Community Link in New Zealand

A report based on site visits and key stakeholder consultations in Wellington and Christchurch, 5–7 May 2010

Michael Horn
Research & Policy Centre
May 2010
Summary

Community Link aims to provide a more effective and efficient service to income support recipients and disadvantaged job seekers through an integrated approach that connects people in need with community and public sector organisations.

The Australian Government, through an interdepartmental taskforce to strengthen government service delivery for job seekers established in late 2009, is implementing a trial of the NZ Community Link approach at four Centrelink Customer Service Centres, including Frankston.

This report provides an assessment of the Community Link model based on brief site visits and discussions with senior policy managers, operational managers and Community Link Centre providers.

A key question is whether the core elements of the approach in NZ can be incorporated effectively into the Australian income support and employment assistance service system to achieve the desired outcomes. The aim of this paper is not to inform a summative decision for BSL to participate in the pilot or not. Rather, the findings will hopefully be useful to BSL managers and case workers to guide our participation to ensure a successful pilot for all stakeholders.

The New Zealand Community Link (CL) model seeks to co-locate a broad range of social services such as financial assistance, housing, health, legal and family services with the core business of income support and employment assistance provided by the Ministry of Social Development (MSD) through its Work and Income portfolio. However, the model goes beyond the ‘one stop shop’ principle in providing what has evolved since its inception in Linwood (Christchurch) into a form of shared case management for disadvantaged jobseekers.

Although not explicitly referred to as a social inclusion approach, in many respects, the CL model applies social inclusion principles to the delivery of social services, by placing the individual and family at the centre of assistance and taking a ‘whole of life’ approach to intervention and support. It adopts the principle that a personalised service will be more effective and efficient.

Despite the limited evidence base on hard outcomes for clients, the NZ Government through MSD is committed to the CL model being rolled out across Work and Income Centres nationally with priority placed on areas of high social deprivation. At present there are 23 CL centres most of which are less than one year old. A total of 50 CL centres will be operational by the end of 2010: testament to its acceptance and value by the New Zealand government.
Context

A brief assessment of the NZ policy context in which CL evolved suggests that the philosophical approach to public services delivery and the underlying cultural norms, in part reflecting the commitment to Maori participation, have supported a more collaborative and trust based policy environment compared to Australia. In contrast, the separation of key portfolios and functions in Australia, the extra level of government, and in particular, the shift in delivery of employment services from public provision to a privatised, compliance-centred model, has limited collaboration and sharing of resources – particularly for those job seekers with complex or multiple barriers to work. These challenges will need to be faced if the adaptation of the CL model is to be fully replicated in Australian Centrelink CSC’s – through the delivery of an integrated service response that is client-centred, rather than merely a co-location of service providers.

The NZ Community Link model

Based on the site visits, CL centres appear very similar in lay out to a typical Centrelink CSC. Most of the footprint is devoted to open plan work stations with a central area set aside for use by the range of community and government service providers. CL centres include a number of interview rooms, a self help job search centre with computers, newspapers, and job adverts, etc, and a seminar area near for group training and information sessions to job seekers. In addition, a separate entrance, accessible out of hours, leads to a number of meeting rooms that are available for local community or non-partnering organisations to use.

The intention is to create a shared resource for the community through a range of strategies, such as new exterior signage, sharing of resources (provided free of charge), and common staff areas to facilitate stronger relationships and a team approach to supporting clients.

Core government staffing enables a more responsive and flexible service delivery with a focus on ‘frequent flyers’ through an appointment coordinating function, an interagency facilitator, and reduced case loads (approx 1:10) for clients with complex issues. This resourcing has enabled the development of a collaborative ‘shared case management’ approach and a range of community focussed special events.

Client entry, assessment and case management processes have been revised over time to be more responsive and simpler for clients and workers with a single reception area, open-ended appointment times, adoption of a simple whole of life screening tool and rapid referral to partnering providers for specific needs (on-line appointment calendar).

All partner agencies in CL commit to a Charter and agree to abide by the operational principles which stress a shared responsibility and commitment to the key principles of the approach. As part of the induction process for new partner agencies, a comprehensive orientation kit is provided which sets out the CL approach, the Charter, the resources and facilities at the centre, safety, security, emergency and OH&S provisions and policies.

The main entity for planning and implementing service delivery is the CL Management Group that includes three representatives from the non-government sector. The Management Group reports to its governing body, the local region’s Interagency Social Policy Network. This arrangement reflects the strong emphasis on community consultation in NZ. In addition, a Provider Practitioner Group acts as the consultative working group to reflect on service delivery, encourage sharing of good practice and identify improvements in operations.
Benefits and success factors

The primary data collection from Linwood clients in 2009 has been reported as showing that client satisfaction rates have improved ‘significantly’ and that outcomes have improved for individuals and their families. Senior managers report reduced demand from repeat clients in crisis and shorter spells on unemployment for disadvantaged job seekers. Staff are reported as taking a more holistic perspective on client needs. Client feedback specifically found that they:

- ‘feel better about the service
- are satisfied with the responsiveness of the Centre (time to be seen)
- case managers understand their needs
- are more likely to be referred to other services, and
- most or all of their needs are being met.’ (MSD 2010)

Feedback from partnering providers indicates a range of benefits from participation in CL:

- improved accessibility for both their clients and staff to resources and colleague agencies’
- improved visibility and profile of their agency and services within the local community’
- increase in client base
- reduce the repeat demand from clients with multiple issues over time
- stronger focus on early intervention with their clients
- potential to strengthen skills and knowledge of staff
- improved access to government services’ and
- more effective shared support to ‘frequent flyer’ clients.

Challenges for the NZ partnering organisations

A number of challenges have been identified by the partnering agencies in NZ, which may act as potential disincentives to ongoing participation in CL for some:

- lack of organizational capacity (especially managing staff from a distance),
- lack of perceived return on investment,
- co-located environment not a good ‘fit’ for agency strategy or service delivery focus,
- concern that the model enables some clients to jump the queue,
- level of referrals and demand for services cannot be met, and
- cultural change or adaptation required to share clients.

During the past year, it was reported that 3 not-for-profit service providers have withdrawn from Linwood CL. In each instance, the providers had been overwhelmed with referrals and were unable to respond within their limited resources. If their resource constraints could be addressed, they were reported as being interested in returning to the Centre.

