaluation	-	Example evidence
Participants are satisfied they have made progress towards reaching their career goals	Partially achieved	Approximately half of survey respondents reported they had achieved satisfying employment. However, despite not reaching long-term re-employment goals in same or similar roles, the majority of client interviews reflected clients were satisfied with progress they had achieved to date through the Pilot.	
Participants have relevant training	Insufficient evidence	The client survey found that engaging in further training or bridging courses was the most common activity undertaken, selected by 38 per cent of respondents. However, given the limited achievement to date of reaching re-employment goals, further analysis would be required to before accurately categorising training activity as 'relevant'.	5.1.5
Participants have previous skills and qualifications recognised	Insufficient evidence	Thirty one per cent of survey respondents reported that they had gotten their qualification recognised, or were in the process of doing so. However, as the data does not allow for the distinction between completing, and progressing, this milestone is unclear, it cannot be concluded that this outcome has been reached in full.	5.1.5
Participants can easily identify and navigate through relevant services t improve their prospects	Insufficient evidence o	While it was reported that some clients experienced problems navigating the suite of settlement services available to them, this point was not raised as a primary focus during consultations. While 86 per cent of survey respondents stated they were 'satisfied' or 'very satisfied' with the accessibility of Pilot services, it was not clear the degree of support they required in order to do so (i.e. whether it was 'easy' for them).	5.1.6

The program logic also identified three long-term outcomes, including:

- 1. Clients are working in meaningful employment
- 2. Clients are achieving their career goals
- 3. Clients are contributing to Australia by maximising use of their previous skills and experience

However, evaluating against these criteria was not in scope of this interim evaluation. It was agreed that the Pilot's relatively short timeframe was insufficient to lead to the complete achievement of long-term outcomes.

# 6 Efficiency

This chapter considers how efficiently providers have supported clients through Pilot services, reflecting on the extent to which value for money has been achieved, as well as identifying areas where economies of scale could be realised.

#### Summary of efficiency findings

- 1. The survey responses indicated that 'career advice and planning' was the most important activity to those who have successfully gained employment in the Pilot, with over half of responses given as 'Very important' (or 5 out of 5). 'Financial support' was a close second with 45 per cent of survey responses.
- 2. Comparing this to the DEX service provision is difficult due to both variable reporting approaches and potential misalignment of the categories. Almost 90 per cent of SSI's sessions were primarily reported as providing 'Information/advice/referral', potentially indicating this was a catch-all reporting choice.
- The providers have different ratios of sessions per client. Based on the data, CatholicCare works more intensively with its clients as they provide, on average, over 18 sessions per client. AMES has a different profile, delivering 3.62 sessions per client, but covering a much larger client base.
- 4. The different client servicing profiles has led to different average amounts of funding allocated to each client. CatholicCare's intense investment per client at this point in time is over \$5,000 per person. atWork has the highest cost per session (\$622), due to the comparatively low numbers of sessions provided.
- 5. While costs per session cited in this chapter are not representative of the providers' actual budgets, they are a means to comparing the relative efficiency per client and per session of service provided at this point in time. Replicating the analysis once the service delivery ends and funds are acquitted will allow for better efficiency comparisons.

## 6.1 How efficiently has support to eligible clients been provided throughout the Pilot?

In determining how efficiently Pilot clients have been supported under the Pilot, this section first considers the extent to which program resources have been expended on service types that clients consider to be important. The underlying assumption is that resources should concentrate on services that clients consider to be important supports in meeting long-term career outcomes. As a consistent component of the Pilot's service delivery across providers, the cost of administering client sessions has then been used as a measure of providers' ability to deliver services efficiently.

It should be noted that comparing survey data related to service usage with service utilisation data captured in DEX is difficult. This is due to both variation in provider reporting practices using DEX and potential misalignment of the categories across the two data sets. Almost 90 per cent of SSI's sessions were primarily reported as providing 'Information/advice/referral', potentially indicating this was a catch-all reporting choice.

