



Evaluation of the Housing SA Case Work Support Initiative Pilot

(Qualitative Outcomes)

FINAL REPORT

**For the
Department for Families and Communities, Government of
South Australia**

By

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Acronyms

ATSI	Aboriginal and Torres Strait Islander
AHURI	Australian Housing and Urban Research Institute
CAMHS	Child and Adolescent Mental Health Services
CWSI	Case Work Support Initiative
CWAT	Case Work Assessment Tool
DMT	Disruptive Management Team
EI	Early intervention
GP	General Practitioner
HSA	Housing SA
ITS	Intensive Tenancy Support
RAT	Risk Assessment Tool
RFQ	Request for Quotation
SW	Social Worker
TIAS	Tenancy Information and Advocacy Service

Key Terminology

Case Work Assessment Tool/Risk Assessment Tool

The RFQ for the evaluation of the CWSI refers to the assessment tool used as part of the CWSI as the Case Work Assessment Tool. At the more local level, however, this Tool is more commonly referred to as the Risk Assessment Tool and so some comments about the Tool will refer to it as the RAT. We have included references to both titles for the Tool in the text of this report.

Customer (Customer/Client/Tenant)

Customer is the commonly used term for people assisted by Housing SA, including those currently listed on the waiting list. In this report we use the terms customer, client and tenant interchangeably to refer to those people assisted by Housing SA.

Social Worker

Except where otherwise indicated, the term Social Worker in this report refers to those professionals employed under the Case Work Support Initiative.

Request for Quotation or RFQ

Specifically refers to the Request for Quotation (RFQ) for the evaluation of the Case Work Support Initiative.

SUMMARY OF FINDINGS

The overall evaluation of the Case Work Support Initiative pilot program involves both a quantitative and qualitative analysis of the impact and effectiveness of the Initiative. This report, the qualitative analysis, stands in contrast to the inconclusive findings achieved through the analysis of measurable data, presented in the quantitative report. As of May 2011 it can be concluded that the Case Work Support Initiative is an **accepted, welcomed and very much valued** Initiative within the Northern Adelaide Housing SA offices and one that is having a **considerable impact** on the ability of tenants to manage and sustain their tenancies.

The overriding theme underpinning the findings of this evaluation for the vast majority of Housing SA staff and all of the representatives of other service agencies. That is, **the program is an important tool for assisting clients; meeting clients where they are in terms of personal circumstances and resources.** It is an important **tool** for **working with clients to improve their life skills and wellbeing, address circumstances and situations that are known to affect, and will affect, their resources and resilience, economic and social participation (and their social inclusion outcomes) and, ultimately, their ability to manage and sustain their tenancy.** As one Housing SA staff member noted:

Our business is to sustain tenancies so why take away one of the keys?

Based on the perspectives provided through this evaluation, and assessment of findings around the impact of the Case Work Support Initiative pilot by the evaluation team, it would clearly be a shame to see this important and successful Initiative withdrawn from the offices in which it operates. And, the results of this evaluation regarding the impact of the Initiative and its positive outcomes for most of the clients who have been assisted through the program, it seems logical that the program is extended across Greater Adelaide and the State. In doing this, however, careful consideration must be given to the lessons learned from the pilot/demonstration project (as outlined in this report), and explicit attention paid to the requirements for the success (and acceptance) of the program outlined in Box 4.1.

1 INTRODUCTION

1.1 Introduction to the Case Work Support Initiative pilot

This report is a qualitative evaluation of the acceptance and perceived impact of the Case Work Support Initiative; a pilot program introduced within the three Regional Offices in the Northern Adelaide region 'to provide resources and professional support to high needs customers to help sustain their tenancy.'

The evaluation assesses the impact of the Case Work Support Initiative pilot for customers/clients and the service system. It has looked at the Initiative from the perspectives of Housing SA staff, including frontline staff and management, a range of stakeholders involved in the development and refinement of the initiative, as well as those associated with the delivery of the program, and from the perspective of the CWSI team. The discussion in this paper reveals the complexity of needs of customers/clients who have been referred to, and assisted through, the Initiative, as well as the tasks the Case Work Support Initiative Social Workers and Housing SA staff generally are involved with on a daily basis. Overwhelmingly, the evaluation finds that the Case Work Support Initiative is an important tool for assisting clients with sustaining their tenancies.

The Case Work Support Initiative commenced in October 2009 in the Northern Adelaide Region. This region encompasses Housing SA's Elizabeth, Salisbury and Modbury Regional Offices. Initially the program was planned to operate for 12 months, but in April 2010 the program was extended to the 1st of October 2011.

The Case Work Support Initiative began with the employment of two professional staff (Social Workers) in each of the offices within the northern region. Within these offices each Social Worker was attached to a particular team of Housing Officers to support high needs customers to sustain their tenancies. In 2010 the program was extended, with the allocation of a Social Worker to the Eyre and Western Region (comprising the Regional Offices in Whyalla, Port Lincoln and Ceduna). In April 2010 a Supervisor was employed to oversee the Social Worker staff and coordinate the delivery of the program.

1.2 Aim of the pilot Initiative

The role of public housing has changed over the years with an emphasis and focus today on the provision of housing to those in greatest need, including those experiencing homelessness. As well as requiring significant assistance with housing many clients have a range of complex needs (resulting from, for example, poverty, disability, drug and alcohol issues, domestic and family violence, and mental health issues) that can compromise their ability to sustain a tenancy. As a consequence housing management policies and practices have increasingly included mechanisms to assist clients to sustain their tenancies and reduce the chances of tenancy failure and eviction. The Case Work Support Initiative is one such mechanism providing resources and professional support to high needs clients.

As stated in the Request for Quotation (RFQ) for the evaluation of this program

the model...aims to streamline the early identification of tenancies at risk and ensure clients engage with supports to address the underlying issues causing disruptive behaviour and other breaches of their Conditions of Tenancy.

A Case Work Assessment Tool (also known as the Risk Assessment Tool) has also been adopted by the offices involved in this Initiative to assist with the identification of at risk tenancies by providing Housing SA staff with a mechanism for assessing and recording risk

factors across a range of areas known to contribute to instability in personal circumstances and tenancies, for example debt issues, drugs and alcohol, domestic violence, mental health issues.

The Case Work Support Initiative has been funded through the National Partnership Agreement on Homelessness. Through a Memorandum of Administrative Arrangement a number of outcomes and outputs are expected as a result of the Initiative and these desired outcomes and outputs have guided the early intervention work performed by the Social Workers. The direct outputs of the Initiative are to include:

- identification of high risk tenancies and customers with high support needs;
- development of a case plan to address underlying issues contributing to level of risk/need;
- provision of intensive support to complex and high needs clients to obtain and maintain a secure tenancy; and
- consultancy and advisory roles within local Housing SA offices.

If these outputs can be achieved then it is expected that the following outcomes will proceed/follow:

- reduction of tenancy failure;
- increased connection to support services;
- decreased tenancy breaches;
- more appropriate tenancy allocation; and
- increased capacity for tenants to manage and maintain their tenancies.

1.3 Background to the Case Work Support Initiative Pilot

The detailed key responsibilities and tasks of the Social Worker role within Housing SA is outlined in the job description (see Appendix 1). Social Workers have two main roles as part of the Case Work Support Initiative pilot program:

- a) to assess the housing and support needs of clients as part of the housing allocation process; and
- b) to provide guidance and support to existing clients at risk of tenancy failure or who are struggling with sustaining their tenancy.

1.3.1 'New' clients

The priority role for Social Workers is to review a new (or relocating) customer's needs in light of the suitability of the housing available for them as determined by the Housing SA (HSA) Allocations Officer. Social Workers undertake this assessment based on the information available to them on each 'new' client, for example from the Housing Needs Assessment (HNA) completed at the time of their application for housing, as well as other information HSA may have on the client and through an interview with the client. The interview is an important new step in the pre-allocation process, allowing Social Workers to review and update the information provided in the HNA, as well as gaining new and important insights that are or may be of relevance to the client's ability to sustain their tenancy. In terms of this process it is crucially important the Social Workers are able to determine what supports are in place for the client, explore options for support or additional or different support and investigate/assess the suitability of the property being offered to the client (neighbourhood issues, location, design and functionality et cetera) in the light of the information garnered through this process. The Case Work Assessment Tool may (see Appendix 2) also be applied during this interview, collecting additional valuable information about the tenant such as engagement with support services, health concerns, financial

resources et cetera, as well as providing a reference point for follow up and direction of support in future work with the client. It is expected that all of this process is undertaken within a very tight timeframe.

To meet a Key Performance Indicator of Housing SA the pre-allocations process needs to be dealt with/completed in 21 days (inclusive of weekends and public holidays). However, for various reasons this deadline is sometimes exceeded, particularly if the process involves a very complex case and delays are experienced because of locating and/or contacting a client in the first place. The pre-allocations process timeline can also be exceeded if the Social Worker concludes that the property available is inappropriate for the customer or when a customer refuses a property. (Social Workers are also involved with clients if they refuse a property, investigating why this has happened and where justified will discuss reasons with the Allocations Officer to classify the refusal as a withdrawn offer).

The involvement of the Social Worker at the allocation stage is seen as a form of early intervention because it is hoped that through this process the allocated property meets the specific needs of the clients to the greatest extent possible (for example, it is in a suitable area). This process is about –‘getting it right for the customer the first time’.

1.3.2 Existing customers

The other substantive role for Social Workers as part of the Case Work Support Initiative is working with existing customers identified as at risk of tenancy failure, or having or likely to have, difficulties with sustaining their tenancies. These clients are identified through a range of HSA review processes and procedures, including as part of a probationary tenancy review; during an annual home visit; at the time of investigating a complaint about the tenant; or at other times when a Housing Officer becomes aware of an issue that is or may impact upon their tenancy. Referrals to the Social Workers are made by Housing Officers, with the approval of Team Leaders.

Clients are referred to Social Workers for a range of reasons. These include:

- exterior/interior property condition;
- squalor;
- hoarding;
- mental health;
- drug/alcohol dependence;
- disruptive behaviour;
- domestic violence;
- physical health;
- cultural issues;
- neighbour conflict; and
- child protection.

Within this role Social Workers undertake a number of tasks such as: referral and linkages to other groups and services; brokerage (for example of household items and white goods); education (particularly around life skills; counselling (financial and personal), advocacy and case conference with their Housing Officer and other agencies.

Social Workers record the details of all interactions with clients, placing notations on the mainframe computer via a program called *Sharepoint*. This information is accessible by all Housing SA staff. If a case is closed by a Social Worker then Housing Officers or Team Leaders can access the notes and gain an understanding of the customer’s history and the

processes followed by the Social Worker in supporting the client. Notably, while the Social Workers need to record the work undertaken for/with clients through *Sharepoint*, it is important to point out that not all of the work and time committed to/for clients is reflected in these statistical measures.

Figure 1.1 below provides a schematic representation (or Theory of Change Model) of the main steps involved in the two roles undertaken by the Case Work Support Initiative Social Workers. The model highlights the optimum conditions necessary for positive outcomes for customers and ultimately for sustaining tenancies, as well as the key ways of measuring the success of the interventions involved in the Case Work Support Initiative.

1.4 Structure of the Report

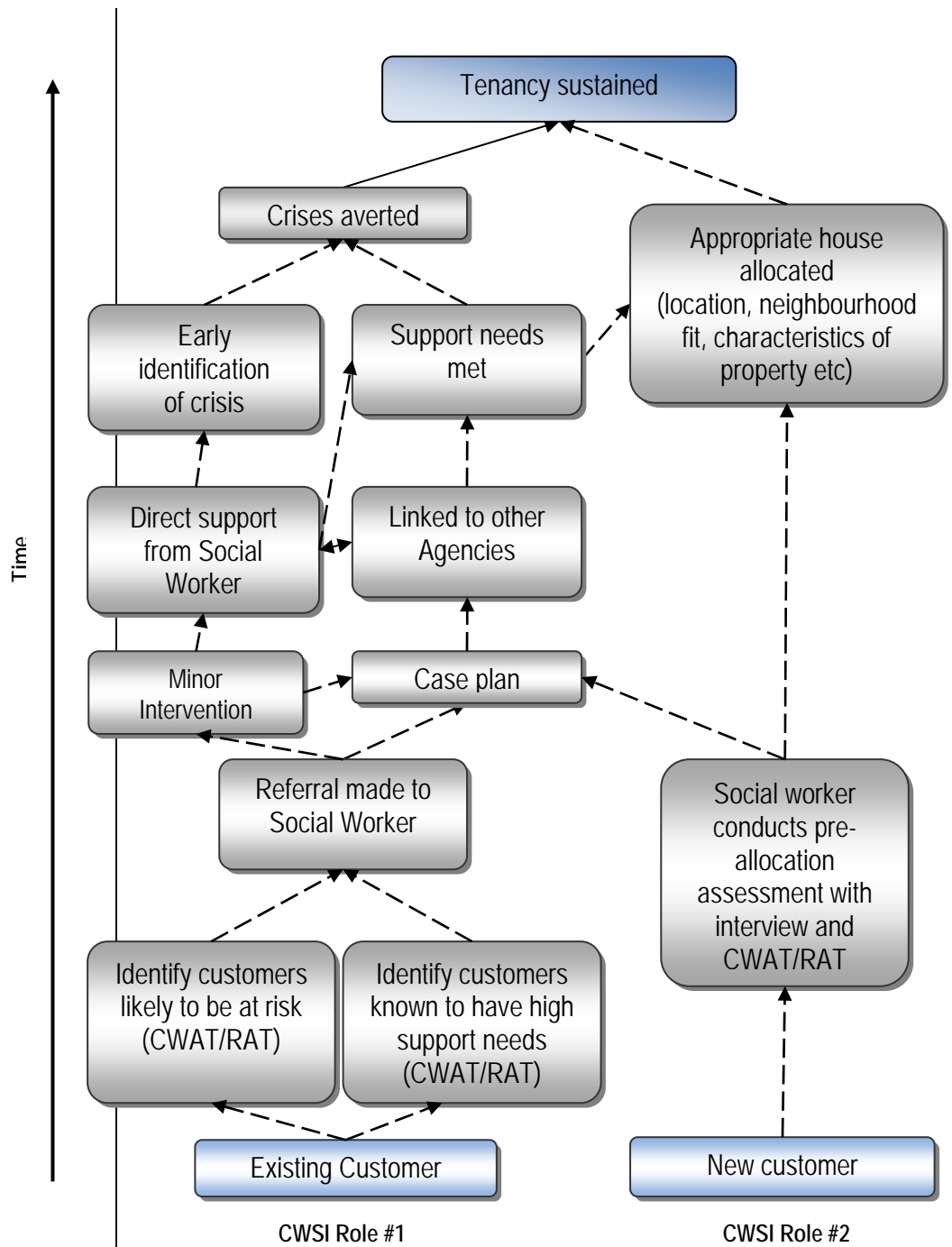
The remaining sections of this document report on the findings of this evaluation around the outcomes of the Initiative. These outcomes have been identified through both an analysis of available statistical data and discussions with a range of stakeholders directly and indirectly associated with the Initiative. Such stakeholders include:

- Housing Officers within HSA offices in the Northern Region;
- Management staff within HSA offices in the region (Team Leaders and Operations Managers);
- Higher level management staff within Housing SA, including in policy and program development;
- Management staff associated with other areas of Housing SA such as the Disruptive Management Team (DMT);
- Staff from Homelessness Strategy;
- Staff from Intensive Tenancy Support;
- Representatives of the key service providers working with Case Work Support Initiative Social Workers (Government and non-government);
- The Manager of the Initiative;
- Social Workers currently employed under the Initiative.

The report is structured as follows. This section (Chapter One) has provided a brief introduction and the background to the Initiative, including the rationale for the program. Section Two outlines the evaluation process used to assess the impact of the Case Work Support Initiative.