Learnings for Australia

This suggests an important lesson for new partners who are considering joining CL. Capacity to respond flexibly and immediately to client referrals is a critical element of a successful shared case management approach. For those smaller providers with tight or inflexible funding and staffing, meeting this ‘obligation’ posed a significant challenge.
A key part of the decision analysis for joining the CL model should include an assessment of likely demand for the particular type of service offered. As clients opt to disclose their underlying issues to their case manager, this will increase the demand for provider services at that time. My impression from Linwood was that the arrival of CL approach has altered the flow and demand patterns of clients with ongoing or episodic issues – such as debt problems – across local community services. This should not be unexpected as the intention is to encourage client disclosure of their needs/barriers to work, so as to provide an immediate well coordinated and holistic response. If effective, it should in fact reduce episodic or repeat demand for help presenting at other services and agencies in the local area. In the Australian trial sites, we may anticipate a redistribution effect on presenting demand by the target population groups. *Assessment by potential partner providers (including BSL) of this effect in terms of their service capacity in respect of the two target groups of young people and the very long term unemployed is recommended.*

Although a robust evidence base has yet to be assessed for hard outcomes of their approach, the range of stakeholders, including government and not-for-profit providers, strongly supported the CL approach. The feedback obtained during the visit indicates that the principles and operational elements of CL are proving effective in enabling a far more personalised and ‘client centred’ service to highly disadvantaged job seekers and income support recipients.

This process of bottom-up engagement and consultation is being fast tracked in the development of the Frankston pilot and may put at risk the trial of a collaborative approach, in the absence of a commitment to a period of partnership building once the initial sign-up of participating agencies is completed.

*It is also highly recommended that a number of support mechanisms and review opportunities are implemented as part of the pilot, including:*

- Resourcing of an interagency facilitator to ensure the smooth running of the CL model between Centrelink and partner providers;
- Management group that includes not-for-profit representation and includes in its terms of reference a commitment to obtain feedback from all stakeholders to enable proactive review of all aspects of the CL pilot;
- Provider Practitioner Group that meets monthly to respond to emerging operational matters;
- Development of an agreed Charter for the CL that sets out principles of operation;
- Development of an orientation and operational procedures manual that clearly establishes processes and expectations across all operational matters, such as OH&S, safety and privacy;
- Implementation of an evaluation and reporting framework that reflects the principles and philosophy of the CL model.
In considering replication in the Australian policy setting, the fundamentally different environment here to that in NZ must be considered if CL is to be successful in Frankston. The ‘control’ model for employment services with its transactional, narrowly defined outcome based contracts has led to an erosion of the capacity to collaborate and share ‘clients’ between providers. This will challenge participating agencies and their case workers if the CL model is to be fully tested. The sharing of clients and cooperative approach to assistance posed a challenge for NZ partner providers – this may pose a bigger challenge in Frankston.

On the basis of the brief visit to NZ, BSL should be an active partner in the CL Frankston pilot. The principles are consistent with the philosophy and policy positions advocated through much of our research and innovative service delivery. The pilot offers a window to influence Federal Government policies for further progressive reform that focuses on better outcomes for highly disadvantaged job seekers and income support recipients. The feedback from NZ participants indicates that the approach can achieve significant benefits for all stakeholders.

However, its successful implementation, if configured by DEEWR and Centrelink to be consistent with the NZ approach, will require cultural change for our Frankston service and the staff involved in the pilot. Essentially, at its heart the approach puts the client at the centre of support – this entails a shift from a ‘products offered’ provision of assistance by partner providers.
1 Context

1.1 Introduction

The main purpose of the visit to New Zealand was to undertake selected site visits to Community Link and Work and Income Service Centres in order to gain a firsthand appreciation of the Community Link model currently in operation in New Zealand. Community Link aims to provide a more effective and efficient service to income support recipients and disadvantaged job seekers through an integrated approach that connects people in need with community and public sector organisations. A number of discussions were also held with senior policy and program managers in the Ministries of Social Development (MSD) and Youth Development in Wellington. The visit was undertaken between 5th and 7th May 2010. The schedule for the trip was generously arranged through the auspices of Mike Smith, General Manager, Strategy & Service Development in the national office of MSD.

MSD is a large single ministerial portfolio with 3 main clusters:

- Policy (Social Sector Strategy, including the Centre for Social Research & Evaluation, and Social Services Policy, divided into 4 life course divisions)
- Service Delivery (Work & Income; Child youth & Family Services; Family & Community Services and Specialist Services)
- Corporate Governance, Risk and Assurance

The Australian Government convened last year an interdepartmental taskforce to consider further reforms to employment assistance with a focus on disadvantaged job seekers and income support recipients. The taskforce has considered that the NZ Community Link model for providing ‘wrap around’ assistance from the first point of contact to intensive case management is worth piloting in the Australian service system through Centrelink Customer Service Centres.

Four sites have been selected on the basis of high levels of disadvantaged job seekers for a proposed pilot to commence from June 2010. Frankston Centrelink is the chosen site in Victoria: the others are Campsie (NSW); Ipswich (Queensland) and Elizabeth (SA). The client groups being targeted through this pilot are young people and the very long term unemployed (5 years plus). As a local provider in the region through our High Street Centre, and with our strong policy analysis and innovation record, BSL has been approached to support and consider participation in this pilot.

An initial scan of the NZ literature on Community Link indicated that it is a very new approach (2008) which is still evolving both at individual sites and through increasing coverage nationally across NZ. There appeared to be no publicly available evaluation report to provide evidence of its benefits and outcomes compared to the standard Work & Income service delivery model.

Initial consultations with potential partnering service providers in Frankston are already underway. BSL staff are actively involved in these first steps at enlisting support and commitments for the Community Links approach.
The objective of the visit therefore was to obtain first hand views from policy managers and service delivery providers to provide guidance to BSL about the success factors of the Community Links approach, to identify any risks for our involvement and to inform its development and implementation in Frankston. A key question is whether the core elements of the approach in NZ can be incorporated effectively into the Australian income support and employment assistance service system. Whilst the aim was not to inform a summative decision to participate in the pilot or not, the findings will hopefully be useful to BSL staff to guide our participation that ensure a successful pilot for all stakeholders.

The following site visits relating to the Community Link (CL) approach were undertaken (see Appendix 1 for complete schedule):

i. Site visit to Linwood Community Link, in Christchurch – the first site to implement the approach in early 2008; discussions with senior regional managers, the CL Service Centre Manager; and 2 not-for-profit agency partners (Salvation Army and Tenants Protection).

ii. Meetings with Mike Smith (GM, Strategy & Service development) and senior managers in Work & Income, Wellington

iii. Site visit to Porirua Work & Income Service Centre (similar demographic to Frankston), north of Wellington; discussions with the branch manager and service centre manager.

iv. Presentations by National Manager, Strategy & Service Development (Amy Allison) & Senior Advisor, Client Services (David Dougherty) on ‘Work matters people count’ strategy and Community Link approach

v. Discussion with Manager, Research & Evaluation (Dorothy Adams) responsible for Community Link outcomes measurement.