#### 6.1.1 Have service types aligned with clients' priorities?

Table 6.1 (below) provides relative ranking of services, generated according to the number of 'Very Important' responses each service was allocated (refer to section 5.1.3 for the overview of sessions of service provided by type of activity by provider).

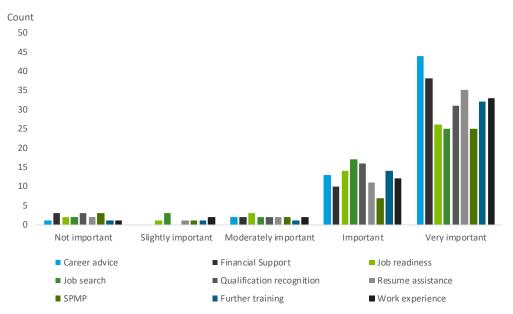
Table 6.1: Survey respondents ranking of the Pilot services by 'Very Important' responses

Pilot service	'Very Important' (per cent)
Career advice and planning (including understanding career and training options and processes)	52

Pilot service	'Very Important' (per cent)
Financial support (for example, for education, training, education and tests)	45
Assistance with resumes, job applications and interview preparation	42
Assistance with finding work experience, internships, professional networking, and development opportunities	39
Assistance with undertaking additional training or obtaining qualifications	38
Assistance with recognition of skills and qualifications in Australia	37
Job readiness assistance (for example, information on workplace technology, workplace culture, Occupational Health and Safety, and rights and responsibilities)	31
Job search assistance (including online searches and contacting employers)	30
Group based programs, such as the Skilled Professional Migrants Program	30

Chart 6.1 shows the perceived importance of different services provided under the Pilot in obtaining employment, as rated by client survey respondents. Overall, respondents valued all services offered by the Pilot as 'Important' or 'Very Important'. The highest ranked service was 'Career advice' with the most number of respondents valuing this as 'Very important' or 'Important' (52 per cent), and returning the least amount of non-responses (29 per cent).

Chart 6.1: Relative importance of the different Pilot service offerings



#### 6.1.2 Delivery costs

The delivery costs of the Pilot were fundamental to understanding the program's efficiency to date. The inputs included in the following analysis are the providers' program funding and time spent delivering the Pilot. These inputs have been measured against the number of sessions provided and outcomes achieved to date. Of the \$4.5 million spent on service delivery, each provider received a different amount to deliver the program based on the likely percentage of eligible working age humanitarian entrants that would be seeking services in their area. The following analysis of delivery costs considers all funding (excluding funding designated for financial assistance, where possible) as the input costs for delivery. The average costs consider the different amounts of funding provided to allow for comparison across providers with different budgets.

This analysis assumes that growth rates, current client load, session provision and relating averages remain constant. Client and session numbers were extrapolated across two reporting periods using each providers' current compound average growth rate (based on three reporting periods of DEX reports).<sup>2</sup> This data is shown at section 5.1.2 above.

It should be noted that AMES and SSI had noticeably different client numbers in their last reporting periods. As a result, the projections are least reliable for these providers. Chart 6.2, serves as an indication of the relative efficiencies across providers, at the end of the Pilot, as informed by the current available data.

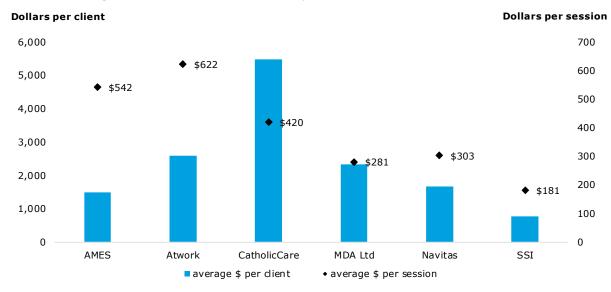


Chart 6.2: Average session and client cost for each provider\*

\* Average costs are based on total funding excluding any funding specified for financial assistance where possible.