Chapter Three discusses the findings of the evaluation, and is structured around the required areas of assessment and investigation specified in the RFQ. The discussion in this chapter captures the thoughts of key stakeholders about the Initiative. Examples of successful and unsuccessful Social Worker involvement with clients are provided at the end of this Chapter, demonstrating the range and complexity of cases Social Workers have been involved with and the strategies and actions that have been used to assist clients. The final section of the report, Chapter Four, provides a brief general discussion of the evaluation findings and provides a table of the optimum conditions/requirements for success of the program into the future, should it be rolled out more broadly.

Figure 1.1: Theory of Change Model Case Work Support Initiative Pilot



Assumptions	Evaluation Measures
Ongoing funding for the initiative	Impact on number of sustained tenancies Impact on debt reduction Improved tenant wellbeing
Other agencies have capacity to provide support SW has capacity to provide direct support	Fewer inappropriate allocation issues Faster re-allocation of properties Meeting target of being vacant for 21 days or less
Customer is willing to engage with SW and other support	Impact on complaints received about a tenant Fewer referrals to DMT/ITS
SW has capacity to take on all referrals	Impact on Housing SA staff Improved practices around supporting tenants – leading to better compliance outcomes
Housing SA Staff willing to refer Early indicators of risk identified Accurate indicators of risk used	Appropriateness and usefulness of Case Work Assessment Tool (also known as Risk Assessment Tool)

2 EVALUATING THE CASE WORK SUPPORT INITIATIVE PILOT

2.1 Evaluation Process

The evaluation of the Case Work Support Initiative comprises two components: a quantitative analysis, using available statistical data; and a qualitative component assessing the impact of the Initiative on and for Housing SA staff, government and community services, as well as for clients (this report). Although the Initiative has been established in the Northern Adelaide Region and Eyre and Western Region of South Australia this evaluation process was to focus on the Northern Adelaide Region only. Discussion of both components of the evaluation, and their specific focus, is provided below, along with discussion of the research methods used for the qualitative component of the evaluation reported in this document.

Ethics approval for the research was granted by both the Department for Families and Communities Ethics Committee and the University of Adelaide Human Research Ethics Committee.

2.1.1 Quantitative Analysis

This part of the evaluation of the Case Work Support Initiative has been conducted by Housing Services Central within Housing SA. The report from this component of the evaluation specifically examines and comments upon statistical outcomes for the Northern Region because of the Initiative, with a particular focus on outcomes for the Housing SA customer. The quantitative evaluation also measures the impact of the CWSI on:

- tenancy related debt levels :
- disruptive tenancy complaints;
- tenancy outcomes;
- maintained tenancies; and
- pre-allocation outcomes.

Importantly, the quantitative analysis component of this evaluation also compares the outcomes (for customers and HSA) within the Northern Region associated with the Case Work Support Initiative with two other metropolitan Adelaide HSA regions: the Southern Region – where the Case Work Assessment Tool is being used but there are no Social Workers; and the Western Region – where there is no CWAT and no Social Workers.

The quantitative analysis examines the aforementioned outcome measures over a 12 month period from January to December 2010 and compared the outcomes with data from the preceding 12 month period: January to December 2009.

Results from the quantitative analysis have been incorporated in this report where appropriate.

2.1.2 Qualitative Analysis

This report provides the outcomes of the qualitative component of the evaluation process for the Case Work Support Initiative. This analysis was commissioned by the funders of the Case Work Support Initiative and assessment of the following issues is provided:

- the nature of the social worker role and clarity of lines of responsibility within Housing SA offices;
- utility and impact of the Case Work Assessment Tool (RAT);

- impact of the Case Work Support Initiative on Housing SA staff – indicated by measures such as knowledge levels regarding early intervention, support provided by social workers, impact on workload, time and stress levels;
- impact on knowledge of early intervention, pre-allocation and exiting cases
- relationships with other relevant Government and non-Government agencies, particularly health, housing and community service agencies;
- analysis of barriers and facilitators of the success of the model;
- perceived impact of the social workers for clients;
- identification of alternative service models to achieve stated objectives of the Case Work Support project;
- overall satisfaction with the program; and
- thoughts on the future of the program.

The final Chapter of this report identified pre-conditions and requirements to maximise the efficiency and impact of the Initiative and Social Workers.

2.2 Evaluation Methodology

The primary methodology used to elicit an understanding of the impact of the Case Work Support Initiative drew on conventional social research methods using in-depth semi-structured focus group discussions and face-to-face and phone interviews with key stakeholders.

Different guiding question schedules for the focus groups and interviews were developed for each of the groups of stakeholders involved in the evaluation, i.e. for:

- Housing Officers, Team Leaders and Operations Managers in each of the three offices;
- higher level management in HSA;
- Social Workers and the Manager of the Initiative; and
- other organisations and agencies involved with the Initiative (such as DMT, ITS, Homelessness Strategy and other service providers).

The data collection for the evaluation involved:

- A focus group with all of the Case Work Support Initiative Social Workers and the CWSI Manager. This was the first data collection exercise allowing the evaluation team to ask general questions regarding the delivery of the program, outcomes for clients, barriers to the success of the program, areas in need of improvement and refinement, as well as the fit of the Initiative within each regional office.
- In-depth one-on-one interviews with each of the Social Workers, including the Social Worker in the Eyre and Western Region. This data collection step was important in allowing each Social Worker a forum for raising issues on a more personal level with the evaluation team, as well as allowing them more time to explain and discuss their roles with clients and within the Initiative and Housing SA.
- Focus groups with Housing Officers in each of the regional offices. The majority of Housing Offices attended these sessions and provided valuable feedback on their interaction with the program and general thoughts about its usefulness and impact – for themselves, Housing SA and clients.
- Interviews with Allocations Officers (specifically to discuss the involvement of Social Workers in the pre-allocation process), Team Leaders and Operations Managers in most of the offices.
- Phone interviews with staff of Homelessness Strategy, DMT and the Regional Manager HSA Northern Region.

- Phone interviews with representatives of service providers working with Social Workers and with ITS workers in the inner and outer northern region.

While the Eyre and Western Region was not to be included in this evaluation, discussions were held with the Social Worker in the region because the Initiative operates a little differently in this region and the nuances there provide insights into possible directions for the evolution of the Initiative in Greater Adelaide and across the State.

The guiding questions used for the evaluation with each group of stakeholders are provided at Appendix 3 of this report.

The Reference Group established to guide the project also provided strategic advice and input about the evaluation process and some background information regarding the Initiative.

3 EVALUATION FINDINGS: CASE WORK SUPPORT INITIATIVE PILOT

This section of this evaluation report discusses the key findings concerning the impact of the Case Work Support Initiative. The discussion is structured to reflect the required areas of assessment and investigation specified in the RFQ.

3.1 Nature of the Social Worker role and clarity of lines of responsibility within Housing SA offices

Introduction of a new role into an existing operational framework creates challenges for both the existing staff and the occupant of the new position(s).

The RFQ for this project clearly notes that the evaluation of the CWSI is not to focus on the development, planning and implementation of the Initiative, however, it is clear from the discussions with key stakeholders underpinning this evaluation that the way the Initiative was rolled out in the Northern Region has had an impact on the overall success of the Initiative. Of key concern in this regard is the process around the introduction of the Social Workers themselves into each of the Housing SA offices involved in the pilot and the lack of clarity provided to staff about their role, and this includes for the Social Workers themselves. This clearly caused a level of suspicion among some staff within each of the three offices and some resistance to the program initially, as well as fears about Social Workers eroding the roles of Housing Officers. These concerns certainly affected the acceptance of the Social Workers, and the Initiative within each office, resulting in fewer initial referrals to the program.

The lack of clarity around the role of the Social Workers and their need to justify their roles to colleagues initially (including management in some instances) was reported by some of the Social Workers to encumber their effectiveness. The Social Workers offered a number of rationales or bases for the suspicion and resistance to their role within Housing SA, including:

- Housing SA culture and a general resistance to change, distrust of change;
- previous restructures have unsettled people;
- rumours Housing Officer jobs were to be outsourced in order to employ more formally qualified personnel;
- a lack of education specifically about the role of the Social Worker;
- limited understanding of Social Worker knowledge, skill base and expertise;
- while information was provided to the offices in advance of the instigation of the program, in the lead up time to the start of the program there was little communication;
- at the time the program started there was no co-ordinating manager across the three offices;
- a lack of leadership from some managerial staff led to the perpetuation of rumours that the SW would replace Housing Officers and an 'us and 'them' mentality developed;
- unfavourable experiences of Housing Officers with Social Workers in previous employment situations;
- once in the offices the Social Workers were not immediately included in the operations of the office (did not feel part of the team).

It is crucial to point out here that changes around the management of the Initiative (discussed further below) have clearly ameliorated this situation in the minds of most staff.

This has ultimately improved the structure, delivery and acceptance of the program and the outcomes for all Housing SA staff (including the Social Workers) and clients.

A range of actions were put in place over time to overcome the initial difficulties faced by Social Workers which affected the internal acceptance of the Initiative. These included:

- a manager to oversee and provide supervision across the three offices;
- some changes in staffing;
- the role of the Social Workers under the Initiative was more clearly explained Initiative; .
- communication encouraged between Housing staff and Social Workers
- Social Workers and Housing Officers encouraged to go out in the field together;
- Social Workers and Housing Officers encouraged to discuss issues with the Social Worker Manager and Regional Manager; and
- Social Worker Manager included on Executive Board.

Additionally, an emphasis was placed on the importance of the program to client outcomes and the need for Housing Officers and Social Workers to work together in the best interests of the customer. That is, putting the client at the centre of all work being undertaken by the team, in order to meet client needs and compliance measures imposed within the organisation. In one office acceptance and ownership of the program has also clearly been fostered over time by allowing all staff to have an input into the evolution of the Initiative – to reflect the needs of all staff and, in some instances, of clients.

Importantly, with the operation of the Initiative over time, a greater understanding of the differentiation of roles has become clear and it is evident that for most staff, and in most instances, Housing Officers and Social Workers have established good, supportive working relationships in each office.¹ This has clearly occurred with careful support and dedication to the philosophy of the program from Team Leaders, Operation Managers, the Social Worker Manager and the Regional Manager. The relationship between frontline Housing SA staff, management and the Case Work Support Initiative is discussed in greater detail below (see especially sections 3.3 and 3.8, also Appendix 5 which shows an example of such collaboration from *The Buzz*).

Ideally, a brief evaluation or review of the program in the first six months of operation should have been undertaken to establish how well it was working and the level of acceptance of the program within each office should have been conducted. This would have provided valuable insights and strategies for avoiding these pitfalls and teething problems for other offices, and similar programs.

The experiment of establishing the Case Work Support Initiative in the Northern Region of Adelaide (and subsequently in Whyalla) has provided insights into a number of strategies that need to be instigated to increase the prospects for success of the Initiative for both Housing SA staff and clients.

3.2 Utility and impact of the Case Work Assessment Tool

The Case Work Assessment Tool or Risk Assessment Tool is a measure used to assess the level of risk of an *existing* tenancy. It is predominately used or applied by Housing Officers, but can also be used by Social Workers. According to HSA policy each tenancy is to receive a visit from a Housing Officer every 12 months and theoretically it is at these visits the Tool

¹There is always a small minority of staff that do not see the connection between SW, HO and the customer and who do not recognise the value of a collaborative approach.

is applied. It can also be applied at any time a Housing Officer has concerns about a tenancy. The Tool was developed by a committee of Housing SA staff (including CWSI Social Workers) and is based on a similar tool used within Families SA. Operationally, the Case Work Assessment Tool is a points based assessment determined through both communication with the customer and observation of the condition of the Housing SA property (including the living conditions of the tenant) to assess risk and the need for early intervention by a Social Worker. The course of action to be followed after the application of the Tool is based on the final score determined with the risk assessment:

- a score of 20 means automatic referral to a Social Worker;
- a score of 12-19 follow up as required; and
- a score of 12 or less indicates low risk for the tenancy.

Team Leaders need to sign off on all courses of action that require involvement or referral to a Social Worker because of the results of the Tool.

A number of issues were raised about the Case Work Assessment Tool throughout the evaluation process. All participants in the evaluation agreed that the Tool is a useful way of quantifying concerns and some such type of assessment of risk is needed for clients. Many comments were made in interviews and focus groups about the need for further refinement of the tool, particularly its structure, whether the Tool is meeting its desired aims and how to improve the usefulness of information garnered with the Tool.

In terms of structure, comments centred around the Tool being 'too big and cumbersome' and '...too simplistic', as well as that it 'is repetitious', particularly in terms of the 'questions on debt and disruption'. Discussion about the usefulness and limitations of the Tool also raised concerns about the lack of 'space for writing comments', that the Tool 'has lots of gaps in it', and 'some of measures are irrelevant, [and it] repeats work done as part of other processes'. For some, the Tool also needs refinement because they feel that it is not achieving its core purpose. That is, identifying high risk tenants and aiding in early intervention. The following quotes reflect the general feeling regarding the points system used to determine clients in need of Social Worker assistance:

For substance abuse [you] get 2 points but alcoholics are high risk and should be 20 points alone.

The Risk Assessment Tool is meant to help with early intervention but things need to be pretty bad before a score of 20 is reached. Can score 12 which means client should be ok but you know that at 12 points there are already issues but you have to wait until 20 points to intervene.

And, similarly,

The thing that has really worked against early intervention even though our program is set up that way is [the] Risk Assessment Tool. [Clients] can only be referred if already high risk. Can get clients on property conditions alone but if they have mental health issues [that is] only 4 points.

..whether [the] number [a] person scores is 2 or 20 [it] should be secondary to Housing Officers' intuitive discerning opinion about where [a] customer is [risk wise] and if we get in quick we can fix it, whereas what we are getting now is case assessments that score over 20, long term problems, debt, near eviction, four steps too late. [This] is the problematic nature of the tool rather than Housing Officers.

One Housing Officer stated that a benefit of having the Social Workers in-house was that if a customer scores less than 12 on the CWAT they can have an informal discussion with one of the Social Workers to identify potential approaches to deal with the customer's issues. This includes for ideas and guidance around referral to an external agency or program. Moreover, based on the thoughts of the Social Worker and Housing Officer, and with the approval of the relevant Team Leader, such discussions can also identify clients who need more formal support from the Case Work Support Initiative. There are also distinct benefits to Housing Officers and Social Workers taking a joint approach around intervention. A good example of this is highlighted in the following input provided by a Social Worker:

The Tool is very much based on getting information from the person [client] and unless [it] is just property condition [they are] not necessarily going to know if there is domestic violence, unless you sit down and have a chat with the person. I have a person now that shows a few things [of concern]. [I had a] referral for [a] woman whose score was 9 and [the] Housing Officer said there were no major issues, [some issues with] little furniture and issues around finances. I've had this client 7 to 8 months now and did [a] Risk Assessment [a] couple of months ago and through conversations with her [found she] now has a score of 53. If that Housing Officer hadn't taken the extra step this person would not be helped.

Suggestions were provided about how to improve the Tool. One person indicated issues around guardianship need to be more detailed. A significant number of Housing Officers and Team Leaders indicated greater space was needed to write about the concerns of Housing Officers (or whoever is filling out the form) and the reasons they think it is justifiable to refer the customer to the Social Workers. In addition space is needed to identify if risks are long standing or new. Constructive comments offered about the improvement of the tool included: that it needs to incorporate a sliding scale of scores that then allows the Housing Officer to incorporate their intuitive opinion about where a customer is at; and low, medium and high risk categories should be used rather than just tick boxes.

3.3 Impact of Case Work Support Initiative pilot on Housing SA staff

Social Workers, Housing Officers, Team Leaders, Allocations Officers and managers were invited to talk with the evaluation team about what influence they thought the Initiative has had on their work environment. A range of areas of impact were explored with Housing SA staff during these discussions, including impact on staff workloads, stress levels and staff knowledge of early intervention measures and actions. Importantly, the focus groups and interviews conducted with staff provided a clear sense of the value of the Initiative, as well as how well integrated Social Workers have become within the Housing SA offices in the Initiative.