In addition, meetings were arranged with senior staff from the Ministry of Youth Development on youth policies and participation; a visit to Aranui Heartlands (community grass roots approach to engaging socially excluded groups in public housing); and discussions with the Policy Manager, Working Age People’s Policy (Wellington). The insights from these discussions will only be mentioned in the context of the Community Link approach.

1.2 What is Community Link?

The New Zealand Community Link (CL) model seeks to co-locate a broad range of social services such as financial assistance, housing, health, legal and family services with the core business of income support and employment assistance provided by MSD through its Work and Income portfolio. However, the model goes beyond the ‘one stop shop’ principle in providing what has evolved since its inception in Linwood (Christchurch) into a form of shared case management for disadvantaged jobseekers.

Although not explicitly referred to as a social inclusion approach, in many respects, the CL model applies social inclusion principles to the delivery of social services. Thus the Ministry’s rationale for the CL model acknowledges that ‘many people we serve have a wider range of needs than just the support they get from Work and Income’ (MSD 2009: 2).
The CL model is predicated on the assumption that joining up services which puts the client at the centre of assistance is more efficient and effective for all parties, including clients. The approach allows partnering agencies to work together to address agreed goals with clients within a cooperative relationship. The development of local CL provision is achieved by the Ministry’s facilitating function (active partner) based ‘on trust, integrity and compassion through the recognition of diversity’ to deliver locally relevant, integrated assistance with the focus on the whole person and their family’s situation.

In many respects the underlying principles espoused in the CL model are very similar to several innovative approaches to join up employment assistance attempted in Australia over the past decade, such as the young homeless job seeker trial – YP⁴ and the BSL’s Centre for Work and Learning in Yarra. The important difference is that the NZ strategy for assisting people into work has adopted several core principles that are being applied to reform their universal service system:

- Service delivery based on trust and collaboration rather than control
- Application of social inclusion principles taking a wider view of people and families in need
- Consultative approach to ensure services are relevant to local community needs
- Simplified assessment process that minimises repetition of personal histories by clients.

The CL model is a key part of the implementation of this guiding framework (known as Work matters, people count) to reshape their gateway (comparable to Centrelink functions) to employment assistance and income support. As an integrated approach, the CL is consistent with the key directions for the government’s Work and Income Strategy, including:

- ‘Jobs with a future
- Partnering for results
- Organisational excellence, and
- Value for money’ (MSD 2010)

However, when considering this approach’s potential for replication in Australia, there are some significant differences in both policy settings and program delivery between the two countries that need to be taken into account: these will be briefly mentioned later.

1.3 Origins of Community Links approach

The first iteration of CL took place in Linwood, a suburb of Christchurch, with similar demographics and community profile (social deprivation) as Frankston. Work and Income decided to merge two service centres in close proximity in 2007 for a range of reasons including expiry of leases, significant environmental issues and high numbers of client incidents and poor client satisfaction (55%). A single open plan facility was planned through local consultations with all stakeholders with senior management encouraged to adopt a broader perspective on service delivery with the freedom to try a different approach.

The aim of the Linwood CL is to:

- ‘make access to information and services as easy as possible for people
- create a place where community groups and public sector organisations can work together to support people in need, and’
deliver an integrated service response for people with complex needs in a more coordinated and seamless way." (MSD 2009:4)

Linwood CL opened in February 2008 and is still very much a work in progress according to those I interviewed. The first phase was to merge the 2 former Work and Income Centres with a combined client base of 7,500 people and to gain stakeholder commitment to the new approach. The second phase has been to develop the integrated model and to refine governance arrangements for both the facility and the service delivery model. In addition, the collaborative approach has led to a range of local community initiatives to address agreed priorities, such as health and housing open days.

The Linwood CL was chosen for a site visit because it was the first to be developed and thus it was hoped to obtain a more reflective and well-informed assessment of its strengths and weaknesses from a selection of stakeholders. It is worth noting that CL, the longest running centre, has been operating for 2 years at Linwood, limiting a solid evidence base on its benefits.

Despite the limited evidence base on hard outcomes for clients, the NZ Government through MSD is committed to the CL model being rolled out across Work and Income Centres nationally with priority placed on areas of high social deprivation. At present there are 23 CL centres most of which are less than one year old. A total of 50 CL centres will be operational by the end of 2010.

1.4 Political and economic context

It is important to take into account the substantial differences in New Zealand’s political situation, their economy, social make up and policy settings that have enabled the CL approach to be trialled and subsequently adopted as a core component of their universal work and income support system.

Australian circumstances in the above areas may act to constrain a pure test of the CL approach and pose particular challenges for both Centrelink and partnering (co-located) agencies to deliver an effective and efficient integrated service to disadvantaged job seekers.

1) Policy settings for income support and employment assistance: NZ now has a conservative national government which is undertaking a review of welfare support policy settings. This government has followed a period of socially progressive government over the past decade which established the current Ministry of Social Development as a merged portfolio covering employment assistance, income support, children and family services and community services. It should be remembered that NZ is about the size of Victoria in population but with more diverse and disparate regions. Government arrangements for social services were founded on a single integrated Ministry at a national level, but with strong regional administrative arrangements reflecting the level of diversity across both islands.

At about the same time in the 90’s, the Howard government introduced the Job Network in Australia, separating income support assessment and provision from employment assistance through the creation of Centrelink and the contracting out of employment services through a network of not for profit and commercial providers under a transactional model. NZ has not followed this path.
In part this may be linked to a stronger local community participatory approach to services associated with the influence of the Maori community that has sought genuine consultation and dialogue in shaping policies. The commitment to grass roots consultation, a single ministerial portfolio and a strong commitment to public delivery of core welfare support services provided the catalyst for the CL approach to be trialled and expanded in NZ.

2) **Impact of the GfC in NZ:** Prior to the downturn NZ had revitalised its economy with strong growth paralleling Australia’s to the extent that unemployment was at record low levels of about 16,000. However, NZ has fared far worse than Australia with unemployment reaching over 60,000 at its peak. This has resulted in a number of targeted interventions to support particular groups, especially young adults through job creation and subsidy programs:

- Community Max – a wage subsidy (6 months) program for young people to help complete community projects.
- Straight 2 Work – a pre-employment training program targeted to industry partners to gain skills for specific industry/sector needs
- Job Ops – 6 month placements for low skilled young people taken up by b employers through a one off subsidy of NZ$5,000.
- Working for Families Tax Credits – a combination of family tax credits (paid regardless of source of income) and in-work tax credits (for families who already work a minimum number of hours).