The 'per client' costs (blue columns) reflect the different intensities or strategies that the providers have implemented. CatholicCare had the highest per client cost, reflecting their high intensity approach which invests in a small number of clients, whereas SSI has the lowest per client costs, reflecting their low intensity provision of services across a large number of clients.

The approaches will need to be measured against final employment outcomes to determine whether session intensity has impacted employment outcomes. This can then inform whether investing heavily, or spreading services widely across clients, leads to better outcomes. It is noted that this report is the Interim Evaluation only and as such, this cannot be tested at this stage.

The cost per session (black diamonds) by provider, represents the projected operating costs of each provider in the program. As such, the following insights can be gathered:

- SSI is projected to deliver the most inexpensive sessions at approximately \$200 per session
- atWork is projected to have the most costly sessions at over \$600 per session.

<sup>&</sup>lt;sup>2</sup> Compound Average Growth Rate represents the average rate of change per time period (in this case years) from a starting time period to a specified ending time period.

#### 6.2 Impact of increased numbers of clients on Pilot efficiencies

As previously cited, intake of clients was lower than anticipated. Increased numbers of eligible humanitarian entrants directed to the Pilot locations and improved referrals would mean that expected enrolment numbers are more likely to be reached. This is of particular pertinence to providers operating in regional locations, given the slower uptake they have experienced in relation to recruitment numbers. Specifically, CatholicCare stated that the historical context of referrals into Tasmania meant there is only a limited population in the region that meets the specific characteristics required, limiting the potential reach of the program.

However, it is likely that with a larger pool of clients, achieving economies of scale would be more manageable. This is somewhat corroborated at section 6.1.2 above, as it shows SSI (the largest provider in terms of client numbers) has been able to deliver career adviser sessions at the lowest cost per client session.

#### 6.3 Reflections on how resources have been utilised

As captured in Section 4.3, providers have indicated a variety of ways in which they have chosen to allocate resources through innovative implementations of the Pilot. Although internal allocation of funding to different activities was left to individual providers' discretions, a number of spending patterns developed across providers. For example, providers have reported spending considerable effort on independently researching career pathways for clients as they arise. It is likely that given the limited number of client occupations/industries, that providers would have researched similar pathways, noting that for some professions there are state based differences. Such duplicated efforts provide an example of how program resources have not been efficiently utilised. Departmental staff suggested there may have been value in hiring a third party to consolidate key information where possible, leaving providers more available to focus on servicing clients.

Many providers also noted the learning processes involved in directing program funds most efficiently. Providers reported there has been a need to flexibly utilise Financial Assistance resources to allow them to cater to specific client cohorts. This is of particular importance for certain professional cohorts, such as health professions, who require considerable funding and timing to navigate career pathways. While initially providers strongly supported clients to undertake re-qualification examinations, it was found that as a result of poor content preparation and/or insufficient English levels, the fail rate for these examinations was higher than anticipated. This was considered to be a particularly inefficient use of resources. With time, many providers recognised the importance of thorough screening and preparation processes prior to clients undertaking examinations and enrolling in training programs. Some providers have also reported connecting with Adult Migrant English Program providers to ensure that clients' English language levels are sufficient to succeed in examinations and the Australian workforce more broadly.

To further ensure value for money is achieved, providers also recognised the need for coordination between case managers across different government programs. For example, one provider noted they were in contact with local *jobactive* managers to avoid overlap in spending. This has been flagged as important in order to gain a shared understanding of how clients are engaging with related services.

# 7 Suggestions for policy development and program improvement

This section provides suggestions for policy development and program improvement for Government and providers to consider in developing improved Career Pathways services. The suggested improvements have been assessed and rated against the following scale:

#### Priority

#### High priority Medium priority Low priority

Challenge to implement

#### **Difficult Moderate Low**

Table 7.1: Suggested improvements for Government

Suggested improvements	Description	Priority	Challenge to implement
Run future Pilots for longer or build in mechanisms to extend the Pilot, if required	It is noted that the Pilot concluded in June 2019. As outlined in this report, the duration of the Pilot was insufficient. Future initiatives for pilot or trial by Government should either run for longer, or include opportunity for extension, if the need to do this is identified.	High priority	Difficult
Centralised knowledge hub	Should a program such as this be provided in future, outsource the research of various career pathways and requirements to a third party, in order to reduce duplicated efforts and leave providers more time and funding to dedicate to focusing on client needs.	High priority	Low
	<ul> <li>This centralised hub would:</li> <li>Map like for like careers, as well as identifying related, alternative career pathway options (e.g. dentist and dental hygienist, doctor and nurse</li> </ul>		
	<ul> <li>Develop standardised career pathways, including identifying national registration processes</li> </ul>		
	Create a central repository to store career     pathways information		
	<ul> <li>Engage with national industry/ professional bodies to advocate for alternative registration processes for humanitarian entrant clients</li> </ul>		
	<ul> <li>Assist with mapping humanitarian entrant client journeys in order to understand where the Pilot sits relative to other settlement services.</li> </ul>		
Enhanced integration with other settlement services	• Should a program such as this be provided in future, it would best be provided through settlement service providers, supporting the client in order to understand their individual circumstance	Medium priority	Difficult

Suggested improvements	Description	Priority	Challenge to implement
	• Enhance interagency linkages to identify potential clients earlier in their journey into Australia. The program should ideally be run as part of a wrap-around settlement service		
	• To do this, the program has to understand what other services clients are accessing e.g. they could access <i>jobactive</i> services to support them to gain workplace experience and so the program could focus on core specialised career advice only		
	<ul> <li>Offer the program as part of the suite of other specialised settlement services to complement other services being provided to newly arrived humanitarian entrants, with better integration, referral and coordination across and between services</li> </ul>		
Clear, streamlined reporting requirements	• For any new programs introduced by Government, work with providers to inform their understanding and facilitate their reporting requirements (e.g. for DEX and AWPs). Unclear and/or convoluted reporting requirements can lead to data gaps as well as challenges comparing program data across providers.	Medium priority	Moderate
	• Streamline the data capture and reporting process (i.e. enhance DEX or provide Excel data capture templates for each provider to use). Ensure that mapping of other accessed services is also included in the data capture.		

Suggested improvements	Description	Priority	Challenge to implement
Develop more formalised employer/industry advocacy strategies	<ul> <li>Providers to consider:</li> <li>Engaging with local employers and industry groups more systemically, identifying opportunities for the program to support Corporate Social Responsibility strategies including helping organisations to set targets related to employment of humanitarian entrants or develop specialised pathways to facilitate their employment</li> <li>Establishing a mentor program to connect employer-mentors with humanitarian entrantsmentees</li> </ul>	Medium priority	Moderate
Develop more detailed career plan templates	• Develop more structured, granular career plans that clearly outline sub-goals, expected timeframes and mitigation strategies would be beneficial in determining whether clients were on track towards their career goals. This will help the client better understand the journey ahead, from the outset.	High priority	Easy
More frequent inter- provider information sharing	• Providers should hold Community of Practice meetings to share any learnings and experiences and further opportunities for collaboration across providers. This should be a frequent and structured activity, including developing a high level provider strategy and allocating actions accordingly.	Low priority	Easy
Offer additional workplace readiness training for clients	• Providers to offer additional training regarding the cultural expectations of the Australian workplace. While it was understood that cultural immersion is one of the objectives of work experience, employers noted they only have limited time and resources. Such training may also help clients understand what is expected of them or potential trade-offs or management strategies they may need to make.	Low priority	Moderate

Table 7.2: Suggested improvements for future providers of a program similar to the Pilot

#### Implications of ceasing the Pilot

There is limited specialist career advice available to humanitarian entrants who have recently settled in Australia, particularly in regional areas. As such, a service gap will re-emerge when this Pilot ends.

Current Pilot service providers reported that they do not have the time or resources available to research and guide people through their employment journeys. Skilled humanitarian entrants will still be able to source career advice, but it is likely to be more challenging to access and complex to navigate alone.