3.3.1 Impact on workload, time and stress levels

Housing Officers had mixed feelings about the impact of the Case Work Support Initiative on their workloads generally. Some believed, for example, that there had been no discernible impact on their workloads because of the presence of the Social Workers in the office. Notably, the number of staff reporting no discernible impact from the program was the minority, and all were Housing Officers.

The following comment from a Housing Officer summarises the general position of the minority of Housing Officers who felt the Initiative has not positively impacted on their workload and stress levels:

In some ways, Social Worker involvement made the job harder. Years ago if a property was in a bad condition it was submitted for eviction straightaway,

2-3 weeks to clean up and often something would happen. Now you cannot do anything until a Social Worker has attended - other agencies are involved. It makes it harder and we get in trouble because the property is in a shambles when maintenance get there. It is another step of holding their hand, the Social Worker is the soft approach.

While there were clearly Housing Officers who questioned the approach of using Social Workers within Housing SA and who generally were not in favour of the initiative, it is important to note here that many of the Housing Officers who did not feel that the Initiative had helped with their workloads reported that this was more a function of the size of their workload generally, and the fact that they are expected to do a huge range of tasks (up to 55) as part of their job descriptions. Others expressing this viewpoint noted that their rigid weekly timetables, and the fact they often do not have a full team of Housing Officers to attend to all the tasks required with a full complement of workers, has limited their ability to interact with Social Workers.

By far the larger group of staff reported that the Initiative, and particularly having Social Workers available for case management of at-risk tenancies, has reduced their workloads to some degree. Where this was most noticeable (and appreciated) was the time savings to Housing Officers when Social Workers were able to follow up on a range of issues with a customer who in the past would have been the (time-consuming) responsibility of the Housing Officer or not followed up at all. Most staff felt that this was a much more efficient way of dealing with clients, as Social Workers are trained in investigating, understanding and addressing social issues, whereas Housing Officers do not generally have such skills. This is clearly beneficial for Housing Officers as well as clients. Many staff noted that having someone in the office with access to all client information and skills was allowing them more time to deal with their core tasks of compliance and tenancy management. As such, the introduction of the Social Workers had impacted positively on meeting some of the compliance-related Key Performance Indicators of the team.

In discussing the impact of Social Workers on the workloads of Housing SA staff it was clear that the presence of Social Workers with offices is having a broader range of impact than just on workloads.

The lack of time Housing Officers are able to devote to each particular client was raised frequently as a key reason why the introduction of the Social Workers has been beneficial for Housing Officers and clients. For example:

Before the Social Workers were in the office the issues they deal with would not have been addressed. We did what we could under pressure but we are not trained to do their job and they are good at it.

We have that many clients rostered for every single hour of the day we don't have time to do social work.

Competing pressures on Housing Officers means they have to deal with what is important at a point in time, not necessarily having the time and ability to check up on one case. Housing Officers can identify tenancy issues but they are not able to work long term with customers whereas Social Workers are able to retain a sense of ownership for a much longer time.

We don't have time to deal with outside organisations. We have no time to tee up visits at a suitable time as this may take two weeks to organise. Whereas here if I organise with the Social Worker to go out tomorrow and call in sick there is someone else here who has had dealings with the client

and they can step in and go out with the Social Worker. If [this was done by] an outside agency it would be more difficult, messy.

Prior to the [introduction of the] Social Workers if a Housing Officer was referring to an outside agency we would have no idea what happened to the client, whether the agency was engaging with the client. We do not have the time to question this or follow this up until something goes pear shaped and then we question what happened.

Housing Officers commented at length about how having Social Workers in the office made parts of their job easier, in particular, many felt their presence in the office had eased stress levels. Interestingly, even most of the Housing Officers who did not agree that the Social Workers had a positive impact on workloads, agreed they had a role in reducing their stress levels. A number of reasons were cited for the impact of Social Workers on stress levels. For example, some felt that the fact that the Social Workers were familiar with Housing SA policies and procedures assisted, as this was seen as one less thing that needed to be explained as part of the process of assisting a client, which always needs to be done when dealing with an outside agency. Additionally, because the Social Workers are in-house, conversations as to how best to deal with a client have often taken place informally, with good outcomes for clients, staff and Housing SA. Importantly, also, many Housing Officers pointed to the important role Social Workers have had in debrief Housing Officers if the activities of the day have been difficult for them to deal with. These latter two outcomes are clearly unintended consequence of the program and something many Housing Officers highly valued.

3.3.2 Impact on knowledge of early intervention

A key focus of housing policy and housing assistance measures nationally under the new National Affordable Housing Agreement, is the application of early intervention approaches to improve tenancy, participation and wellbeing outcomes for vulnerable and at-risk clients. The Case Work Support Initiative is an example of an early intervention mechanism within the housing assistance arena. The Initiative is structured to do this in the pre-allocation process for new or relocating clients and through case work with existing 'at-risk' customers, as well as pre-allocation of properties for clients. The following section looks at the impact of knowledge of early intervention approaches.

Pre-Allocation

Prior to the implementation of the Case Work Support Initiative assessment of risk factors for clients (i.e. early intervention) was not a formal consideration within the pre-allocations process. That is, before this Initiative was instigated, the Allocations Officer would read the Housing Needs Assessment (HNA) of a prospective client and offer them a property – the next available property, without regard for any personal issues or factors (social, economic or otherwise) that might impact on their tenancy or wellbeing or indicate high risk for unsustainability of tenancy. Essentially then, the allocation process was just a paper/data matching exercise. The introduction of the Case Work Support Initiative in the Northern Region has re-structured this approach completely, and the Allocations Officers spoken to in this evaluation all had positive things to say about this new way of approaching and looking at the allocation of properties. All believed that the introduction of Social Workers into this process was a useful and efficient early intervention strategy because the assessment of client circumstances just before allocation of a property has improved the information at the disposal of the Allocations Officer when deciding on the appropriateness of a property (location, neighbourhood et cetera).

Importantly, the work undertaken by the Social Workers with clients at pre-allocation updates the information captured in the HNA. For many clients this may have been as long as four

years ago. It also allows a deeper investigation of the personal circumstances of clients that may or will impact on their tenancy and wellbeing, such as non-engagement with, or failure of, necessary supports, substance abuse issues, violence and mental health issues (including undiagnosed mental health issues). Through this phase, Social Workers are also able to initiate (and in practice have initiated) multi agency approaches and case conferencing. Such approaches in property allocation were not common practice prior to the Case Work Support Initiative. As one Social Worker stated this often 'meant setting up vulnerable tenants to failure'. The involvement of Social Workers in this phase was clearly seen by Allocations Officers, and some other key Housing SA staff, as improving the management of real and potential issues that could impact on tenancies in the immediate or longer term.

As a more early form of intervention it was also suggested by some that the Social Workers should be involved in the Housing Needs Assessment process. Because as the timeframe between such assessments and allocation of a tenancy can be extensive the Housing Allocations Officers could not see the worth in this and prefer the current system of pre-allocations. The involvement of a Social Worker in the Housing Needs Assessment however, is being trialled in the Eyre and Western Region. At present this is the preferred model but housing turnover is faster in this region than across Metropolitan Adelaide. In discussions with management it was suggested that the priority list for customers for Housing SA is under review with a focus on housing those only in greatest need and reducing the waiting time from potentially years to weeks. It is only in this instance that one form of assessment would be required.

For the Housing SA staff interviewed for this evaluation, assessing the effectiveness of Social Worker involvement in the pre-allocation process was a difficult task. This said, most thought that at least anecdotally there was evidence that fewer clients were being allocated inappropriate housing. The Allocations Officers and Team Leaders interviewed, however, were much more confident of the positive impact of such an early intervention approach to the pre-allocations process. For Allocations Officers, a key indicator of the success of the program was that they now receive no comments from Housing Officers that a tenant's property allocation was inappropriate. They noted that this is clearly a result of the involvement of Social Workers in the process and them being able to look in more detail at the needs of clients at the pre-allocation phase. The support offered to them in the allocations process by Social Workers was clearly appreciated and necessary from their perspective.

In discussing these positive outcomes about the pre-allocations role of Social Workers however, it is pertinent to note that one or two Housing Officers were quite vocal about the role of Social Workers in pre-allocations:

I think early intervention is not the right word as we wouldn't be having the amount of issues we do with people allocated property. Once an allocation is made that is the end of social worker involvement, a client's then housed, and that blows up on probationary, nothing stops a client from having problems.

Quantitative data on the pre-allocations process reveals that Social Workers have undertaken 1092 pre-allocation assessments from the inception of the Initiative to the end of the most recent reporting period (March 31 2011) (Housing SA 2011, p.11). Due to the lack of specific data that quantifies the outcomes of the allocation process the Quantitative Report concludes 'their [Social Workers'] impact on tenancy outcomes remains inconclusive.'

In order to gain some measurable outcomes of this process, a random sample of pre-allocation cases involved in the Case Work Support Initiative in the North would need to be compared to a random sample of new tenants in another sector of Adelaide allocated housing by an Allocations Officer only (without the input of Social Workers). These tenants would then need to be monitored over a two to three year period to assess the impact of the Social Workers on tenancy outcomes. However it is important to remember that the outcomes for the customer specifically will always be qualitative in nature and somewhat subjective. As such other positive impacts reported from the involvement of Social Workers in the pre-allocations process, is demonstrated in the following assertions:

The quality of the properties has improved with pre-als [pre-allocations], better matching of housing to client and people around them. They do a proper assessment. We can interview someone for a HNA who may have complex issues or needs and have supports in place but two years down the track [their] needs change.

Making better choices now in housing allocation,[is] safer for existing tenants.

On the allocations side of things it is also good to know everything about a new client before going there so we can make judgements about our own safety also get to know the person better, go in with better tools. Social Workers like ourselves are often stepping into a situation where everything is not good otherwise we wouldn't be there to start with.

The effect of increasing safety for Housing Officers was clearly an unintended consequence of the Initiative in the Northern Region.

On the issue of the pre-allocation process, it should also be noted here that some Housing Officers interviewed believe that they also have something to offer to the pre-allocations process, and should therefore be consulted as part of the process. For example:

When we [Housing Officers] have consultation it speeds up the process, we know the streets, the neighbourhoods. If you house the person in the wrong spot it increases the Housing Officers workload.

In support of this a Social Worker stated that conferring with the Housing Officers is a good idea:

While some customers just fit, others have something in their past or history or they are indigenous, a refugee, ex-con and one [a Social Worker] really needs to consult with the team.

These findings of the research support a key conclusion about this Initiative that strengthening cooperation between Housing Officers and Social Workers is important for the acceptance and success of this program. This has the effect of allaying fears that Social Workers opinions about clients and properties are 'better' than those of Housing Officers, and at the same time values the 'instinct' of Housing Officers with regard to clients. Of course, this also needs to be balanced against the fact that some Housing Officers do not appreciate the role being played by Social Workers within the pre-allocations process.

It should also be noted here that many Housing Officers pointed out that pre-allocations are not necessary for every allocation. Cottage flats are a case-in-point here. In at least one office, changes have been made to remove these tenancies from the Social Worker activities. This was considered an efficiency improvement to the early intervention approach

in pre-allocations. It was also considered better use of the skills of Social Workers, freeing them up to work with more challenging cases.

Existing customers

To assess the impact of the Case Work Support Initiative on early intervention, Case Work Social Workers were asked about their sense of the awareness of early intervention approaches among staff when they first joined the Housing SA office. They were also asked whether they consider this has changed over time. The general opinion of the Social Workers was that there was little awareness of early intervention approaches before the program was introduced, at least not in any formal way. Social Workers reported that they felt that Housing Officers very much worked as 'fire-fighters', operating in a reactive rather than pre-emptive way. This opinion was not necessarily a direct criticism of Housing Officers themselves but of the demands placed upon them and Team Leader positions since the major restructure of roles within Housing SA in 2008. It was pointed out that prior to 2008 Housing Support Coordinators played a key role in assisting Housing Managers to locate appropriate supports for customers who needed them. With the restructure, Housing Officers were placed into teams to be led by a Team Leader. Team Leader's in association with the Housing Officers were then to absorb the Housing Support Coordinator's role. However, some Team Leaders and Housing Officers acknowledge that they did not necessarily have the expertise and knowledge required for this task (though it was assumed it could be gathered over time). Subsequently, the demands on a Team Leader's and Housing Officer's time has made it difficult for them to successfully take on all of the roles that were performed by Housing Support Coordinators. The increasingly complex needs of new and some existing clients has placed further pressure on staff assuming these roles. It is anticipated that this can, and will, only increase over time with the current policy focus on housing those most in need and the 'moving on' of more stable long term tenants through ageing. Concerns over increasing demands on staff by clients with complex and multiple needs were raised repeatedly by staff throughout this evaluation, and were often used to justify the (increasing) need for tools like the Case Work Support Initiative – for staff as well as clients.

In commenting on the impact of the Initiative as an early intervention strategy for existing tenants, it is important to note contentions about how early intervention is defined. By conventional definitions of early intervention, the way the Case Work Support Initiative is assisting clients is not true 'early intervention' but rather secondary intervention. This is in contrast to the role of the Social Workers in the pre-allocations phase, which can be seen as early intervention because it is one of the earliest times Housing SA can be involved in shaping and assisting a client with their tenancy (and wellbeing) outcomes. Of course, there is a degree of subjectiveness to understandings of 'early intervention'. And, often early intervention in the context of a new program is not primary intervention but rather an intervention tied to preventing a specific negative outcome or range of outcomes. This understanding is important in the context of this research, as some of the people interviewed for this evaluation do not see this program as early intervention or 'early-enough' intervention. However, if a longer-term view of client and tenancy outcomes is applied, any actions undertaken before a tenancy becomes high risk or fails could arguably be seen as early intervention from a life- and tenancy-course perspective. It is also the case that the ability of a Social Worker to provide 'early intervention' in existing cases depends on the results of the Case Work Support Assessment Tool and Housing Officers recognising that there are issues that warrant the attention of a Social Worker and then advocating for the client to be referred to a Social Worker.

Discussion with Housing SA staff (including the Case Work Support Initiative Social Workers), reveals a general belief that awareness of early intervention has increased over the life of the program to date. A key measure of this has been the reported improvement in the ability of Housing Officers to identify not be quite as they seem and to refer such clients

to Social Workers for assistance. The following comments from Housing Officers reinforce these thoughts:

I have found the Social Worker to be absolutely invaluable because of the complexity of cases. Honestly the complexity of tenants now and [the] amount of work I've seen done by notations and listening to responses from clients themselves, I couldn't foresee issues they now have and needing attention and working without the Social Worker – couldn't see it. I advocate for them; and

Social Workers are absolutely saving us time. It's not only about time – they go in with a different outlook – no matter how much time a Housing Officer has to put into something they do not have the background and different ways of seeing things. It is good to have [the] complementary skills of Housing Officers and Social Workers.

While Social Workers believe Housing Officers are much more aware of early intervention than they were when the Initiative first started, mechanisms for support are often only triggered in response to property condition. Accordingly, the Social Workers believe there is still a long way to go in educating Housing Officers about the whole range of issues that may/do warrant intervention. For example, in some offices, Social Workers generally are not consulted regarding debt or eviction issues or for disruptive tenancies:

We are not receiving enough referrals for debts and disruptive tenancies. Debt, not paying your rent is a normal sign something is wrong and a client is struggling. Early intervention is saving someone's tenancy and the first indicator could be debt and another indicator could be an increase in disruptive tenancy matters.