The effectiveness of these programs is leading to policy reforms under the new Key Government under its *Future Focus* reform agenda now being developed. An important element of Work and Income assistance at service centres has been the coordination at a local level of case manager functions with the jobs broker role in proactively seeking work opportunities for clients, often utilising the above program resources.

3) **Learnings about policy outcomes from Australia:** Senior national managers offered their perspective on Australian policy reforms over the past 15 years including portfolio and departmental restructuring, the work first strategy, the separation of income support through Centrelink and employment assistance, the privatised approach to service delivery and the assessment or streaming strategy (JSCI and JCA). The Deputy Chief Executive (Patricia Reade), Work and Income specifically mentioned that Australia had overcooked the assessment process seeking to stream income support clients according to level of disadvantage. They also were discouraged (albeit under the previous government) from separating income support provision from employment assistance. Rather they have maintained and strengthened an integrated approach that puts the emphasis on finding a job over the provision of benefits.

In summary, this brief assessment of the NZ circumstances in which CL has evolved suggests that the philosophical approach to public services delivery and the underlying culture of doing business, in part reflecting the commitment to Maori participation, have supported a more collaborative and trust based policy environment. This is clearly articulated in the latest Work and Income strategic plan *Work matters, people count* (MSD 2009b).
In contrast, the separation of portfolios and functions in Australia, the extra level of government, the entrenched competitive culture created by the privatised, compliance-centred model for employment assistance (including assessment of work capacity (JCA)), narrowly focussed on short term outcomes, have limited collaboration and sharing of resources – particularly for those job seekers with complex or multiple barriers to work. These challenges will need to be faced if the adaptation of the CL model is to be fully replicated in Australian Centrelink CSC’s – that is, through the delivery of an integrated service response that is client-centred rather than merely a co-location of service providers.

2 The Community Link model

‘He aha te mea nui? He tangata, he tangata, he tangata’
(What is the most important thing? It is people, it is people, it is people)

2.1 Principles

The strap line for the CL model (shown above) clearly encapsulates the underlying principle for client-centred services delivered by the Ministry of Social Development in NZ.

The CL approach seeks to ‘encourage a common vision, common language, a common sense and common ground’ in the delivery of a range of government and non-government services in the community (Linwood CL 2010). The orientation and induction kit for new partner providers at Linwood describes the approach as:

- ‘preserving a strong client/Whanau focus – working with individuals and their families to make a positive difference in their lives
- valuing the diversity of expertise and working styles being brought together through the partnership
- understanding what each other is doing and why
- sharing best practice to create strengths based and seamless processes – whilst we all have our core business expectations, we recognise that through CL we can utilise expertise and resources from a range of agencies in a more efficient and effective way to achieve better results for all concerned (client, service provider, community).’ (Linwood CL 2010: 4)

Although the CL approach is a work in progress, the learnings from its origins at Linwood are being applied through the development of resources, tools, IT capacity and governance arrangements to enable the transition from aspiration of the core principles into a practice culture at the service centres.

There are a number of interacting aims and ideals that set the cultural tone for partnering providers sharing the service centre facilities with the core Work and Income staff:
'Our place is now your place
We aim to share time, resources, strategies and information
CL has a governance structure that ensures the community informs its operations
People are at the centre of CL
CL will adapt to meet the needs of individuals, their families and communities
CL will be community hubs
People should only have to tell their story once at a CL
CLs are not designed to have a one size fits all approach.' (op cit: 5)

2.2 Development and implementation

The governance arrangements and operational processes have been established in each of the CL centres to reflect the above guiding principles. However it was acknowledged in discussion that the model is still evolving and in fact national managers are supportive of adaptation of the approach to suit local community needs and decisions. Development and implementation of a CL in a Work & Income centre is managed by the Regional Commissioner for Social Development. The initial development and approval for a new CL is undertaken through a Work & Income steering group in consultation with the local Service Centre Management team.

The key to the model’s successful implementation according to the feedback I received in Linwood has been the consultation stage with the local community – in particular the not for profit providers – to build a resilient working relationship based on shared commitment to focus on client needs. In the first instance, agreement on priority needs groups in the local community was a critical first step to determining the range and type of services to be located in CL centres. It was apparent that it has taken some time to ‘bed down’ agreed procedures for ‘sharing’ clients both in terms of use of facilities and case management. For all providers (government and non-government) a commitment to relinquish control of a client and to use resources flexibly to achieve client goals outside their usual domain required cultural change.

There are several critical components that have enabled the approach to work effectively at Linwood:

- Personal characteristics and leadership of the Work & Income Centre Manager to engage well with community partners
- Commitment of partnering agencies to collaborate in a new way of working (challenge for service staff to adapt)
- Development of a Charter that is signed by all partners
- A governance structure that shares decision making through a broad management group and a provider practitioner group
- Sharing of information to deliver an integrated and responsive support to disadvantaged job seekers with clear client consent procedures
- Flexible use of Work & Income staff resources to ensure a client centred service is delivered (eg reception and client waiting time management)
- Development of clear documentation setting out expectations, procedures and data management for partnering agencies.
2.3 Facilities

The Linwood CL centre appears very similar in lay out to a typical Centrelink CSC in most respects. Most of the footprint is devoted to open plan work stations with a central area set aside for use by the range of community and government service providers. Those who have a daily presence, such as Housing New Zealand, have a permanent work station. Other providers who attend for rostered periods can use any of the work stations available on a particular day.

A single reception desk faces the entrance with all clients and visitors reporting there in the first instance to see any workers. Those clients with appointments are collected by their case worker from reception.

It is standard policy for a security presence to be at all centres during opening hours – the security guard (outsourced to a private firm) was clearly visible at all my visits. CCTV is also operational at all centres.

CL centres include a number of interview rooms, a self help job search centre with computers, newspapers, and job adverts, etc, and the usual staff and operational facilities. A seminar area near the self help facility is used to provide group training and information sessions to job seekers.

A separate entrance, accessible out of hours, leads to a number of meeting rooms that are available for local community or non-partnering organisations to use. Examples of use at Linwood include parental support groups, education and homework clubs, blood bank service, etc. The intention is to create the impression that the CL is a community resource. Badging of the centre is Community Link – not the government department title (Work and Income or Ministry of Social Development), and the names of partnering agencies are listed at the entrance. The intent of this signage is to ‘de-badge’ the role of the central government.

A common staff area (kitchen and dining area) supports the mixing of government and community staff to facilitate stronger relationships and team approach to supporting clients.

The model incorporates a commitment by MSD to share resources including the above core facilities but also computers with printer access, broadband internet and telephones. All services are provided to partnering agencies free of charge.