Potential Pilot clients may be driven to invest in courses that they don't understand the purpose and outcomes of. Alternatively, potential clients may also choose a different pathway as they may not be able to pay for the appropriate pathway to the same or similar career without the financial support offered through the Pilot.

There would be limited support systems available to assist potential clients with re-qualification to remain in the same or similar career. It is likely clients would need to turn to programs such as *jobactive* whose primary focus is placing humanitarian entrants in immediately available employment opportunities. In this instance, this would represent a lost opportunity from the perspective of the client and the community more broadly.

# Appendices

#### A.1 Post Implementation Review

Deloitte Access Economics was engaged to undertake a Post Implementation Review (PIR) of the implementation of the Pilot, which was undertaken between June and December 2017.

Various stakeholder consultations and data requests informed the PIR, including:

- Consultation with providers, state-based Funding Agreement Managers (FAMs), employers and peak body representatives through face-to-face workshops or teleconferences
- Client survey responses (16 in total)
- Program data and templates, including information on the numbers of current participants, planning documents, draft career plans, funding allocation tools or process and implementation plans

The PIR assessed the design and delivery of the Pilot, along the following key lines of enquiry:

- 1. Has the program design led to successful implementation of the Pilot?
- 2. Is the Pilot being delivered efficiently and effectively?
- 3. Is the Pilot on track to deliver its intended outcomes based on the preliminary outcomes from the initial period of operation?

The PIR concluded that the Pilot adhered to most elements of good practice in employment services, including a flexible design which allowed for local adaptation in determining the most appropriate service delivery approach. Overall, providers considered that the Pilot could lead to services which are valuable and address a clear need.

However, the PIR found that some providers experienced a slow start to implementing Pilot services. This may have been due to a range of factors including delays in the selection of providers and the establishment of contract arrangements. The PIR also identified that there were relatively low levels of client recruitment for some providers. Specifically, providers who were not also providing services under the HSP, hence lacking a large existing client base, struggled with recruitment.

Of the clients who responded to a satisfaction survey as part of PIR, 69 per cent rated their overall experience as a seven out of ten or higher. Survey respondents also reported the major barriers to accessing services to be an inconvenient service location, childcare responsibilities, and not having sufficient time due to employment commitments.

In light of this, the PIR made the following recommendations:

- 1. Increased contract management between DSS and service providers
- 2. Additional guidance from DSS to improve participant numbers
- 3. Improved service provider relationships with employers and other service providers
- 4. Mentorship for pathways in regulated professions
- 5. Increased guidance on financial assistance paid to clients
- 6. National and regional office communication
- 7. Improved data collection on visa holders employment background by the Department of Home Affairs

Findings and any lessons learnt from the PIR have been integrated and further explored in this evaluation.

#### A.2 The Counterfactual Study

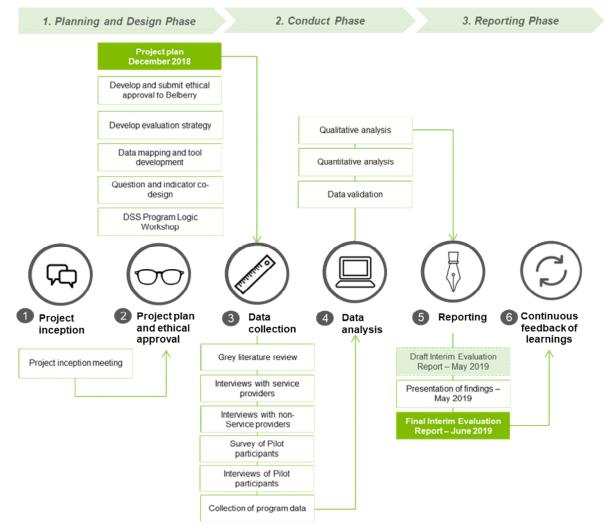
Deloitte Access Economics was also engaged to complete a study establishing the counterfactual for comparison with the intended population in the Pilot.