Housing Officers confer that when a client goes to the Disruptive Management Team the Social Workers are not consulted. The lack of referral for disruptive complaints to the Social Workers (as well as the fact the Northern Region has a high volume of tenants (Housing SA 2011 p. 20) is likely to be a significant reason for the lack of positive outcomes in disruptive tenancy complaints reported in the Northern Region compared to the Southern and Western regions. The quantitative report does recognise the limited role Social Workers have had in the Disruptive Management process (Housing SA 2011, p. 21).

In terms of debt, the quantitative data on the one hand has demonstrated that it is difficult to separate the influences of the strategies of the Debt Management Taskforce from the Social Workers. On the other hand, the data do suggest that, importantly, '...the additional case management provided by Social Workers appears to have an impact in reducing debt levels in high risk customers with moderate debt. (Housing SA 2011, p. 17). The Case Work Support Assessment Tool also does not recognise the critical relationship between debt and sustaining tenancies to the fullest extent (points allocated to debt issues are of less relevance than property condition).

The lack of consultation with Social Workers though this procedure is not consistent across the three offices. In one office in particular, examples were given where Social Workers are involved in debt related crises and disruptive tenancy issues (see successful case studies S5 and S6) and these examples show that the application of the Case Work Support Initiative within this office has evolved to meet the needs of staff and clients. Initially in this office, a Housing Officer would need to go and deal with disruptive issues themselves, however, as the understanding of the role of Social Workers and the Initiatives has grown, staff in this office have established different ways for Housing Officers and Social Workers to

work together and assist each other. They report that this has ultimately resulted in more positive outcomes for clients, as well as staff.

3.4 Relationships with other relevant Government and non-Government agencies, particularly health, housing and community service agencies

To successfully support customers with issues that are threatening their tenancy, links need to be established with a range of services that can provide specialist assistance for clients. One of the major roles of the Social Worker is to facilitate access to a range of interagency and community services; organise and chair case conferences; and develop interagency case plans. These are not new functions or processes for Housing SA, but it has been noted that the restructure in 2008 resulted in a decline in the experience of Housing Officers in relation to support services. Following the restructure, a number of long term Housing Managers moved on (through retirement, changing career paths et cetera) resulting in a significant loss of knowledge and skills across the region. For new Housing Officers, establishing networks can only occur on a case by case basis and this takes time. In fact some Housing Officers reported this can take up to five years. The introduction of Social Workers has hastened the re-establishment and creation of numerous links with outside agencies. Appendix 4 provides a list of the range of agencies Case Work Support Initiative Social Workers have established working relationships with in the Northern Region.

Team Leaders have noted that even within a few weeks of the Social Workers joining Housing SA information and assistance from agencies increased. This has been attributed to the hard work of the Social Workers and the level of respect they have built with outside agencies. While re-connections with some services and the establishment of new connections with support services is very much welcomed, one negative consequence noted was that some Housing Officers may be losing those few connections they may have with outside agencies. To this end, it is suggested that strategies are needed to ensure Housing Officers maintain a base level of key regional agencies and supports for clients.

Discussions with representatives of agencies in the Northern Region that the Social Workers have regular interactions with revealed a strong respect for the Social Workers and the role they are playing in supporting and advocating for clients. Most agencies felt that the program was another important tool for assisting some of the most vulnerable individuals and households in the community. This said, it was evident from conversations with some agencies that they knew little about the ethos underpinning the Case Work Support Initiative, and to some the Social Workers were just another Social Worker among many. This view was however very much in the minority among those interviewed. Comments regarding the Initiative and Social Workers included:

...it is good to speak to a particular person who has name and understands the client's needs.

...it streamlined our process [within our own agency].

...it allows case managing of clients, [and] information sharing.

...it is a point of contact to cut through bureaucratic processes.

The Initiative provides good networking which we didn't have before.

Information sharing, having someone within Housing SA to discuss client needs and progress, as well as access to someone they felt understands clients needs and their impact on their lives, wellbeing and tenancies were all raised as key benefits associated with the program and that were valued by agencies. Additionally, agency representatives repeatedly

raised that the availability of a Social Worker within Housing SA facilitates a problem solving approach, as it provides agency workers with one person to deal with on an ongoing basis and has been crucial in building relationships with the key organisations involved in supporting high needs and vulnerable clients. The program was therefore a clear indication of Housing SA committing to actions to intervene early with clients, assist other agencies with such early intervention, and put client needs at the centre of/in tenancy management.

The importance of the Case Work Support Initiative in building relationships between key players involved in supporting vulnerable and high needs clients (including with and around their housing), was demonstrated in the comments about the importance of the program by Uniting Care Wesley's ATSI Christian Congress (Adelaide Congregation). This organisation expresses absolute praise for the Case Work Social Worker they have been involved with. With the support of Housing SA management, this Social Worker has initiated a multi-agency approach to establishing a homemaker program to meet the needs of Aboriginal Housing SA tenants living in the northern suburbs. These actions, and the Social Workers' personal approach and relationship with clients of this Initiative, have resulted in Aboriginal clients asking to go to the courses and to be part of the program. The ATSI Christian Congress worker commented that Aboriginal clients react so welcoming to the Social Worker and that his presence within the program and the mutual respect built between the Social Worker and clients will have a long term effect on clients. And, the Congress worker acknowledged that this is all the more important given how difficult it generally is for non-Indigenous people to work with Aboriginal clients and organisations.

As part of this component of the evaluation discussions were also held with key representatives of both the Disruptive Management Team (DMT) within Housing SA and Intensive Tenancy Support (ITS) delivered in the Northern Region by Anglicare. A DMT staff member reported they have had some involvement with Social Workers, and this has very much been beneficial. DMT have been involved in case conferences with Social Workers and have linked clients referred to the DMT back to supports in the region including CWSI Social Workers and ITS workers. The DMT staff member noted that the Case Work Support Initiative is an early intervention program, while the DMT deals with clients after they have received a second strike for disruptive behaviour. In this sense there is limited room for interaction between the Social Workers and the DMT, particularly if interventions under the CWSI are 'successful'. Of course in practice this has not always been the case. Aswell, the sheer number of clients being assisted by Housing SA means that there is always likely to be clients who cannot be assisted through a program like the Case Work Support Initiative. In addition, there is the issue of clients not being willing to engage with supports – whether these are CWSI related or provided by external agencies. Additionally, the DMT staff member interviewed noted that 'some clients just don't have the right attitude' for engagement and this includes those with DMT and other support programs. The overriding thoughts of the DMT about the program has been that 'anything [like the Initiative] that helps out is useful' and 'the CWSI is just another tool and one tool doesn't work for everyone, but having a range of tools like the Initiative is important for meeting client needs'. Importantly, the DMT staff member felt that while it was difficult to comment on the future of the program and the impact it has had on outcomes for the DMT (because of the short time the program has been in place) they 'would love to see more intensity around early intervention' within Housing SA and 'if it [the CWSI] is a way of heading off something before it happens then it is a good thing'.

Perspectives on the Case Work Support Initiative pilot by ITS workers were mixed. One worker commented that the program was 'fantastic and we love working with the Social Workers [in their region] and it has certainly been a positive'. This worker further noted that the program is an 'important extra tool to work with and for a fairly intense group of clients'. The existence of the program within the region has also assisted them 'by giving them better information [about clients and their needs]'. A real positive of the program from this worker's

perspective has been the 'good working relationship they have with the Social Workers and that they are all working towards that'. Additionally, 'we are all working as hard as each other towards the same goal'. For this worker having two Social Workers in each office has been optimum and they have never had their requests for information or assistance not met. Moreover, this was a major improvement on past practices for supporting clients where 'all [support] was done by engaging with Housing Officers...and they tended to just refer clients to ITS workers and move on'. This viewpoint was not provided as a criticism, but rather an observation that having the Social Workers in the offices and working towards the same goals for tenants was appreciated and seen as a positive way of engaging with clients. On the whole ITS expressed the view that their involvement with the program 'had been good for us and for tenants' and that they 'love' Social Workers and the program. 'The [CWSI] people are great, [they] respond well, are friendly and importantly are willing to wear many different hats'.

For ITS management, however, there were a number of concerns raised about the Initiative. Such concerns related to:

- Lack of clarity about the purpose of the Initiative and role of the Social Workers in terms of supporting clients and confusion about how this fits with the ITS program. On this issue the ITS Managers both noted that originally the CWSI was sold to them as a 'brokerage' program that would complement the ITS program and they were not sure that this was how the program was operating. One manager noted that they 'had higher expectations about the level of collaboration over clients' and felt that more opportunity to work collaboratively would be beneficial;
- Low levels of referrals to ITS generally, particularly in the outer northern region and the clearly different (and unclear) referral processes between the three offices in the Northern Region. One worker commented that they really only received referrals from two Housing Officers in one office and that in another office despite four separate presentations on the ITS program to Housing SA staff it is still evident that some key workers in the referral process still do not understand the ITS program and who is able to make referrals to the program. In one office most referrals to ITS were directed through a CWSI Social Worker, however, this was not the process in the other offices, adding to confusion about who can and cannot refer a client to ITS. The ITS Managers spoken to were keen that the 'roadblocks' around referrals are sorted out and as one manager commented: 'if the Social Workers in the [particular] office are so overworked, I would like to help them out';
- A feeling that the program is overly 'personality-driven' and that some Social Workers had a much better understanding of the differences and synergies between the two programs than others;
- Ensuring that CWSI Social Workers and Housing Staff staff generally understand what the ITS program is about, who can be assisted and how. Additionally, concerns were raised that staff understand that clients referrals to the ITS program are about working to improve the life skills of clients and 'aren't just made with the view that it is primarily an avenue for access to brokerage monies' for particular items and services for clients; and
- Poor communication between ITS management and CWSI management around the focus of the programs, challenges (including in terms of clients and general coordination of support) and synergies. For the ITS management, it was clear that regular meeting between themselves and the CWSI Manager would assist with the process and provide them with a clear point of contact within Housing SA to discuss concerns.

Importantly, the ITS managers felt that having Social Workers in Housing SA offices was a positive step forward for the organisation and clients, particularly given that 'when people go to Centrelink they see a Social Worker, but if they present to Housing SA they only see a

Customer Support Officer, [therefore]...a line to a Social Worker for front counter presentations has to be more beneficial for clients with complex needs – although this shouldn't take up all of their time'.

3.5 Analysis of barriers and facilitators of success of the model

From this evaluation exercise it has become clear that there are a range of facilitators of the success of the Case Work Support Initiative, and barriers to its operation. Facilitating factors are central to the success of the Initiative and can counter some of the barriers inherent in all programs, no matter how long they have been in operation.

Aside from the need for recurrent funding and high level support from the Department for Families and Communities the most important facilitator for the Case Work Support Initiative is a strong, supportive, functioning management structure. Discussions with key staff about the Initiative revealed that this important pre-condition was absent for the most part during the initial implementation phase of this pilot program, but this has since changed. These issues and concerns have shown the importance of an overall manager (the Regional Manager) overseeing the implementation and operation of the Initiative and championing the approach within each office. Having the support of other managers within the Housing SA structure is also clearly critical to the acceptance and therefore success of the program; particularly given that Managers are the 'gatekeepers' of this Initiative, and if they do not support the overriding ethos and philosophy of the program can act as roadblocks to referrals and therefore program success.

A range of other factors or pre-conditions for the success of the program were identified by management staff within Housing SA with respect to the successful operation of the Initiative. These include:

- a customer centred focus;
- respect for, and understanding of, the roles of all staff;
- a belief in the philosophy of the program and that Housing Officers, in conjunction with Social Workers, can sustain tenancies and improve outcomes for customers;
- a manageable case load for Social Workers, Housing Officers and Team Leaders;
- an inclusive office culture;
- an understanding of the importance of early intervention and prevention approaches;
- ability to have an input into the evolution of the Initiative; and
- regular communication and education sessions with all staff, to promote awareness of underlying issues and issues not immediately evident that can/will affect tenancy sustainability.

Participants in the interviews and focus groups were also asked to identify what they saw as the barriers to the success of this Initiative. A range of thoughts and suggestions were provided based on the roles and perspectives of each individual. Barriers were related to both the Initiative specifically, as well as broader or structural barriers affecting the circumstances of clients and Housing SA as a housing assistance arm of government.

Barriers to the Initiative

- lack of support from Housing Officers and management and belief in the program;
- staff not understanding the issues confronting clients, being stubborn and not flexible enough to be innovative or accepting of innovation or open to other opinions;
- not enough Social Workers for the quantity of referrals including for all pre-allocations;
- lack of understanding of the time involved in the pre-allocations process;

- belief that Social Workers can fix long term entrenched issues and complex issues in a short length of time;
- doubts about the capacity of Social Worker to work with/assist people
- policies and procedures of Housing SA (fences people into rigid framework; hard to reconcile lateral framework with holistic framework and best interests of client);
- customer refusing to engage with Social Workers;
- access to some support services are limited to Families SA referrals only;
- Case Work Assessment Tool;
- way customers perceive they have been treated by Housing SA in the past;
- appointment of Social Workers not suited to the position, with Social Workers not willing to confront issues and deal with people with difficult behaviour and a range of complex issues;
- lack of integration of Social Workers within the office environment, including in terms of physical location within the office;
- lack of formal feedback mechanisms for Housing Officers and Social Workers to understand roles they play and the outcomes they achieve;
- feedback of information to Housing Officers about clients, especially when Case Work assistance is ceasing; and
- difficulties and reluctance in sharing client information between sectors of the Department for Families and Communities, i.e. between Housing SA, Families SA and Disability SA.

General barriers:

- limited time available to work with clients;
- lack of brokerage money to purchase necessities for clients, including physical items as well as other forms of support;
- lack of resources and appropriate services in the broader community for customers with particular needs; and
- lack of appropriate housing

Central to the success of this program then, has been a supportive management structure across the region, and within each office, as well as ensuring mechanisms are in place to address the suspicions and concerns of staff when new roles are introduced into the office environment. Additionally, providing all staff with feedback about the outcomes of the program is key to building ownership of it as an efficient mechanism for assisting clients and as part of this staff need to have a role in the ongoing development, evolution and refinement of the program. Managing relationships between staff and clients and within the office environment is of critical importance when implementing a new initiative such as this. And, should the program be rolled out across the metropolitan region broadly, or the state, understanding and acknowledging these issues is crucial in ensuring the success of the program.

3.6 Perceived impact of the social workers for clients

The quantitative report provides limited insight into the impact of the Case Work Support Initiative on Housing SA customers. As stated in that report, this is because the data collected on the program was set up to provide 'raw data for reporting purposes' on debt management, accommodation outcomes and disruptive tenancy complaints, reflecting 'Housing SA's role in tenancy and property management, rather than customer support'. Analysis of the level of maintained tenancies of Case Work Support customers in the Northern Region in the quantitative report, however, clearly identifies that the Social Workers have had a significant impact on the sustainability of tenancies:

An examination of Case Work Support Customers revealed a very high rate of maintained tenancies, or transfers to more appropriate accommodation. It is also worth noting that there were almost no evictions amongst Case Work Support customers, and that all of the “high risk” customers that received a degree of case management from a Social Worker have maintained their tenancy.

This qualitative review provides more detailed insight into the perceived impact of the Case Work Support Initiative on customers than can be gleaned from a quantitative analysis. It must be stated upfront here, however, that Social Workers can only work with customers that are willing to engage with them and/or who are willing to engage with supports if necessary. The discussions undertaken for this evaluation indicate that the Social Workers are very patient and try very hard to gain the trust of the customers referred to them, and it is only after this process that most customers are willing to work with a Social Worker to look at links to necessary support tools and services. The problem of resistance to engaging with a Social Worker is captured in the following observation made by a Social Worker:

Sometimes the tenant is adamant you are not going to deal with them so you just cannot. Some people are just against help no matter how many angles you come at them with.