In addition to the single receptionist function and appointments manager, a new position of Interagency Facilitator commenced last year as the number of partner providers has grown. The primary role of this position is to develop specific joint initiatives between Work and Income staff and partner providers to strengthen collaboration and build connections into the local community through targeted campaigns. Three topics have been selected to date: affordable, good quality and sustainable housing options; promotion of health and well-being; and positive parenting, lifelong learning and anti-violence in families. A Housing Expo, a significant local community event, was held in 2009 to raise awareness of the centre in the community and with a broader range of organisations as a welcoming community resource.
**Staffing at Linwood**

Comparisons about levels of resources to assist clients with income support and employment assistance through Work & Income in NZ and our Centrelink and JSA provision are difficult and beyond the scope of this visit. However, it is worth noting that at Linwood the customer base is approximately 7,400 clients at any one time. Because of the demographics of the area in Christchurch, nearly half of the client base are on sickness benefits or disability pension. They represent a high needs group with greater levels of ‘transactions’ and increased volatility.

With the large client base, the effective aggregate staff to client ratio of 1: 200 provides 2 Service Centre Managers (based on a 1:20 manager to staff requirement). The allocation of case workers between employment assistance and income support functions appears to be the call of local management with a stronger role in NZ by a regional ‘commissioner’ for social development. This local assessment at Linwood has enabled a more responsive and flexible service delivery with a focus on ‘frequent flyers’ through the appointment coordinating function, the interagency facilitator, and reduced case loads (1:10) for clients with complex issues (Tier 3) that are the focus of the CL model. The 2 centre managers, who had a complementary set of skills and capabilities, were seen as a particular strength at Linwood.

2.4 Client entry

Consistent with income support and employment assistance both in UK and Australia, policies are in place in NZ to encourage first contact ‘off site’ with CL via telephone or internet. CL centres have an open door policy however for new applicants or those in crisis. Initial assessment of circumstances leads to an appointment for a face to face interview with a Work and Income case worker, claimed to occur within one week unless urgent (same day commitment).

On arrival for appointment the client reports to reception. Proactive management of waiting times for those without appointments (crisis circumstances or new applicants) is undertaken. If the client queue is likely to result in a waiting time beyond 30 minutes, a designated staff person is assigned to respond to client needs to reduce the queue and short waiting times. Similarly clients in crisis are fast tracked to a case worker.

When Linwood first opened, a standard appointment time of 30 minutes was used to schedule clients. This has been discontinued following review by the Provider Practitioner Group – with open ended appointments now scheduled. This was considered important to reflect the commitment to be ‘client centred’. Rather than having to make a second follow up time for the client, the focus is completing assessment and agreeing a case plan at the first interview. In practice if an individual client interview overlaps a subsequent appoint time, another case worker is assigned the waiting client through the reception process. Appointment management and the reception role were viewed as critical centre functions.

To overcome the rigidity of the fixed 30 minute appointment schedule, Work & Income reengineered the on-line appointment system to enable a pooled approach for case workers to accept new appointments (on-line calendar).
The initial interview is framed to be informal and unstructured with minimal or no reliance on a computer screen. A series of questions are used to develop a whole of life assessment of the client’s circumstances covering:

i. Employment  
ii. Housing  
iii. Budgeting  
iv. Health  
v. Children  
vi. Parenting, and  
vii. Child health

As CL has been extended as a program reform, an electronic version of his screening tool with weighted responses has been introduced as part of IT infrastructure.

However, the interview process aims to build confidence in the client on the premise that the CL centre is there to help with their problems. The screening tool was developed by partner agencies and as is evident from the range of circumstances include, this approach is applying a social inclusion lens to the initial assessment process.

On the basis of the assessment, a facilitated referral will be made with the most appropriate case worker from one of the partner provider agencies. Thus if the client is heavily in debt and about to be evicted from their housing, the tenancy/housing assistance worker and financial aid worker will be connected into the client – immediately where possible – or an appointment is made on the system within 2 days, unless more urgent.

The aim of the interview is to engage the client, ensure disclosure of all relevant factors or problems, and gain their confidence through a positive supportive manner and through offering something concrete to address their needs.

On subsequent visits to the centre, clients have an appointment made directly with the key case manager. However, clients may also be seen off-site if more appropriate.

### 2.5 Streaming of clients

The CL screening tool as outlined above is used to identify client needs and make a rapid connection with all relevant services. As part of the extension of the CL model across Work and Income sites, a more sophisticated articulation of the screening process has been developed in which clients are grouped into 3 tiers. This contrasts with the 4 streams of assistance available in JSA plus the Work experience phase. In the simpler NZ model, no time limit is placed on case management or assistance provided as the core services of employment assistance and income support provision are government programs and the majority of community partners are *block or grant funded*. 


Table 1: Community Link Screening and Service Provision

<table>
<thead>
<tr>
<th>Tier</th>
<th>Client need</th>
<th>Level/intensity of support</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 1</td>
<td>Single service transaction</td>
<td>One off assistance and advice focussed on self help service</td>
<td>Assessment</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Core business transactions</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Online applications</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Self managed E-services</td>
</tr>
<tr>
<td>Tier 2</td>
<td>Life event impacting on economic participation or family resilience</td>
<td>Assistance to resolve issue and prevent escalation</td>
<td>Facilitated access to self help facilities</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Advice, information and connection to other services</td>
<td>Direct referral to other services</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Job broker support</td>
</tr>
<tr>
<td>Tier 3</td>
<td>Continual cycle of situational chaos</td>
<td>Integrated service response</td>
<td>Case management through multi-agency planning and service coordination</td>
</tr>
</tbody>
</table>

Adapted from Linwood Community Link (2010)

In an average month at Linwood, between 300-350 clients are screened using this approach with about 15-20% having multiple or complex issues in their lives requiring intensive support through the share case management model. From a client base of about 7,400 it was reported that 15% or 1,100 people have been assessed and engaged in the Community Link service model.

2.6 Case management (Integrated Service Response)

The evolving model of streamed assistance is essentially a triaged approach using a simpler tool compared to the JSCI to determine the level of assistance. Initially the integrated service response (ISR) started out as a separate program initiative aimed at families with complex needs or barriers. More recently with the extension of the CL model across Work & Income centres, the ISR approach to case management is being rolled into the Tier 3 case management approach of CL. This makes sense as the core principles of the two approaches are identical in the sense of placing the client at the centre of assistance which is delivered through a shared and well coordinated ‘wrap around’ case management approach. The main distinction seems to be that CL also includes the collocation of assistance from specialist providers.