Due to the low number of clients in the Pilot, and hence, low number of survey responses, the Counterfactual study was undertaken via one-on-one telephone interviews with a sample of 24 humanitarian entrants who were eligible for Pilot services but not currently enrolled in the program. Consultations revealed a number of service gaps that this interviewed cohort was experiencing. Gaps included specialised study and employment pathway support, assistance gaining work experience or volunteer opportunities, employer advocacy and liaison, and assistance with specific medical pathways.

- specialised study and employment pathway support
- assistance gaining work experience or volunteer opportunities
- employer advocacy and liaison
- assistance with specific medical pathways.

#### A.3 Methodology overview

Figure A.1: Overview of the six stage approach used for the evaluation methodology



#### Figure A.2: Interim evaluation program logic

Program similar objectives to deve	e targeted, early intervention a career and to pursue a satisfy elop informed career pathway p ys to satisfying employment.	ing career pathway: a) Pro		ensive career advice and	l employment information	. b) Assist participant
Durboco	er services which assist eligibl ic well-being, independence, p Participants and			ably in Australian societ	y with a focus on fostering Outcomes	g social participation,
Program funding \$4.6 million provided to service providers for the Pilot Approximately \$1.8 million provided for financial support Time/in-kind inputs DSS program co- ordination and delivery Services working with clients additional to program payment/ participation e.g. Career Pathway Advisors	Participants: Pilot participants Stakeholders: All humanitarian entrants Service providers: Pilot service providers <i>jobactive</i> providers Adult migrant education providers Settlement services providers Employers, industry peak bodies and non- government organisations Australian and state/territory governments	Recruitment of participants to the Pilot Identification and provision of services to meet participant needs: Develop career pathway plans Develop relationships with employers Ongoing case management and financial support Support for skill and qualification recognition, work experience Integrate participants with localised service networks	Number of participants enrolled Number of career plans developed Number of employer connections and information provided Number of case management sessions Financial support acquitted by purpose Number of representations, work experience requests Number of cross provider referrals	Participants are aware of services and networks and utilise them as needed Participants have a defined career pathway, have identified steps to achieve this and are commencing activities identified Participants have the financial support necessary to bridge needs gaps Providers are well equipped to meet needs of participants	Participants are satisfied they have made progress towards reaching their career goals Participants have work experience and job applications relevant to their desired career Participants have relevant training Participants have previous skills and qualifications recognised Participants can easily identify and navigate through relevant services to improve their prospects	Participants are working in meaningful employment and have achieved their career goals Participants are contributing to Australia by maximising the us of their previous skills and experience

#### A.3 Evaluation questions and Indicator framework

Evaluation findings are strengthened through multiple points of evidence. The evaluation questions have been assessed and assigned relevant indicators. The data sources used are:

- Program documents and data analysis (DSS), including acquittal of funds (a)
- Service providers' interviews / information (b)
- Employer / industry representatives' interviews and information (c)
- Pilot participant surveys and interviews (d)

These have been assigned a letter, used in Table A.1 to link sources to indicators.