Measures of success or positive outcomes for customers are dependent on expectations. And, as almost all of the customers being referred to the Initiative have multiple and complex needs it is not always easy at first to recognise the influence or impact a Social Worker has had on an individual's or family's life and, through this, on their tenancy outcomes. The following comments by Social Workers and other Housing SA staff provide some indication of the range of, and variation in, outcomes for clients because of involvement with the Case Work Support Initiative:

All clients we worked with had outcomes even if it was just engaging.

Best outcome is to get people to believe, [to] understand they have problems.

All clients I see are better off in some way – at least they have choices put in front of them, even if they don't engage.

We have a lot of success stories even those where we are not able to solve a person's problems but we can put them in space that is less harmful.

It can't be overstated that the Social Workers come in and do save tenancies some times.

Anecdotally I think with the Social Workers that there has been a reduction in tenancy failures. We will always have severe cases but where the Social Workers have done the best work is in limiting how quickly cases become severe and in some cases they have been able to turn people around and provide relief to a situation.

While Social Workers and Housing SA staff can comment on what they believe are the specific and broad impacts of the Initiative on/for customers, it is the case studies of the situations and issues that Social Workers have had to deal with that provide the most useful and powerful insights into client outcomes because of their interventions. A sample of case studies is presented at the end of this Chapter. The examples provided are both positive and negative. From these examples it is clear that for those willing to engage with the Social Workers, it has had a significant impact on their lives, as well as their tenancies.

3.7 Identification of alternative service models to achieve stated objectives of the Case Work Support Initiative pilot

It is beyond the scope of this evaluation to provide an in-depth exploration of alternative models to the Case Work Support Initiative and recent work by Habibis et al for the Australian Housing and Urban Research Institute does this.² Importantly, Habibis et al's research also notes that the currently accepted model of housing management for sustaining tenancies is the introduction of approaches that *support clients* to manage their tenancies – for example, through the introduction of professionals like Social Workers within agencies to assist clients. Additionally, actions proven to support tenancies must focus on intervening early to avert crises and address risk factors (including those related to life circumstances), preventing tenancy failure or the circumstances known to impact on sustainability of a tenancy.

The Case Work Support Initiative is an extension or variation on past programs to support clients with their tenancies. Notably, the Housing Support Coordinators within Housing SA offices in the recent past (and that were restructured out of offices in 2008) were a similar approach for facilitating and coordinating supports for clients with complex needs. The important difference between these programs is that the CWSI Social Workers are qualified professionals and there is a clearer separation of tenancy management and tenancy support with the current approach. This is an important factor in the design of the program, and must continue to be a feature of the program as it evolves and if/when it is rolled out more broadly. This is because it is generally acknowledged within the research around supported tenancy management that it is good practice to keep tenancy management and tenancy support roles separate and this more readily occurs with the involvement of professionally trained people in housing support roles.

In saying this, it is also important to note that there are a number of positives and negatives in incorporating support services directly with tenancy management. As outlined in this report the benefits include: quick interaction; ability to share essential information about clients; and quicker referral between tenancy management and support. These advantages, however, need to be balanced or judged (like a cost/benefit analysis) against customers' perception that Social Workers are part of Housing SA and there is no distinction between the roles of tenancy management and support. The risk here is that tenants may be more reluctant to engage if they see the support worker (i.e. a Social Worker) as part of Housing SA. The Social Workers have worked hard to allay any client concerns about perceived and real links between tenancy and support in the Case Work Support Initiative and the findings of this evaluation certainly point to this all working well. However, these insights remind us that having separate organisations providing support has its advantages in some circumstances as well.

3.8 Overall satisfaction with the pilot Initiative

This section and the following section on Thoughts on the Future of the Initiative outline the views of Housing SA staff towards the Case Work Support Initiative now that they have had almost two years to familiarise themselves with the role of the Social Workers, as well as work alongside them within their offices.

Various opinions were expressed on the impact of the Case Work Support Initiative on Housing SA staff overall. Though some negative attitudes toward the Initiative pervaded

²Notably, Habibis et al 2007 provide a review of sustainable tenancy approaches for managing demanding behaviour in public housing. The report provides and discusses a range of good practice examples.

such discussions, it is apparent that with the passage of time and refinements to the Initiative that the Social Workers have become increasingly valued as part of the Housing SA team. Moreover, most staff have gained a solid understanding of the Case Work Support Initiative, the role of Social Workers within the offices and in assisting clients, as well as understanding and recognising the ethos behind the program (as client-centred) and the importance of the Initiative as an early intervention and prevention strategy for tenancy sustainability.

Negative attitudes towards the Initiative were expressed by a select few Housing Officers. These attitudes tended to reflect these Housing Officers' previous positions within Housing SA, their experiences with Social Workers generally and, for most, their experiences with one particular Social Worker in the Initiative³, as well as frustration at the lack of two Social Workers in each office.

The Case Work Support Initiative has not changed my perception of Social Workers. I was a Housing Coordinator before the Social Workers and that was what we used to do [what the Social Workers are doing now]. So it hasn't changed anything for me. I have the knowledge, don't necessarily need the piece of paper to do that role. The piece of paper doesn't necessarily mean you are the best person for that role.

If I had to judge the program on the experience with [particular Social Worker] I would say it hasn't worked but having given a couple of cases to another [particular Social Worker] I see it can work.

I don't think it [the Case Work Support Initiative] is working well. We had two Social Workers before and now we are down to one. Because of the level of work the Social Worker is not picking up cases and reaching satisfactory solution of what we are looking for, because most of the time it comes back to Housing Officers and we have to fix the case up and follow through.

With only one Social Worker in the office the caseload keeps coming back to the Housing Office to deal with – if they are unable to take on the load we won't be bothered referring.

As noted earlier in this chapter, however, the vast majority of Housing SA staff and representatives of other support agencies interviewed for this evaluation were satisfied with the Case Work Support Initiative (see also section 3.9, below and Chapter Four). The sample of comments below shows Housing Officers' thoughts on the influence of the Social Workers for clients, and in assisting the Housing Officers. Fundamentally the comments demonstrate Housing Officers' strong satisfaction with the overall structure, and more so, the impact and effectiveness of the program.

They will advocate to the best of their ability for the good of the tenant.

Im not always happy with what other organisations do. Our Social Workers go out of their way to make sure the client is ok.

Think clients feel less threatened with Social Worker from Housing SA.

Find clients more willing to engage with Social Worker from Housing SA.

Social Workers know our policies and procedures and this can assist with fixing problems more quickly.

³ This Social Worker is no longer employed under the CWSI.

Our Social Workers are working with us, others in agencies may be working against Housing SA.

Housing Officers appreciate the opportunity to work together with someone on the difficult cases, that sense of support, another set of eyes to identify issues, to support the message they are trying to convey to the customer

When I first filled in the RAT and came here, I wondered how going to work at Housing SA as it has its policies and processes to meet and Social Workers have their ways. Attitudes may not meld with what trying to achieve, but now I don't understand how we could maintain tenancies without Social Worker assistance.

It is good often having a joint visit with a Social Worker. The Housing Officer is often the bad cop telling someone to clean up, but the tenant often does it for the Social Worker.

Have some tenants who have actually started to communicate with Housing Officers, more respect for Housing Officers, tenants are changing their minds about how bad a Housing Officer is [because their tenancies are now supported].

Many of our cases are resolved in a timely manner because of instant contact with Social Workers. They can quickly work with us, they can come into an interview room, but if ended up having to make an appointment 7-14 days down the track [with an outside organisation] the immediate need for response would pass.

We are now starting to see the long term benefits of their skills and abilities to resolve things long term whereas time pressures and competing pressures for Housing Officers means they have to deal with what is important at a point in time, not necessarily having the time and ability to check up on one case. Housing Officers can identify tenancy issues but they are not able to work long term with customers whereas Social Workers are able to retain a sense of ownership for a much longer time.

This last point was often the most repeated comment across the focus groups, with Housing Officers stating they do not have the time to deal effectively with the issues the Social Workers do. Also it was clearly acknowledged by the Housing Officers that the Social Workers have the expertise and capabilities to deal with complex issues; complex issues that are seen in an increasing number of clients and that have clear impacts on their wellbeing and household circumstances, and their ability to maintain and sustain their tenancy. (Further evidence for continuing with the Initiative, and its overarching value for staff, Housing SA generally and for clients in particular, is given in the next section).

3.9 Thoughts on the future of the Initiative

The current funding available for the Case Work Support Initiative expires in October 2011. Accordingly, all of the groups of stakeholders involved in this evaluation were asked to offer their thoughts on the future of the Initiative and particularly the potential for the program to be scaled back within each office. This was not an option that was favourably received by the vast majority of Housing SA staff, nor the representatives of other agencies interviewed.

There is a tremendous need for two Social Workers in the office. As time goes on the numbers of tenants housed facing issues is going to increase. We are stretched to get to every complaint now [and] once we lose the easier longer term clients and they are replaced by Category 1 clients, we are going to need more tools within each office to deal with these people.

Originally the Case Work Support Initiative saw the placement of two Social workers in each of the three Regional Offices in the Northern Region (and one Social Worker was later allocated to the Eyre and Western Region, based in the Whyalla Housing SA office).⁴ Currently, however, the Modbury and Elizabeth Offices are operating with only one Social Worker each. In many ways this has posed challenges for staff in these offices, and it is evident from discussions with staff in these offices in particular that two Social Workers is the preferred number within an office for the program to continue to be as effective as it has been for most of the duration of the program.

The idea of one Social Worker operating across the region with the most difficult clients was vehemently opposed. As one Housing Staff member noted:

One [Social Worker] in the region would not be successful – the office they are based in would dominate their time. We need an even spread across the state.

Another commented that:

If [management] go to one Social Worker, the program would have to be reactive rather than proactive in helping tenants.

It was noted by more than one staff member that this would fly in the face of the early intervention and prevention ethos of the program.

Two other concerns were expressed with this idea. First, it was widely acknowledged that the Social Workers are already working with the most difficult clients and so introducing this rationalisation of the program would require further definition of the role of the Social Worker and clear boundaries being set around case loads and duration of support. Second, such rationalisation of the program was considered to be an insult to its success and would undermine its effectiveness.

The idea of having one Social Worker in each office was slightly more palatable to some staff, mostly because 'one is better than none in each office'. However, it was noted in one office that having a Social Worker of each gender was important for the effectiveness of the program too, as well as allowing the flexibility of one Social Worker still being in the office while the other was away for whatever reason, including for (joint) home visits, case conferences et cetera. If the Initiative is to be scaled back to one Social Worker in each office, careful consideration will have to be given to their dual role within offices.

From the commentary on the program's future it is strikingly evident that there is a real sense of the increasing value and importance of this Initiative among staff. Consequently most staff would be very disappointed to see the program go, not only for themselves and the impact that having the Social Workers has had on their workloads, but particularly for clients.

The most telling comments in terms of the future of the Case Work Support Initiative speak for themselves:

⁴ The recent decision by Housing SA to use remaining funds from the Case Work Support Initiative to employ a Social Worker in the Marion Office indicates that management is considering ways that the benefits of the Initiative can be extended into other Housing SA regions.

...the fact that the program is only in the North is hard, it would be an advantage to roll it out more broadly.

I wouldn't be surprised if we had tenants advocating on their [the Social Workers'] behalf, with some of outcomes [they have] achieved.

It would be a real backward step if the program ceases. We have pilots here of all different programs and ... our office is keen to be involved in any pilot program that comes along. And there are many that have come and gone, can't remember what they were; don't miss them, but the Social Workers if they went it would be bad all round – for everybody.

And, finally,

Our business is to sustain tenancies so why take away one of the keys?

CASE STUDIES OF SUCCESSFUL AND UNSUCCESSFUL OUTCOMES FOR CLIENTS

Successful outcomes

Case S1

Social Worker involved with client at a very late stage. Customer is a female with a physical disability in a wheel chair. She has three children. Her husband died in their house. The Social Worker became involved with the client when cockroach fumigators said the house was uninhabitable. Through involvement with the client the Social Worker determined that there was a need to find the client and her children more suitable accommodation. The house was not accessible for someone in a wheelchair, and it was difficult to get the wheelchair into the house. The house has not been modified in the past as the male tenant, the client's husband who had died, was able bodied and had done everything for his wife and children. After her husband's death the female client had difficulty with daily tasks. She had to use crutches to get around the house, leaving her with no free hands for cooking or cleaning. She couldn't use the kitchen as there was no benchtop next to stove and with having to use crutches it was difficult to move things off stove. Often this led to her spilling food and this was then impossible to clean up for someone dependent on crutches to move.

These factors combined with a lack of basic life skills (because her husband had done everything for the family) and the grief of his death meant that the client was simply not coping with her situation. The Social Worker referred the family to Families SA who in turn referred them to Centacare and the TEAR Australia program; a weekly playgroup for ATSI children and their mothers and program for older ATSI children. The CWSI Social Worker continued to support the client in their involvement with TEAR, and also got CAMHS (Child and Adolescent Mental Health Services) on board to support the children. Continued work with the family revealed a range of other issues that needed addressing, such as drug and alcohol issues, financial issues (which required engagement of a financial counsellor), and schooling. As the Social Worker noted 'we got every man and his dog on board'. Had case conference with full tables of support workers from a range of agencies, including Disability SA.

The result of all this work was that the Social Worker was able to find the client a more suitable property, organised for an Occupational Therapist to work with the client and got her property modified to meet her needs.

The Social Worker worked with this client for 12 months to monitor how she was going. Once she was properly engaged with other services the Social Worker ceased involvement. The client now has a property she loves and which is fully accessible, she is addressing the significant debt she has from her last property (\$5,500) and there have been no complaints about the family from neighbours.

Case S2

Example of cooperation between Housing SA staff, Charity Link Australia and Wyatt Trust has seen a terminally ill customer experiencing homelessness obtain housing and become reacquainted with his children and grandchildren.

This customer came into a northern Regional Office in a distressed state and the front counter Customer Service Officer asked the CWSI Social Worker for her assistance. Social Worker spoke to the customer who was upset that his housemate had locked him out of his co-rented home and he was now homeless. The customer began to weep so the Social Worker took him aside, offered tissues and sat with him while he told his story. During this interaction the Social Worker discovered that he was a Cat 1 applicant who had severe health issues (end stage liver disease) and had recently been told he would probably not live more than 18 months.

Social Worker ascertained that Customer had safe accommodation for the weekend and suggested that he return next week for assistance with a Hotel room to be offered if he was still in need.

Social Worker spoke with the Allocations Officer and two weeks later the customer was offered and accepted a 1 bedroom property. Between this offer and the allocation date, the customer's property

was fire bombed and all his belongings were destroyed. The Social Worker completed paperwork for furniture and whitegoods assistance from Charity Link Australia and the Wyatt Trust. This included funds for a sofa bed for someone to stay at his house with him when he is unwell.

On the day of his allocation, Housing SA was notified by a friend that the client had fallen the previous evening, severely damaged his hand and was in hospital and due to have microsurgery to repair the damage. The allocation and furniture delivery was postponed and when he was released from hospital a week later, it all went ahead.

At last contact with the Social Worker, this customer stated that he has seen his 9 year old son and his two grandchildren who he had not seen in quite some time due to his unstable housing history. His health has improved and he has re-connected with some of his family members.

The cooperation of all staff and services involved has made this a story with a happy ending with the customer being housed in just over 5 weeks from the initial interaction at the front counter. As the Social Worker noted 'He has the dignity a home of his own can offer until his final days'.

Social Worker noted that this is an example of a 'good outcome from intervention at the front counter'. 'It was fortuitous he came in and we were here, having time to sit with him and talk'.

Case S3

Social Worker contacted a client to conduct a Pre-Allocation Assessment after receiving the file from Allocations Officer on November 22 2010.

Client was a young male who had been sharing a house with his alcoholic father. Because of this situation the mother of his 3 children was refusing to let him have access with them. This accommodation was lost after he came home and found his father who had hung himself in his bedroom. The property was in his father's name and as the client did not wish to remain in the property he found himself in need of alternate accommodation. He became very depressed and turned to using dope to cope with his loss and eventually found short term accommodation in a housing group for people with Mental Health issues.