Under the integrated service response, the approximate Work and Income case worker client ratio is 1:10, although in practice staff suggested this is somewhat higher taking into account a proportion of ‘sleeper’ clients. When this effort is coupled with partner provider casework support, it is clear that an intensive level of assistance is available to offer meaningful help to resolve client barriers and crises in a more timely and response way.

Work and Income staff have a strong professional development and training provision as it was considered important to change the pre-existing culture to develop a more engaging and empathetic service based on understanding of multiply disadvantaged job seekers and income support recipients. This has clearly helped in the shared case management role through better relationships with partnering provider staff.
The Work and Income case manager is responsible for the initial assessment and engagement with the client. During the appointment, the case manager determines eligibility and entitlement for government assistance. At any stage the case manager may decide that the client is suitable for the CL screening process to be completed. Assuming an agreed plan of action is established to firstly address immediate needs, the case manager obtains client consent to enable the relevant partner case workers to access the client information. An immediate facilitated referral to this worker is then undertaken – the case manager has access to rosters for each provider agency to check whether the worker is currently available. If not an appointment is made on the shared electronic calendar for the next available time.

The Work & Income case manager is the ‘lead’ person responsible for client documentation (case file notes), review and progress reporting. While there is no formal joint case monitoring or review process, collaboration is undertaken through informal consultations and joint meetings with clients.

Each partner provider continues to maintain their own case files on shared clients due partly to the unresolved challenge of implementing a shared IT system.

My impression from the brief site visit is that case support and review is a relatively informal process in practice relying on a trusting relationship between individual workers to undertake agreed actions with or on behalf of the shared client. This collaborative relationship appears to have taken some time to develop relying on the commitment, goodwill and leadership of the CL centre managers.

Range of core services available at Work & Income centres (and at CL):

In addition to the case manager role, Work and Income centres have Job Brokers (equivalent to JSA workers) who proactively seek jobs for the centre’s list of job seekers. Job brokers spend 70% of their time (based on Porirua centre) ‘on the road’ seeking out potential employers and businesses likely to hire their client group. Tier 1 job seekers list their CV’s on line, with employers able to make a direct connection to job seekers on line based on selected CV information made available. The aim of the job search and matching service is to encourage self help by both job seekers and employers. This enables the job brokers to focus on proactive marketing disadvantaged job seekers to prospective local employers. The Job broker role includes post placement follow up for both employer and new employee (up to 26 weeks).

At Porirua, soon to become a CL, they have had a public health nurse (0.6EFT) through a funding arrangement with the Health Department for the past 4 years. This role acts as a key broker for case workers to facilitate the most appropriate health service for the client’s needs. The nurse is reported to play a critical secondary consulting function for Work and Income centre staff.

It is worth noting that in the early development of CL, health service collocation was not considered. However the latest roll-out of CL nationally specifically includes health expertise as one of the core provider capabilities.
Range of partner services available at CL:

When the Centre first opened in early 2008, only two categories of assistance were collocated at Linwood – Housing NZ and Career Services – in addition to the standard Work and Income assistance. By the end of that year, a diverse suite of services were operating from the Centre:

- Resettlement Services
- Housing NZ & Department of Building & Housing
- Tenants Protection Association
- Community Probation
- Career Services
- Sole Women as Parents
- Catholic Social Services
- Salvation Army Oasis Gambling Centre
- Workwise
- Workbridge

During the past year, it was reported that 3 not-for-profit service providers have withdrawn from CL:

i. Supergrans – a financial counselling service
ii. Kingdom Resources – provide budgeting advice
iii. Home and Family – provided on site family counselling

In each instance, the providers had been overwhelmed with referrals and were unable to respond within their limited resources. If their resource constraints could be addressed, they were reported as being interested in returning to the Centre. However, it was observed that part of the increased referral numbers may reflect the referrer’s misunderstanding of service provider capacity and client needs. For example, for a repeat client seeking ER, the perception may be that financial budgeting/counselling is needed; but there may well be underlying issues leading to financial crisis and indebtedness which need to be explored first.

This experience was cited as an important lesson for new partners who are considering joining CL. Capacity to respond flexibly and immediately to client referrals is a critical element of a successful shared case management approach. For those smaller providers with tight or inflexible funding and staffing, meeting this ‘obligation’ posed a significant challenge.

A key part of the decision analysis for joining the CL model should include an assessment of likely demand for the particular type of service offered. As clients are encouraged to disclose their underlying issues to the case manager, this would increase the demand for services at that time. My impression from Linwood was that the arrival of CL approach has altered the flow and demand patterns of clients with ongoing or episodic issues – such as debt problems – across local community services. This should not be unexpected as the intention is to encourage client disclosure of their needs/barriers to work so as to provide an immediate well coordinated and holistic case plan. If effective, it should in fact reduce episodic or repeat demand for help presented at other services and agencies in the local area. In the Australian trial sites we may anticipate a redistribution effect of presenting demand by the target population groups. Assessment by potential partner providers (including BSL) of this effect in terms of their service capacity in respect of the two target groups of young adults and long term unemployed is recommended.
2.7 Client consent & privacy

As a condition of participation in the CL, all agencies must comply with the NZ privacy legislation and commit to strict confidentiality at the centre. The legal entity for CL (MSD) has overall responsibility for the operations of the facility, including OH&S and safety of information.

Partnering case workers do not have access to Work and Income data systems on clients. Work and Income clients are asked to allow confidential information to be shared with relevant partner agency staff only. This takes the form of informed written consent and should be linked to their action plan as discussed with their Work & Income case manager. Each partnering agency is also responsible for obtaining informed consent from their client prior to discussion with a third party provider outside the CL.

Clients are able to request copies of their case files and they are able to withdraw their consent for sharing of information between agencies at any time.

Work and Income clients are entitled to have a support person or advocate accompany them at appointments in CL.

2.8 OH&S

The government department (MSD) as legal entity for CL facilities is responsible for providing a safe and healthy environment for all parties, including partnering agencies. An OH&S Policy Statement is in place as part of the operational procedures. There is also an OH&S Committee to oversight hazard or risk management and monitor incidents, systems, etc. A partner agency representative position is allocated to this committee to raise particular concerns for co-located providers.

Partner agencies are expected to fully comply with the OH&S provisions, such as reporting of accidents and near misses.

As mentioned above, each CL has a security plan which includes controlled access to the facility (partner agencies are given an access card/key), security guard presence at all times, CCTV installation, and duress alarms to ensure a safe environment for all. Work & Income senior management stressed the importance placed on safety and security issues due to the multi-agency aspect of the CL model.

2.9 Governance & communications

All partner agencies in CL have to commit to the Charter and agree to abide to the operational principles which stress a shared responsibility and commitment to the key principles for the approach.