#### Table A.1: Indicator framework

Evaluation domain	Evaluation question	Indicators	Source
Appropriateness	Is the Pilot appropriate for assisting	Number of participants enrolled	а
	eligible humanitarian entrants to identify and pursue similar or 'like' career pathways?	Number of participants who agree the model is appropriate for assisting them to pursue a career of their choosing	d
	How well is the Pilot focusing on client needs?	Number of participants who agree the Pilot focuses on their needs	d
Process	Has the Pilot design led to successful implementation of the	Number of stakeholders who agree the pilot design has assisted with successful implementation	b, c, d
	services to clients?	Problems or impediments identified with pilot design	b, c, d
	What factors have impacted on	Factors that impacted client referral into the Pilot	a, b, d
	client referral into and take up of services?	Factors that impacted client take up of services	a, b, c, d
	In what ways have service providers innovatively implemented the Pilot?	Ways that providers innovatively implemented the Pilot	a, b, c, d
		Impediments or opportunities for better implementation	b, c, d
Effectiveness	How effective is the Pilot in achieving its intended objectives?	Number of stakeholders who agree the Pilot is achieving its objectives [outlined in the program logic]	b, c, d
	<ul> <li>Are participants aware of services and networks, and</li> </ul>	Participant level of awareness of services and networks	d
	do they utilise them as needed?	Participant level of use of services and networks	d
	- Do participants have a	Number of career plans developed	a, b, d
	defined career pathway with identified activities that they are commencing?	Number/hours of case management sessions	a, b, d
		Number of participants who have commenced planned activities	d
	<ul> <li>Do participants have the financial support to bridge needs gaps?</li> </ul>	Financial support acquitted by purpose	а
		Number of participants who received financial assistance	а
		Number of participants who no longer require financial assistance	TBD
		Number of participants who agree that they have received the financial support necessary	d
	<ul> <li>Are providers well equipped to meet the needs of</li> </ul>	Number of employer connections and information provided	a, b, c
	participants?	Number of cross provider referrals	a, b
		Number of providers who agree that they are well equipped to meet the needs of participants	b
	<ul> <li>Are participants satisfied that they have made</li> </ul>	Participant satisfaction that they have made progress towards reaching their career goals	d

Evaluation domain	Evaluation question	Indicators	
	progress towards reaching their career goals?	Percentage of participants who have achieved satisfying employment	d
		Number of participants in long-term employment	d
	<ul> <li>Do participants have work experience and job</li> </ul>	Number of representations, work experience requests/applications	a, b, c, d
	applications relevant to their desired career?	Participant satisfaction with work experience placements being relevant to their desired careers	d
	- Do participants have	Number of participants who have received training	a, b, d
	relevant training?	Of the participants who have received training, the percentage who assess their training as relevant	d
	- Are participants' previous skills and qualifications	Number of participants who have previous skills and qualifications recognised for relevant work	a, b, c, d
	recognised?	Number of participants who are working towards having their skills and qualifications recognised	b, d
	- Can participants easily identify and navigate through relevant services to	Number of participants who agree that it is easy to identify and navigate through relevant services to improve their prospects	d
	improve their prospects?	Number of cross provider referrals	a, b
	What unintended outcomes were observed from the Pilot?	Unintended outcomes reported by stakeholders	b, c, d
	What aspects of the Pilot worked, for whom, when, where and in what circumstances?	Stakeholder reports on what aspects of the Pilot worked, for whom, when, where and in what circumstances	b, c, d
	Is the Pilot on track to deliver its intended outcomes based on the observed outcomes to date?	Number of providers and employers who agree that the Pilot is on track to deliver its intended outcomes	b, c
	<ul> <li>Are participants on track to work in meaningful</li> </ul>	Number of participants who agree they are on track to working in meaningful employment	d
	employment that helps achieve their career goals?	Number of participants who agree that they are on track to achieve their career goals	d
	<ul> <li>Are participants on track to maximise previous skills and experience to</li> </ul>	Number of participants who agree that they are working towards maximising the use of their skills and experience	d
	contribute more optimally to Australia?	Provider and employer views on the Pilot being on track to deliver benefits to Australia	b, c
	What were the barriers and	Reported barriers	b, c, d
	enablers?	Identification of improvement opportunities	b, c, d
		Reported enablers	b, c, d
	What lessons can inform future policy and program delivery for the Pilot cohort?	Provider reported lessons that could inform future policy and program delivery for the cohort of the Pilot	b
Efficiency	How efficiently has support to	Cost per client	а

Evaluation domain	Evaluation question	Indicators	Source
	eligible clients been provided throughout the Pilot?	Program delivered within allocated budget and timeframes	а
	Could economies of scale be realised if the pool of clients was increased to other permanent migrant visa streams?	Provider and employer views on how to realise better efficiency and economies of scale, including through extension to other visa streams	b, c
	To what extent has value for money been achieved in terms of investment of resources from the flexible assistance pool?	Stakeholder views on the best and least value uses for the flexible resources	b, c, d

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