After completing the pre-allocation assessment the client was unsure of moving to the northern suburbs due to their poor reputation, so the Social Worker gave him the address of the property so he could take the week to view the property from the outside and get a feel for the area. The client rang back after a few days and accepted the newly upgraded property. Because of his depression the Social Worker decided to leave this file open and to offer support to this young man as he has almost no family supports except for a brother who lives in the country. Social Worker completed a Wyatt Trust application to secure a washing machine for him.

Social Worker had some informal grief and loss counselling discussions with the client as he had very little understanding of how grief could affect a person and he thought he was losing his mind because he was still tearful and trying to make himself feel better by smoking dope. The client's literacy issues were compounding his depression as he could not fully understand the letters sent to him by the psychiatrist that he had been referred to by his GP or his job network counsellor. The Social Worker helped him to confirm the appointments he needed to re-schedule and encouraged him to seek formal grief and loss counselling with the psychiatrist or Counsellor once the appointments commenced.

At last contact the client was feeling much better. He had contacted his ex-partner and was working to re-establish the relationship with her so that she felt comfortable in letting the children visit with him in his home.

Ultimately the client was supported for approximately 4 months until the 18.3.11 when it was mutually agreed that he was sufficiently settled to close his file.

Case S4

Social Worker received referral following a home visit by a Housing Officer where minor property condition issues were identified and the Tenant appearing 'medicated'. Social Worker visited Tenant and the Tenant disclosed that he was dependent on alcohol and was on medication to treat his paranoid schizophrenia and depression. Tenant stated that he had recently been discharged from Joslin where he spent 5 days in detoxification but had not progressed into any rehabilitation programs. With further conversation with the client the Social Worker discovered that Tenant had regularly attended detoxification at a number of drug and alcohol support agencies. Tenant reported that he had been seeing a psychiatrist at Central Northern Health Services but his psychiatrist had left the practice and he had no further contact. Social Worker received a Signed Consent to Release and Share Information with Tenant's GP and Mental Health Services.

Tenant claimed that his parents provided him with weekly support for his housework and shopping. However, he was concerned about their ability to continue supporting him due to their advanced age. Social Work assessment concluded that client's needs included re-engagement with mental health services, treatment for his alcohol dependency and possible referral to a home support program.

Social Worker contacted mental health services while Tenant was present and made an appointment to see a psychiatrist. Mental Health Services said that appointment letters had been sent to Tenant and that he had failed to attend these appointments. Social Worker arranged to pick up client and transport him to the appointment. When Social Worker and Tenant arrived for the appointment they were met by a Mental Health Nurse who had been providing some support for Tenant. Up to this point the Social Worker was unaware of this supportive relationship.

Tenant gave permission for the Social Worker and Mental Health Nurse to be present during his consultation/case conference with the psychiatrist. The outcome of the meeting was that the priority was to treat the client's alcohol dependency. Tenant and the Mental Health Nurse explained that the reason why he had not been referred to a rehabilitation program was because it was too expensive and the tenant was afraid of losing his tenancy if he was absent from the property for a prolonged period. The Social Worker asked the client and the mental health clinicians how expensive the rehabilitation program was and nobody had any details.

At the end of the meeting with mental health services the Social Worker informed the mental health clinicians that he would make enquiries regarding Housing SA's policy re unoccupied property and the cost of engaging with a rehabilitation program. After discussing the matter with the Housing Officer, Social Worker clarified that the client could appoint his parents to be care-takers. The Social Worker contacted Drug and Alcohol Services of SA and other drug and alcohol support agencies and made enquiries to Uniting Care Wesley's Kuitpo Rehabilitation Program. Social Worker discussed tenant's situation with these services and was informed of the cost and process of Tenant entering the program. Social Worker then contacted Mental Health Services to update them.

Social Workers research found that Tenant's Disability Support Pension would cover the costs of the program with a small amount of cash left over. Social Worker contacted the client and gave him the contact details and then followed up with him and UCW to monitor tenant's self-referral. The client ultimately managed his self-referral and is currently on a 10-12 week waiting list where he keeps in telephone contact with UCW. The next step in the process will be UCW notifying him to spend a week in detoxification and then go straight into the 5-6 month rehabilitation program at Kuitpo. The Social Workers is currently monitoring the situation with weekly phone calls to the client. When the client is invited to go into detoxification the Social Worker will notify the Housing Officer to organise the care-taking arrangements for the property.

Case S5

Example of a tenancy incurring debt and the client had faced eviction over 12 times. Last year when the issue with debt arose again the Social Worker became involved as a result of the Housing Officer undertaking the Risk Assessment Tool. Within two meetings the Social Worker identified that the customer had gambling addiction which the husband and children were not aware of. The wife was good at hiding her addiction. Housing Officers and Team leaders honestly thought they were a low income family struggling to make ends meet. Housing SA tried to be as accommodating as they could. The identification of the gambling problem by the Social Worker saw the wife taking the proactive step to bar herself from local hotels. Additionally, the husband took control of the bank accounts; the teenage daughter became involved as well and the turnaround in the tenancy was 'fantastic'. Unfortunately since the Social Worker has withdrawn from this case things have reversed.

Case S6

Client is a tenant with severe mental health issues and alcoholism who lives on his own, in close proximity to neighbours. In this case the Social Worker has instructed Housing Officers that any disruptive complaints are to go directly to them. The Social Worker has also built rapport with neighbours so that now they ring up and speak directly to the Social Worker if there is a problem. They trust that the Social worker is doing what he can to work through issues with the tenant. Because of this process the neighbours do not place an official complaint as they know the Social Worker will deal with it and if Social Worker visits but not the Housing Officer then it does not need to be noted as an official complaint and this avoids involvement of the Disruptive Management Team.

Case S7

Example of interagency connections and success of CWSI.

Social Worker was contacted by someone from TIAS – the tenancy information and advisory service, who had a client living in very poor quality housing. The client had 4 children, three diagnosed with Asperger's, one child in the process of being assessed with Autism and the mother of the children also recently assessed as having Autism. The father of the family had given up his job to care for the family. The laundry in the house was unuseable and this was a major concern for the family and Social Worker.

The CWSI Social Worker spoke to the Allocations Officer in their office to see if there were any appropriate properties available for the family. Allocations Officer had four new builds available in the general area, although a little way from where the family lived. Social Worker discussed this with the family and they indicated that they were happy to move to the location where the new build property was available. A formal offer was made to the family.

The Social Worker completed all pre-allocations processes in line with their role under the CWSI. Property offered to the family was a four bedroom stand alone unit with small yard in a *cul-de-sac*. The family across the road from the property also has a child with Autism. The client ultimately commented to the Social Worker that 'you have no idea what a life changing experience this will be for my family'. For the Social Worker such cases make their job worthwhile.

Case S8

Customer is an Aboriginal elder with multiple chronic physical and mental health issues. Client was part of the stolen generation and had previous extensive history of homelessness, transience and substance abuse which she has successfully worked to resolve and move forward with her life. Client also indicated she wants to be available to care for her grand children who are on 18 year Guardianship of the Minister orders.

The client was renting privately, however, was facing imminent homelessness due to her lease expiring (at short notice) and the landlord refusing to make necessary modifications to accommodate the customer's ongoing disability/mobility issues. Despite the client contacting relevant agencies (TIAS and Anglicare), homelessness was imminent for her and her two grandchildren.

The CWSI Social Worker received an initial referral from an external Aboriginal worker (service provider) as the client was reluctant to approach Housing SA directly and had a mistrust of government agencies and non-aboriginal workers. The Social Worker attended the client's home and arranged all relevant documentation for her to complete a housing application and arranged for a needs assessment for urgent housing. The Social Worker then advocated for the client and liaised with internal and external service providers. Client was granted Category 1 and placed on the wait list.

Given the urgency of the customers need for housing and the high risk impact on the grandchildren, the Social Worker further advocated with the Allocations Officer and Operations Manager for the customer to be of the utmost priority for housing. This advocacy included using the strengths perspective to promote the need for the client to be housed close to her supports and schooling for her grandchildren.

Ultimately the client was offered a new build property (with all necessary disability modifications) to accommodate her and her two children. Once she was offered a property, the Social Worker then discussed local schooling options with the client and her grandchildren and liaised with enrolments and the Aboriginal Education Liaison Officer at the school of their choice. Social Worker then liaised with the client and other service providers around transitioning the customer and her grandchildren from her private rental to the Housing SA property, with minimal impact on the family.

With the support of the Case Work Support Initiative, this client has avoided homelessness and is about to move into her brand new property. She is positive that this long term stability and adequate accommodation will assist her to maintain and monitor her ongoing mental and physical health issues and also to continue supporting her teenage grandchildren to reach their full potential.

Unsuccessful outcomes

Case N1

Client is a young aboriginal single parent, with her children in care. Families SA workers were involved with her case and she had a history of prostitution. Client has undeclared family members staying at property not paying rent and her debt is increasing.

The Social Worker assisted the client with arrangements to receive youth allowance and also arranged for her to attend Housing SA office to set up re-payment arrangements to address debt. The client failed to attend. Social Worker then negotiated with Housing SA Operations Manager to delay eviction proceedings due to the tenant now receiving youth allowance and having the ability to enter into an arrangement to repay her debt. Social Worker again contacted the client and advised her of the seriousness and urgency of her current situation. She stated that she was nearby and would pop into Housing SA office to make arrangements to re-pay her debt. Tenant again failed to attend. Social Worker tried to follow up and made numerous unsuccessful attempts to contact her.

Finally, client received a notice from operations advising that her eviction proceedings were commencing. She visited the Social Worker arguing that the process was unfair. The Social Worker advised the client that the matter was now out of his hands and recommended that she make an immediate payment to demonstrate her willingness to re-pay her debt. Tenant advised that she would make a payment at the post office later in the day. Tenant failed to make any further payments.

Case N2

Female client with mental health issues. Client is linked in with Anglicare so had Social Worker in the background. At joint visit with the Housing Office, client expressed that she was not keen to engage with the CWSI Social Worker but was happy for them to visit her once a month. CWSI assistance was closed off as she was not interested. Social Worker later found out that Anglicare worker closed her off soon after CWSI support stopped and nothing much happened with the client for six months. After this period her Social Worker learned that her probationary lease not to be renewed and she will be homeless with two children.

Social Worker is frustrated that she was unaware of this, and also the debt issues that were the grounds for her being evicted, and if they had known this may have been able to help her to sustain her tenancy. This process, however, could only occur through another referral from disruptive complaints. When the client broke her recovery arrangement this would have been the opportune time to refer her back to the Social Worker for assistance, or even when she was put on the recovery arrangement in the first place as she hadn't had any issues with that previously.

Case N3

Client is a female with a partner and two children. She has mental health issues (Borderline Personality Disorder) with poly-substance abuse. She had a history of non-engagement with mental health service in a long term meaningful way, however, would utilize emergency services as necessary.

The client was referred to the Social Worker internally by Housing Officer/Team Leader following a home visit which raised concerns because of property condition. The Social worker attempted to engage the customer by phone and letters, however, the client did not engage easily. Social Worker conducted an assessment of the client and it was identified through this that the customer wanted to address her drug addiction issues as a means to resolve the risk of losing her tenancy. Social worker investigated and referred her to a detox facility and longer term drug rehabilitation service, however she did not follow through.

The Client's partner left the relationship and with the support of Families SA removed the children from the female client's care. The client's mental health condition deteriorated, she ceased engaging with the Social Worker and terminated her tenancy.

4 DISCUSSION AND SUMMARY

The overall evaluation of the Case Work Support Initiative pilot involves both a quantitative and qualitative analysis of the impact and effectiveness of the Initiative. This report, the qualitative analysis, stands in contrast to the inconclusive findings achieved through the analysis of measurable data, presented in the quantitative report. As of May 2011 it can be concluded that **the Case Work Support Initiative is an accepted, welcomed and very much valued** Initiative within the Northern Adelaide Housing SA offices and one that is having a **considerable impact** on the ability of tenants to manage and sustain their tenancies.

The quantitative review of the Case Work Support Initiative pilot, as noted in section 2.1.1 of this report, provides detail on the effectiveness of the Initiative to meet certain criteria including improvements in tenancy related debt levels; a decline in disruptive tenancy complaints; an increase in the timely accommodation of new and relocating tenants in appropriate housing; and improvements in the rate of maintained tenancies. The overall conclusion of this quantitative review is 'that at regional level, when measured against the objectives, each outcome is either inconclusive or does not show a positive impact from the presence of Social Workers.' This conclusion is qualified or tempered by recognition of the fact that Social Workers have been involved in the case management of only 4 per cent of the customers in the Northern Region. A true assessment of the Impact of this Initiative therefore is only possible through qualitative research, and fundamentally, for clients, this is a program that delivers qualitative and subjective outcomes.

The Case Work Support Initiative pilot is an extension or variation on past programs to support clients with their tenancies. Notably, the Housing Support Coordinators within Housing SA offices in the recent past (and that were restructured out of offices in 2008) were a similar approach for facilitating and coordinating supports for clients with complex needs. The important difference is that the Case Work Support Initiative Social Workers are qualified professionals whose role is solely to provide case work. It is generally acknowledged within the research around supported tenancy management that it is good practice to keep tenancy management and tenancy support roles separate.

During the initial implementation phase for this Initiative, and its later extension into the Eyre and Western Region, there was clearly a lack of attention paid to explaining the reasons why the Social Workers were being introduced into the Offices, how they were to be integrated into the operations of the offices, and how the practicalities of collaboration between Housing Officers and Social Workers would work. This lack of clarity and education around the specific roles of Housing Officers and Social Workers means the Initiative started slowly and in some instances the lack of information and understanding about the program caused a level of suspicion among some staff and in some cases resistance to the program – at least initially, as well as fears about Social Workers eroding the roles of Housing Offices. These concerns affected the acceptance of the Social Workers in the organisational structure in the offices, and resulted in lower levels of referrals to the Initiative than would otherwise have been the case.

While it is important to state that changes in overall management of the Initiative have clearly ameliorated this situation with regard to the Initiative in the minds of most staff – ultimately improving the structure, delivery and acceptance of the program and the outcomes for all Housing SA staff (including the Social Workers) and clients – there still appears to be a mismatch between how Social Workers see their roles valued and how the Housing Teams value what they do. Accepting the fact that the discussions held for this evaluation may be biased in favour of the views of those people more willing to talk positively about the Initiative, Housing Officers and Team Leaders generally appeared to significantly value the

Initiative and the beneficial outcomes being delivered for/with customers. Notwithstanding this, the Initiative has evolved slightly differently in each office and this evaluation shows that the model is working better in some offices than others. This clearly related to having supportive management dedicated to the philosophy of the Initiative as well as staff willing to accept innovation in their approaches to tenancy management and client support. Staff having the ability to input into the evolution and refinement of the Initiative has also been a key factor in their 'ownership' of the program and its effectiveness.

Many of the Housing Officers, though not all, acknowledged that the Initiative, and particularly having Social Workers available for case management of at-risk tenancies, has reduced their workloads to some degree and tenant issues that would have been ignored in the past were now receiving attention. Of note is the fact the Housing Officers identified that working in collaboration with the Social Workers had relieved stress levels and that the Social Workers played a role in debriefing Housing Officers if the activities of the day have been difficult for them to deal with. These latter two outcomes are clearly unintended consequence of the program and something many Housing Officers highly valued.