As part of the induction process for new partner agencies, a comprehensive orientation kit is provided which sets out the CL approach, the Charter, the resources and facilities at the centre, safety, security, emergency and OH&S provisions and policies.
The main entity for planning and implementing service delivered is the CL management group. At Linwood, 3 representatives from the non-government sector are on this Group. The CL Management Group reports to its governing body the local region’s interagency social policy network. This arrangement reflects the strong emphasis on community consultation and participation in the development of CL in NZ.

In addition there is a Provider Practitioner Group as the consultative working group to reflect on service delivery at CL, encourage sharing of good practice and identify improvements in operations, for example responding to emerging client needs for specialist services. This group meets monthly at Linwood (originally quarterly) and is viewed as an important mechanism for identifying emerging issues and reaching agreement on changes required. As an example, the location of the work stations used by the outside provider workers has proved problematic for a range of reasons – client flow from reception, ease of shared case management, perceived lack of privacy for clients and noise levels in the large open plan environment. The provider practitioner group enables ongoing discussion to resolve these sorts of issues.

These governance structures are in addition to pre-existing departmental management processes and arrangements.

As part of the communications strategy, a Community Link ‘Core Script’ has been developed to aid understanding of the approach through a range of agreed messages and FAQ’s aimed at all stakeholders including prospective clients.

A quarterly report is distributed by the Linwood CL Management Group as part of its accountability to the Christchurch Social Policy Interagency Network (CSPIN). In 2009, the action plan was developed in 3 strategic areas:

1) ‘An environment, protocols, processes and systems that facilitate single point collaborative service delivery;

2) Improved connection between people in need and services most appropriate to help; and

3) Working together to create positive change for individuals, their families and the community.’ (Linwood Community Link Quarterly Update to CSPIN: 2)

An annual report is compiled by the Regional Manager in Work & Income to advise on performance of CL, including feedback from both providers and service users to inform ongoing development of the model.
3 Benefits and outcomes

Anecdotal feedback and focus group material have been used by departmental managers to document the following significant changes over the first 2 years of operations of the Linwood CL:

- ‘greater ability to support clients through delivery of comprehensive services that are joined up;
- more of a total client focus, with greater recognition of the value of working across sectors;
- quite a turnaround in the views of staff who were not traditionally used to working so closely with others;
- networking has improved, and face to face interaction has increased because staff from different agencies is located in a common workspace; and trust in how different people can assist has developed at all levels.’ (Community Link 2010:6)

It should be noted that at the time of writing, no independent or robust evaluation of the CL model has been published to enable an objective assessment of the benefits and achievements of the approach. Internal departmental interim evaluation reports have been undertaken to guide policy reform that is supporting the expansion of the approach across Work and Income sites over the next year. The Phase 1 report documented findings from a combination of client consultations (subjective indicators via telephone interviews) and limited administrative data with a level of comparison between Community Link sites and other Work & Income sites (MSD 2009c).

Client benefits

The primary data collection from Linwood clients in 2009 has been reported as showing that client satisfaction rates have improved ‘significantly’ and that outcomes have improved for individuals and their families. Senior managers reported reduced demand from repeat clients in crisis and shorter spells on unemployment for disadvantaged job seekers. Staff are reported as taking a more holistic perspective on client needs. Client feedback specifically found that they:

- feel better about the service,
- are satisfied with the responsiveness of the Centre (time to be seen)
- case managers understand their needs
- are more likely to be referred to other services, and
- most or all of their needs are being met.

Community Agencies (partner providers)

Feedback from partnering providers (NfPs) has indicated a range of benefits in joining the CL model of delivery:

- improved accessibility for both their clients and staff to resources and colleague agencies’
- improved visibility and profile of their agency and services within the local community’
- increase in client base
- reduce the repeat demand from clients with multiple issues over time
- stronger focus on early intervention with their clients
- potential to strengthen skills and knowledge of staff
- improved access to government services’ and
- more effective shared support to ‘frequent flyer’ clients.

A number of challenges have been identified by the NfP partnering agencies (reported by CL or though my discussions) which act as potential disincentives to ongoing participation in CL for some – as evident by the experience to date of a small number of agencies withdrawing from CL at Linwood. These challenges are not applicable to all agencies, but include:

- lack of organizational capacity (especially managing staff from a distance),
- lack of perceived return on investment,
- co-located environment not a good ‘fit’ for agency strategy or service delivery focus,
- concern that the model enables some clients to jump the queue,
- level of referrals and demand for services cannot be met, and
- cultural change or adaptation required to share clients.

A key point stressed on a number of occasions was that it took some time for both Work & Income staff and collocated provider workers to develop a collaborative and trusting relationship and to see the potential benefits for clients. As the relationships have developed a stronger commitment to strive for what essentially are the same outcomes on behalf of clients in common has evolved. Those workers I talked with claimed that the culture of engagement with clients is now different – ‘sitting beside the client’ was a term used to describe this change.

This has resulted in a more individualised service through a willingness for workers from different agencies (government and non-government) to work together; an acceptance of reduced ‘control’ or ownership of clients; and greater flexibility in valuing alternative ways of working.

Not for profit providers also believe that the CL approach has increased acknowledgement (by all agencies) of the importance of acting in a more holistic way with clients. This has meant that case plans include underlying factors or barriers faced by clients and their families. The presence of a service responding to problem gambling was an example of this broader perspective. This has led to a wider range of outcomes being considered relevant in reporting client progress than previously (compares to ‘social outcomes’ concept in Australia).

The evaluation pointed to the benefits of using a simple screening tool that ‘provides a formal mechanism by which client needs can be identified’ (see section 2.4 above). Its use in pointing to underlying issues faced by clients across all domains assists in the shared case management of clients (MSD 2009c).
4 Conclusions

The combination of site visits and discussions with senior policy and operational managers, albeit time constrained, has provided a valuable insight into the Community Links model in NZ. Although a robust evidence base has yet to be assessed for hard outcomes of their approach, the range of stakeholders, including government and not-for-profit providers, strongly supported the CL approach. The feedback obtained during the visit indicates that the principles and operational elements of CL are proving effective in enabling a far more personalised and ‘client centred’ form of assistance to highly disadvantaged job seekers and income support recipients.

In considering replication in the Australian policy setting, the fundamentally different environment here to that in which CL has evolved and thrived in NZ must be considered if it is to be successful in Frankston. In essence, Australia has implemented a ‘control’ model for employment assistance with a privatized, contractual arrangement based on tightly defined outcomes. The willingness and capacity to collaborate and share ‘clients’ with other providers has been eroded. This will challenge participating agencies and their case workers if the NZ CL model is to be fully tested. The sharing of clients and cooperative approach to assistance posed a challenge for NZ partner providers – I would suggest this will pose a bigger challenge in Frankston.