Assessing the effectiveness of Social Worker involvement in the pre-allocation process was a difficult task for the Housing SA staff interviewed for this evaluation. This said, most thought that at least anecdotally there was evidence that fewer clients were being allocated inappropriate housing. The Allocations Officers and Team Leaders interviewed, however, were much more confident of the positive impact of such an early intervention approach to the pre-allocations process. As outlined this report, to gain some measurable outcomes of the effectiveness of the pre-allocation process on customers will require further investigation. In terms of existing customers Social Workers commented that when they started in their roles there was little awareness among staff of the importance of early intervention or of early intervention approaches. Discussion with Housing SA staff, including the Case Work Support Initiative Social Workers, reveals a general belief that awareness of early intervention has increased over the life of the program to date. It must be noted the ability of a Social Worker to provide 'early intervention' in existing cases depends on the results of the Case Work Support Assessment Tool and Housing Officers recognising that there are issues that warrant the attention of a Social Worker and then advocating for the client to be referred to a Social Worker. Concerns were raised that there is not enough feedback regarding the outcomes achieved for clients referred by Housing Officers and such a process would improve Housing Officers' understanding of circumstances that may indicate the need for Social Worker intervention.

The Case Work Assessment Tool received some criticism as part of the evaluation process, although all participants agreed that the Tool is a useful way of quantifying concerns and some such type of assessment of risk is needed for clients. Many comments were made in interviews and focus groups about the need for further refinement of the tool. Clearly a review of this Tool is needed in terms of its structure, whether the Tool is meeting its desired aims and how to improve the usefulness of information garnered from the Tool.

The impact of this Initiative on customers can only be ascertained from the general feelings of Housing Staff and Social Workers and if they recognise a change in a customer's circumstances. A limitation of this Initiative is that Social Workers can only intervene when a customer is willing to engage. While the Social Workers can spend time trying to convince a customer it is in their best interest to accept help, sometimes they are just not able to provide assistance. The extensive range of examples of Social Worker involvement with clients, and intervention in their lives and circumstances, is a clear testament to the success of the program (shown specifically in the successful case studies provided at the end of Chapter Three).

Box 4.1, below, provides a succinct summary of the key factors that are considered essential for the smooth functioning and success of the program.

Box 4.1: Requirements for success of Case Work Support Initiative – for key groups of stakeholders

For all staff

- Clear and consistent definition of the roles of Social Workers (and all staff) within the organisational structure, and promotion of the rationale behind the Initiative.
- Mutual respect for the roles of Housing Officer and Social Worker and strategies/actions to promote mutual respect between staff.
- Promotion of collaboration between staff at all times, including allowing Housing Officers and Social Workers to undertake joint visits where necessary.
- Dedication to a client/customer-centred focus.
- Understanding and valuing early intervention and prevention approaches and their role in tenancy sustainability.
- Understanding the time involved in CWSI Social Workers being involved in the pre-allocations process.
- Understanding that the Initiative is not a panacea but one tool for assisting some clients, and some clients will not be helped; similarly, it is important to manage client expectations because of their involvement with the Initiative.

For management specifically

- Championing the value and success of the Initiative and early intervention and prevention approaches to/in tenancy management and client support.
- Allowing staff to have input into the ongoing refinement of the Initiative and the application of the Case Work Assessment Tool.
- Regularly communicating with all staff, and especially management, about the functioning of the program and outcomes for clients.
- Organising regular meetings with all staff to share learning about the Initiative, including outcomes for staff and clients. This is important for continually educating staff about the complex needs of clients and the range of, and changes in support, available for clients.
- Ensuring Social Workers, Housing Officers and Team Leaders have manageable case loads.
- Promoting an inclusive office culture.
- Strong and supportive management, dedicated to the client-centred ethos of the Initiative.
- Recognising and addressing roadblocks in terms of referrals, including from management and this includes referrals to other important client support programs and tenancy sustainability tools such as Intensive Tenancy Support.
- Clarification of the role of the CWSI Manager and their role with regard to the program, other Housing SA Staff, clients in the CWSI Initiative and with/for other important organisations such as ITS.

For Social Workers specifically

- Professional support for Social Workers with each office and in broader management structures within Housing SA.
- Setting clear boundaries around whom to support, in what ways they should be supported and for how long (with regard to the fact that this varies between clients and that current reform ethos emphasises support for as long as it takes).

For the Initiative generally

- Recurrent funding for the program. This is important for the Social Workers employed under the Initiative as uncertainty about the future of the program is taking a toll on the Social Workers.
- Careful selection of the Social Workers employed under the program, ensuring that they understand the distinct policy and procedures of Housing SA that will impact on how they deal with and assist clients. (A Team Leader offered a useful suggestion in this context; working with the Social Work departments of universities, for example, to offer practical placements/industry placements within Housing SA offices for trainee social workers).
- Revision of the Case Work Assessment Tool and treatment of the Tool as a 'living' document, needing regular refinement to reflect challenges and innovation in its practical application.

- Incorporation of feedback mechanisms in the program design – to share experiences, knowledge and outcomes (positive and negative).
- Appropriate physical placement of Social Workers in the office, to ensure maximum integration within the office culture and physical environment.

REFERENCES

- Habibis, D., Atkinson, R., Dunbar, T., Goss, D., Easthope, H. and Maginn, P. 2007, A sustaining tenancies approach to managing demanding behaviour in public housing: a good practice guide, Australian Housing and Urban Research Institute Final Report no. 103, AHURI, Melbourne.
- Housing SA 2011, Case Work Support Initiative, Quantitative Evaluation, Housing Services Central, Housing SA, Department for Families and Communities, Government of South Australia.

APPENDICES

Appendix 1: Position Description, Social Worker, Case Work Support Initiative, Housing SA



Government of South Australia
Department for Families
and Communities

ROLE DESCRIPTION

1. ROLE DETAILS			
Role Title	Social Worker, Housing SA	Classification Level	AHP1
Role No		Discipline	Professional
Division	Housing SA	Date Created	July 2009
Branch/Unit	Northern Adelaide Region	Date Approved	
Reports To	Supervisor, Social Worker Team	Review Date	
2. ROLE CONTEXT			
Role Summary	<p>The Social Worker, Housing SA is a role within Housing SA and is accountable to the Supervisor, Social Worker Team for:</p> <ul style="list-style-type: none">casework and case management for tenancies at risk.undertaking holistic assessments.providing support, services or referrals for clients.working in partnership with government and non-government agencies and clients.		
Reporting/ Working Relationships	<ul style="list-style-type: none">Supervisor, Social Worker Team (direct manager).Operations Manager.Team Leaders, Housing Officers and Allocations Officer.Tenant/client advocacy groups.Community Groups.Local, State and Federal Government Departments, public utilities, and other Non-Government agencies.		
Special Conditions	<ul style="list-style-type: none">Successful applicant will be required to satisfactorily complete a National Criminal History Record Check (NCHRC) prior to being employed and every three years.The incumbent in the Role is a Mandated Notifier of child abuse under the Children's Protection Act 1993.An incumbent may be required to drive considerable distances in the course of their duties and must possess a current Class C Drivers Licence.The incumbent may be assigned to another position/location at this remuneration level or its equivalent.		
3. QUALIFICATIONS			
Essential	A degree level qualification in Social Work leading to eligibility for (full) membership of the Australian Association of Social Workers.		

4. PRIMARY OUTCOMES AND ACCOUNTABILITIES	
KEY RESPONSIBILITIES	RELATED TASKS
Casework and Case Management	<ul style="list-style-type: none"> • Undertake case work and case management for complex clients at risk of tenancy failure. • Provide guidance and advice to Team Leaders and Housing Officers relating to case work and case management. • Conduct risk and needs assessments. • Maintain comprehensive case notes and establish appropriate record keeping systems to identify linkages/referrals that have been established. • Review risk assessments undertaken at point of allocation, or before, where tenancy failure is identified as a high risk. • Develop and manage case plans. • Chair case conferences where required. • Develop exit plans and coordinate case outcomes and progress to Housing Officers.
Professional Social Work Practice and Standards	<ul style="list-style-type: none"> • Enable and use the full range of social work intervention methodologies. • Contribute to the team's professional knowledge base. • Reinforce professional ethics and standards in decision making. • Exercise delegations wisely and fairly. • Identify opportunities to develop and implement client consultation and participation in a holistic manner. • Provide services that enhance outcomes for clients of the agency and in particular improve outcomes for Aboriginal people.
Program Management	<ul style="list-style-type: none"> • Liaise and participate with the case manager and other key stakeholders in the planning, implementation and monitoring of programs using a range of intervention techniques. • Undertake research to identify alternative options and best practices, providing written and oral reports. • Facilitate access to a range of interagency and community services.
Relationship Building and Linkages	<ul style="list-style-type: none"> • Source and record service providers and support linkages within regional boundaries to provide open and accessible information for Housing Officers. • Work with other services in service planning, practice and monitoring. • Develop, implement and promote effective communication techniques. • Work effectively with culturally diverse clients and co-workers. • Reflect and improve upon own professional practice. • Develop and maintain working relationships with external and internal service providers.
Organisational Contribution	<ul style="list-style-type: none"> • Understand and follow work place safety initiatives, identifies hazards and contributes to a safe working environment, as well as follow procedures to manage and minimise risks within the DFC. • Follow the principles of a sustainable working environment by following departmental greening initiatives. • Model ethical behaviour and practices consistent with SA Government Code of Conduct for Public Sector Employees and DFC stated values.

5. DFC CAPABILITIES (B)			
Relating & Communicating	<ul style="list-style-type: none">Communicate ideas and information, both written and verbal, in a clear and logical format.Identify and use appropriate resources and technology available to develop and maintain internal and external networks.Develop team relationships and encourage active participation from all team members.		
Client Focus	<ul style="list-style-type: none">Develop a clear understanding of issues from client's perspective.Resolve complex client issues, adjust approach to meet changing priorities and provide services that address the cultural needs of clients, and clients with a disability.Encourage colleagues and team members to achieve a high standard of service excellence.		
Achieving Objectives	<ul style="list-style-type: none">Manage workload and changing priorities.Guide and support others to help meet set objectives.Adjust activities/processes based on feedback.		
Personal Drive & Professionalism	<ul style="list-style-type: none">Establish links between current goals/initiatives and the departmental values.Evaluate personal progress and develop new approaches to increase knowledge base and skill sets.Take action when receiving feedback from others to improve strengths and development areas.		
Continuous Improvement	<ul style="list-style-type: none">Critically analyse issues, and investigate solutions or actions that contribute to improved departmental processes.Contribute innovative ideas to improve departmental processes and encourage others to contribute.Monitor data integrity and apply appropriate procedures for maintaining security and confidentiality.		
Respecting Cultural Diversity	<ul style="list-style-type: none">Take action and provide services that are inclusive of Aboriginal people and people from culturally and linguistically diverse backgrounds as well as engaging in learning about other cultures to better establish relationships and improve services.		
6. TECHNICAL CAPABILITIES			
1	Case Management – provide casework through assessment, intervention, support, networking, advocacy and making appropriate referral.		
2	Interventions Experience – utilise experience in undertaking brief interventions including counselling and behavioural change practice, to empower clients to make changes to improve well being.		
3	Conflict Resolution – clarify situations, act impartially and use influence, negotiation and persuasion to effectively mediate the conflict and devise a workable solution.		
4	Assessing and Minimising Client Risk – understand and evaluate the factors that contribute to tenancy risk and develop action plans to reduce or eliminate the risks.		
5	Analysing and Reporting – analyse and integrate information from a variety of resources to develop and deliver reports and presentations.		
7. DELEGATES APPROVAL			
ASSESSED BY:		Date:	Signature:
APPROVED BY:		Date:	Signature:

Appendix 2: Case Work Assessment Tool (Risk Assessment Tool)



Case Worker Support Initiative Assessment Tool

Customer/Tenant Details

Date: / /

Customer/tenant Number: _____

Customer/tenant Name: _____

Customer/tenant DOB:

Address: _____

Reason for contact

- ☐ Pre - Allocation
☐ HNA
☐ Category Review
☐ Probationary Review
☐ Home Visit
☐ Disruptive Complaint (DT)
☐ Debt
☐ Other (please specify) _____

Safety and Service Details

- ☐
- Interpreter Required
- ☐
- Health safety and service issues

Other Details

Housing/Allocation Officer Referring

Team Leader Checked _____

Social Worker

Date Completed _____

- ☐ ATSI
 - ☐ Refugee

Pre – Allocation Recommendation:

Pre Visit Assessment

This part of the assessment process is conducted prior to visiting the Customer/tenant in their home or at the time of an in-office interview. Using information available from the Account screen, Housing Needs Assessment, Notations, Support Letters and other appropriate sources, identify which of the risk factors listed below apply to the Customer/tenant and/or their household. As a guide, the risk assessment should be based on what has occurred within the last twelve months. Place a tick in the relevant box and then add the points corresponding to the identified risk. Identify whether the mitigating factors apply and deduct the corresponding number of points. Fill in the total number of points in the box provided.

Financial Issues: (includes debt to SAHT and others, and other indicators Customer/tenant is experiencing financial hardship)	Points	Tick
Debt is less than \$500	1	<input type="checkbox"/>
Debt is more than \$500-\$4999	2	<input type="checkbox"/>
Debt is more than \$5000	3	<input type="checkbox"/>
Debt is currently not arranged	2	<input type="checkbox"/>
Two or more broken arrangements in last 6 months (broken arrangements only)	3	<input type="checkbox"/>
Ezy-pay cancellation on one or more occasions	3	<input type="checkbox"/>
Debt is increasing	2	<input type="checkbox"/>
Customer/tenant is not making regular <u>debt</u> repayments or has a recent history of irregular debt repayments	2	<input type="checkbox"/>
Customer/tenant is not making regular <u>rent</u> payments or has a recent history of irregular rent payments	2	<input type="checkbox"/>
Customer/tenant is currently / previously bankrupt	2	<input type="checkbox"/>
Customer/tenant is behind in their non-SAHT rent	2	<input type="checkbox"/>
Electricity/gas/water is disconnected	2	<input type="checkbox"/>
TOTAL POINTS		

Disruption: (refers primarily to existing Housing SA tenants, however reliable sources of information about non-tenants may also be considered)	Points	Tick
Serious disruption within the last 12 months (Serious damage to property, harassment, assault, threats to life, health & safety, drug cultivation in home)	4	<input type="checkbox"/>
Moderate disruption within the last 12 months (Car burnout/noise/dangerous driving, intimidating behaviour that does not cause harm, house party, invasion of privacy, trespassing, verbal abuse, strange behaviour, property condition that impacts on neighbours.)	3	<input type="checkbox"/>
Minor disruption within the last 12 months (Noisy or unsupervised children, dog barking, noisy or out of control pets, inappropriate rubbish or refuse disposal, loud music, loud noise, parking disputes, foot traffic, home based business, foul language not directed at neighbours, lots of visitors that cause disturbance)	2	<input type="checkbox"/>
3 or more significant events of unsubstantiated disruption within the last twelve months	3	<input type="checkbox"/>
Occurs once a year	1	<input type="checkbox"/>
Occurs 3 or more times a year	1	<input type="checkbox"/>
Occurs once a month	1	<input type="checkbox"/>
Occurs 3 or more times a month	2	<input type="checkbox"/>
Occurs once a week	3	<input type="checkbox"/>
Occurs 3 or more times a week	3	<input type="checkbox"/>
Occurs Daily	3	<input type="checkbox"/>
Acceptable Behaviour Contract in place	-3	<input type="checkbox"/>
Under management of DMT	-3	<input type="checkbox"/>
TOTAL POINTS		

Previous Housing History:	Points	Tick ✓
Multiple prior tenancies or a history of unstable housing, history of transience (e.g. two or more tenancies within the last 2 years including multiple Housing SA transfers, multiple PRAS bonds, frequently moved between houses, frequent moves interstate or to other cities/towns)	2	
Customer/tenant has experienced homelessness	4	
Customer/tenant has been on eviction status or been evicted in the past	4	
Customer/tenant has had a PRAS bond claim	2	
Customer/tenant is actively engaging with their Housing Plan	-2	
TOTAL POINTS		

Disability/Health Issues:	Points	Tick ✓
Acquired Brain Injury	2	
Intellectual Disability	2	
Mental Health	4	
Sensory Disability (e.g. vision, hearing impaired)	2	
Physical Disability	2	
Other Disability	2	
Aged /Frail (e.g. persons aged over 65 years and has a form of functional impairment/medical condition e.g. significant impairment to mobility, slowed cognitive processing and/or experiences difficulty in managing personal care, safety and wellbeing)	3	
Other health issues impacting on tenancy (e.g. substance abuse, frequent hospitalisations)	2	
Disability or other health services involvement	-2	
TOTAL POINTS		

Other:	Points	Tick ✓
Property Access Concerns (Frequent/ongoing refusal to allow access to Housing SA workers)	3	
Child protection concerns (Families SA involvement, concern for children)	2	
Household is significantly overcrowded (2 or more bedrooms needed to meet Housing SA occupancy standards)	2	
A household member is currently/previously under the Guardianship of the Minister	2	
A household member is experiencing domestic/family violence	4	
Tenant has rescheduled a Home Visit 3 or more times	3	
Significant tenant charges have been applied in the last 12 months (Account Screen, follow up with Maintenance screen)	3	
A household member has threatened harm to themselves or others	3	
A household member has recently exited institutional care (e.g. prison, mental health facility, rehabilitation facility)	2	
Customer/tenant does not respond to Housing SA correspondence	4	
Property results in Occupational Health and Safety Concerns for customer	2	
TOTAL POINTS		

Visit/Interview Observations

This part of the assessment is conducted during a visit to a tenant's home. Observe the condition of the property and identify which of the risk factors listed below apply. Place a tick in the relevant box and then add the points corresponding to the identified risk.