From the BSL perspective, the principles of the CL are very similar to those we have espoused and supported through a range of our service model innovations, such as our ILM model of transitional employment assistance, YP³ and the new Centre for Work and Learning in Yarra.

One of the key success factors of CL has been the relatively soft touch from central government managers that has allowed a strong consultative and collaborative approach to evolve over the 2 years. This has enabled a trusting relationship to develop through devolving responsibility to government staff at a local level. This approach has been critical to support a collaborative service delivery for clients with complex needs, that goes beyond a co-location of selected provider agencies with Centrelink.

The initial development of CL focused on the four main program domains of income support, employment assistance – both core public services by Work and Income – with financial assistance (budgeting) and housing. As CL is being rolled out nationally, a broader suite of programs and services are integrated under the single facility. These include education, youth services, primary health and justice. The specific array of services on offer is controlled at the local level following consultations in the community to identify local priorities within these domains. One of the factors reported in discussions at Linwood was the 4-5 month developmental period for community consultation.

This process of bottom-up engagement and consultation is being fast tracked in the development of the Frankston pilot and may put at risk the trial of a collaborative approach, in the absence of a commitment to a period of partnership building once the initial sign-up of participating agencies is completed.
It is also highly recommended that a number of support mechanisms and review opportunities are implemented as part of the pilot, including:

- Resourcing of an interagency facilitator to ensure the smooth running of the CL model between Centrelink and partner providers;

- Management group that includes not-for-profit representation and includes in its terms of reference a commitment to obtain feedback from all stakeholders to enable proactive review of all aspects of the CL pilot;

- Provider Practitioner Group that meets monthly to respond to emerging operational matters;

- Development of an agreed Charter for the CL that sets out principles of operation;

- Development of an orientation and operational procedures manual that clearly establishes processes and expectations across all operational matters, such as OH&S, safety and privacy;

- Implementation of an evaluation and reporting framework that reflects the principles and philosophy of the CL model.

**Success factors**

In addition to the above recommended mechanisms, in a presentation by the Ministry of Social Development, 4 critical success factors have been highlighted from the Linwood CL experience:

- ‘It’s all about partnership and effective relationships;

- Need to include service provider and consumer input/involvement in the early stages of development;

- Developing a shared understanding of the purpose, what people really need, and the resource and expertise available for each partner; and

- The model must be flexible enough to respond to the specific needs of the community it services.’ (MSD 2010: 9)

In more specific terms, the following elements will be essential to maximise the pilots’ prospects for success:

i. Strong leadership from DEEWR and Centrelink that resources & supports engagement and collaboration of all participating providers on an equitable and inclusive basis;

ii. Development of an agreed Charter that underpins a commitment of all providers to change the way they do business;

iii. Adequate time, proactive communications and review processes to ensure emerging concerns are able to be voiced and addressed as a partnership;
iv. A willingness and commitment by not-for-profit providers, including BSL, to reallocate resources to flexibly respond to demand for assistance as part of the shared case management model.

On the basis of my brief visit to NZ, BSL should be an active partner in the CL Frankston pilot. The principles are consistent with the philosophy and policy positions advocated through much of our research and innovative service delivery. The approach offers a window to influence Federal Government policies for further progressive reform that focuses on better outcomes for highly disadvantaged job seekers and income support recipients. The feedback from NZ participants indicates that the approach can achieve significant benefits for all stakeholders.

However, the successful implementation of the approach, if configured by DEEWR and Centrelink consistent with the NZ approach, will require cultural change for our Frankston service and staff involved in the pilot. Essentially, at its heart the approach puts the client at the centre of support – this entails a shift from the ‘products offered’ provision of assistance by partner providers.
References

Community Link 2010 *Welcome to Community Link*, Orientation and Induction Kit, Linwood Community Link, Christchurch.

Linwood Community Link 2009 *Quarterly Update to CSPIN*, March 2009, Linwood Community Link, Christchurch


## Appendix 1  Summary of visit schedule

<table>
<thead>
<tr>
<th>Date</th>
<th>Site</th>
<th>Attendees</th>
<th>Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 May</td>
<td>Linwood Community Link, Christchurch</td>
<td>Michelle Mitchell, Regional Commissioner for Social Development</td>
<td>Site visit; Discussions on development and operations of Community Link, including community agency perspectives (Tenancy Protection, Salvation Army)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Wendy Rabbidge, Social Development Manager</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Wyn Jarvis, Service Centre Manager</td>
<td></td>
</tr>
<tr>
<td>5 May</td>
<td>Aranui Heartlands, Christchurch</td>
<td>Rachel Fonotia</td>
<td>Community development one stop shop for children’s &amp; family services in a public housing neighbourhood (precursor of CL approach)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Lynette Ebborn</td>
<td></td>
</tr>
<tr>
<td>6 May</td>
<td>Work &amp; Income, Wellington</td>
<td>Mike Smith, General Manager</td>
<td>General discussion on work and income support policy directions with senior staff</td>
</tr>
<tr>
<td>6 May</td>
<td>Work &amp; Income Service Centre, Porirua</td>
<td>Cathy Ferguson, Branch Manager</td>
<td>Site visit; Discussions on operations, including Job search assistance and planned implementation of CL model in 2010</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Jenni Ralph, Service Centre Manager</td>
<td></td>
</tr>
<tr>
<td>6 May</td>
<td>Work &amp; Income, Wellington</td>
<td>Amy Allison, National Manager Strategy &amp; Development</td>
<td>Presentation on Work Matters People Count strategy; and Community Link</td>
</tr>
<tr>
<td></td>
<td></td>
<td>David Dougherty, Senior Adviser Client Services</td>
<td></td>
</tr>
<tr>
<td>6 May</td>
<td>MSD, Wellington</td>
<td>Dorothy Adams, Manager research &amp; Development</td>
<td>Outcomes measurement of Community Links</td>
</tr>
<tr>
<td>7 May</td>
<td>Work &amp; Income, Wellington</td>
<td>Helen Walter, policy Manager Working Age People’s Policy</td>
<td>Discussion on policy levers and activation measures</td>
</tr>
<tr>
<td>7 May</td>
<td>Youth Development, Wellington</td>
<td>Carl Crafar, General Manager Ministry of Youth Development</td>
<td>Presentation on youth policies and programs</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Lorraine Gittings, Youth Engagement</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Susan Wauchop, Principal Analyst</td>
<td></td>
</tr>
</tbody>
</table>