This part of the risk assessment applies to tenants only and does not need to be completed for applicants.

Property Condition: (Observation)	Points	Tick ✓
Minor Damage (broken windows, damaged fly wire screens, slight wall marks, long grass etc)	2	
Serious Damage (some holes in walls, broken or missing doors, broken sanitary ware and other damaged plumbing or electrical items, seriously overgrown yards, car bodies on the premises)	4	
Major Damage (where there is extensive non fair wear and tear damage throughout the property, fixtures and fittings smashed, wiring and other appliances in a dangerous condition due to misuse or interference)	6	
Hoarding (e.g. difficult to access some rooms, accumulation of refuse, garbage or other items of little value)	4	
Squalor (e.g. floors, walls, bathroom, kitchen are dirty, presence of vermin, unpleasant odour)	4	
External Property Condition concerns (e.g. long grass, excessive rubbish in yard)	2	
No Gas/Electricity/Water Connection	4	
Failure to report significant maintenance issues (including fair wear and tear charges)	4	
TOTAL POINTS		

Social/Living Skills: (Observation)	Points	Tick ✓
The property is in an unhygienic state (the property has significant mould, unclean cooking surfaces, large amounts of dust etc.)	3	
Customer/tenant has difficulty communicating fluently (e.g. does not speak English fluently, speech disability, intellectual disability)	2	
Customer/tenant requires a high level of assistance to complete forms, read letters or write down information	2	
Isolation (appears to have limited supports/limited contact with others)	3	
TOTAL POINTS		

Support Mitigation/Follow up questions

Ask the customer/tenant the questions below to identify the level of supports they have in place. Only ask those questions that are relevant, based on the pre-visit assessment.

1. Does **anyone** regularly provide you with care? (e.g. paid or unpaid care on a **daily** basis)
 Yes ☐ No ☐
 If yes ⇒ What is your Carer's name? _____

2. Do you currently receive assistance on a **regular** basis from any support agencies or relatives, friends etc? (e.g. regular weekly or fortnightly assistance from Anglicare, Uniting Care Wesley, Disability SA, Domiciliary Care, Mental Health Services etc)
 Yes ☐ No ☐
 If yes ⇒ Please provide the following information:

Type of Assistance	Who is providing the assistance	How often is assistance provided
<input type="checkbox"/> Mobility		
<input type="checkbox"/> Personal Care		
<input type="checkbox"/> Shopping		
<input type="checkbox"/> Banking		
<input type="checkbox"/> Meals (e.g. Meals on Wheels)		
<input type="checkbox"/> Financial counselling		
<input type="checkbox"/> DV counselling		
<input type="checkbox"/> General counselling		
<input type="checkbox"/> Cleaning		
<input type="checkbox"/> Gardening/maintenance		
<input type="checkbox"/> Occupational therapy		
<input type="checkbox"/> Disability Support		
<input type="checkbox"/> Mental Health Support		
<input type="checkbox"/> Other (specify)		

Do you have a caseworker that we can contact? ☐ Yes ☐ No

Name: _____ Phone No: _____

3. Does the customer have a Non-SAHT Debt? (Answer based on pre visit assessment)

Yes ☐ No ☐

If yes ⇒ Has your debt decreased over the last 3 months?

Yes ☐ No ☐

Have you received any financial counselling?

Yes ☐ No ☐

If yes ⇒ Are you managing within the limits of your household budget?

Yes ☐ No ☐

Support Mitigation	Points	Tick ✓
Customer/tenant has a Carer who regularly provides care	-3	
Customer/tenant receives effective assistance from an agency, relative or friend etc. on a regular basis (-1 point per type of assistance provided)	-1	
Debt has decreased over the last 3 months	-2	
TOTAL POINTS	-	

After Visit

Add all the scores for each of the life domain assessments to determine the total points accumulated and place this number in the appropriate box. Housing Officers should also write down which referrals or follow-up actions they intend to make as a result of the information gathered throughout the risk assessment process. For instance, if the customer/tenant has a significant debt which is not currently being managed, then the Housing Officer should make a referral to a financial counsellor. Where significant property condition concerns are identified, tidy up notices and a follow up visit should be arranged and recorded on this form. Any contact details of persons currently providing support to the customer/tenant should also be recorded within the appropriate life domain.

Life Domain	Total # of points	Follow up actions to be completed by HO - referral to support agency - follow up visit - issue tidy up notice - contact support agencies - organise case meetings etc.	Contact details for agencies/individuals currently providing assistance to the tenant/customer
Financial Issues	+		
Disruption	+		
Previous Housing	+		
Disability/ Health issues	+		
Other	+		
Property Condition	+		
Social/Living Skills	+		
Support Mitigation	-		
Total	=	<input type="checkbox"/> 20 or more points	High Risk ⇨ Referral to Social Worker
		<input type="checkbox"/> 12 – 19 points	Medium Risk ⇨ Follow up actions as required
		<input type="checkbox"/> less than 12 points	Low Risk

Assessed By: _____

Office Location: _____

Recommend Referral to SW: Yes ☐ No ☐

Additional Notes/Comments:

Critical Date ____/____/____ (If needed)

Reason _____ (eg eviction pending, RTT order etc.)

HO recommends the SW intervention to be :

- ☐ Consultation only with Social Worker
- ☐ Consultation and Joint Visit with Social Worker
- ☐ Intensive Social Work Support

Critical Date ____/____/____

Priority Code _____ (P1 = 24 hrs; P2 = 5-7 work days; P3 = 7+ work days)

Reason _____ (e.g. eviction pending, RTT order, Ministerial etc)

SOCIAL WORK Team agrees to:

Intensive SW Support
Comments:

Yes ☐ No ☐

Consultation with SW only
Comments:

Yes ☐ No ☐

Consultation & home visit with SW only
Comments:

Yes ☐ No ☐

Appendix 3: Guiding questions for the CWSI evaluation

For focus group with Social Workers

1. Can you talk us through the typical process for a client whose name has come up for housing?
2. How did you think the Social Worker role would work within the office? How does it work in practice? Has it changed?
3. Overall, what do you think is working well with the Initiative? What is not working well?
4. How was the RAT intended to work? Who would use it and when? How does it work in practice?

For interviews with individual Social Workers

1. How easily was the SW role accepted in the region
2. When you first joined the office what was your sense of staff awareness of EI. Has this changed? (for both – how do you know – ie look for evidence)
3. *Only if we find out that HW make direct referrals:* who refers clients, what reasons for referral, are referral practices consistent across HW staff?
4. What kind of support do you provide? (prompt: information, 1-1 support, referrals/linkages (if so to whom))
5. Has the introduction led to positive outcomes for clients? What evidence is there?
6. What (if any) are the barriers to achieving outcomes for clients in this role?
7. How does the CSWI fit with the broader service system in this area? Which external agencies do you work with – how hard/easy has it been to develop relationships with these agencies. Are there agencies you have tried to work with but been unable to – why
8. Case stories – could you give an example of a success story and one that wasn't a success

For focus groups with Housing Officers

1. How does the CSWI fit within the role of HSA, within this office?
2. How do you see this CWSI fitting with other forms of support for tenants? Other processes available?
3. When would you refer a client to the SW? Prior to SW being available, what would you do with this kind of client?
4. How useful is the RAT, when do you use it, how, what difference has it made to your work?
5. Has the presence of the SW changed knowledge, practices, workloads or views of staff in the office?
6. What is working well, why
7. What is not working well, why
8. Has the introduction led to positive outcomes for clients? What evidence are you aware of?
9. Case stories – could you give an example where you made a referral/know of a referral which is a success story and one that wasn't a success

For interviews with other service providers and agencies

1. What has been your involvement with the CWSI?
2. How do you see it fitting with other support options available to HSA tenants?
3. In your view, has it been effective?
4. If part of ITS/DMT, how do you see this support program fitting with the ITS/DMT?
5. If you were advising HSA on the future of the Initiative, what would you say? Why?

Appendix 4: Examples of range of agencies CWSI Social Workers have established working relationships within the Northern Region

Aboriginal Family Support Services (AFSS)
Aboriginal Home Care
Aboriginal Muna Paiendi Mental health services
Aged Care Assessment Team (ACAT)
Afghan Society
Afghan United Association
Anglicare SA
Anglicare SA Aboriginal and Torres Strait Islander services
Australian Refugee Association
Catherine House, Sisters of Mercy
Central Domestic Violence Service Inc (CDVS) – Central
Central Domestic Violence Service Inc (CDVS) – Eastern Region
Central Domestic Violence Service Inc (CDVS) – Western Region
Centacare (Domestic Violence and Homelessness) – Whyalla Social Worker
Centacare Personal Helpers and Mentors program (PHaMs)
Centacare WODLI ('So As Not To Be Without A Home' program for Aboriginal people
Central Northern Adelaide Health Service
Central Northern Adelaide Health Service – mental health services, northern.
Child Abuse Report Line, Department for Families and Communities
Drug and Alcohol Services SA (DASSA)
Department of Education and Children's Services (DECS)
Department for Correctional Services
Disability SA
Disruptive Management Team
Domiciliary Care
DRUG-ARM SA (especially northern, and north-eastern offices)
Eastern Community Mental Health Service, Central Northern Adelaide Health Service
FAIRS
Families SA
Families SA – Financial Counselling
Families SA – Community Youth Justice Program
Families SA – Care and Protection Team
Housing SA central
Housing SA northern region offices
Hutt Street Centre
Interpreting and Translating Centre (interpretation services), Government of South Australia
Intensive Tenancy Support program (Anglicare)
Joslin Detox Services
Legal Aid
Lyell McEwin Hospital
Migrant Resource Centre
MIND Personal Helpers and Mentors program (PHaMs)
Muggy's Accommodation Service, Salvation Army (for children under Guardianship of the Minister)
No Interest Loans Scheme (NILS)
NOMAD
North Adelaide Waste Management Authority
Northern Assessment and Crisis Intervention Service (statewide emergency service)
Northern Domestic Violence Service Inc.
Northern Carers Network
Northern Mobile Assertive Care Services (MACS), SA Health

Novita Children's Services
Nunkuwarrin Yunti Inc (health care and community support for Aboriginal and Torres Strait Islander people)
Older Persons Mental Health Unit
Playford Community Fund Inc.
Post Care Services, Department for Families and Communities
Private local skip/bins contractor
Public Advocate
Public Trustee
Royal Adelaide Hospital
Salisbury Council
Salisbury Emergency Relief Fund (Federally funded program)
Salvation Army
Salvation Army Towards Independence Bridge Programme (drug and alcohol recovery)
Salvation Army Doorways of Hope programme (homelessness)
SAPOL
Service to Youth Council
Sudanese Community Association of Australia Inc.
TEAR Australia (weekly playgroup for Aboriginal children and their mothers and activities for older aboriginal children – delivered in conjunction with the Adelaide Congregation of the UCW AICC)
UnitingCare Wesley
UnitingCare Wesley Aboriginal and Islander Christian Congress (Adelaide Congregation)
UnitingCare Wesley Byron Place
UnitingCare Wesley Kuitpo Community (rehabilitation program for substance misuse)
Wondakka Community Recovery Centre (mental health)
Wyatt Trust

Appendix 5: Example of Collaboration between Team Leader, CWSI Social Worker and Housing Officer, from *The Buzz*, May 2011

Together we work: Team Leader, Social Worker and Housing Officer - The Buzz - Corporate News - - Windows Internet Explorer pro

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The Buzz

Together we work: Team Leader, Social Worker and Housing Officer

05-05-2011 2:00 PM 4

A Housing SA customer faced with unpaid rent, recently met with Lynne Evans, a Team Leader at the Elizabeth Office. Recognising the individual's level of stress, she asked Social Worker Carol McCann to join her in the meeting.


Lynne and Carol discovered the customer had two major upheavals which had taken a heavy toll on his life. Following the death of his sister, he and his partner, who had two children, took on his sister's two children. Shortly after, his partner left leaving him to care for four children on a single income.

After making the necessary arrangements for his rent, Carol's next issue was dealing with managing his debts. An appointment was arranged with Sue Kaipara, a Housing Officer with a financial counselling background, to find possible solutions.

At a follow-up meeting, they devised a payment schedule to reduce the bills to a manageable amount. Sue then applied for grants to settle his other debts, which included school fees and uniforms. She also applied to an agency for a C-Pap machine, which he needed for sleep apnoea, but could not afford.

The outcome has made a huge difference to this customer and his family. He has since thanked the team and has been following the advice and direction to get his life back on track.

Our congratulations to Lynne, Carol and Sue for a job well done in identifying the needs of this customer and helping him regain his financial independence.



Carol McCann, Lynn Evans and Sue Kaipara

Housing, Carers, Metro, Anti-Poverty, Client, HSA, Staff, Partnerships, Print

COMMENTS

melkyd

05-06-2011 12:01 PM

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COMMENTS

 **melkyd** 05-06-2011 12:01 PM


What a great job. The respect and compassion you have shown this man is amazing, particularly since he was obviously trying very hard to cope with four children who are also grieving for the loss of a parent. You ladies are to be utterly commended for not turning your backs and buck-passing when someone who is obviously distressed has approached your service. I know from personal experience just what a positive difference having an advocate can make for life long changes particularly when trying to negotiate with debt agencies who can be both ruthless and relentless in their pursuit of "what is owed". Some corporations can be almost devoid of compassion to a person's circumstances. I had a financial counsellor from another organisation who advocated on my behalf to fight a credit card company and after 8 months of fighting (including working with the Ombudsman in the end) the credit company reversed the majority of the debt. I think I will be indebted to this woman for her advocacy for the rest of my life and I cannot tell you how much the relief of having a manageable sized debt changed things in my life - although the process we had to go through to get to the end was simply awful and the stress until the debt was reversed was immeasurable. I hope people in your office are maintaining strong and positive relationships with this family to ensure they keep on top of things and stay afloat as I also know how necessary that is too. Keep up the good work! It's wonderful to hear about your efforts. You all should be very proud.

 **jodijo** 05-09-2011 9:42 AM

well done ladies i am very proud to work with you all and will be hitting you up for advise as usual

 **Emma** 05-09-2011 10:14 AM

A great example of how just a small amount of compassion can go a long way. Taking just that little bit of extra time and effort has obviously changed this persons life - probably more than we realise. Proud to be working amongst such a caring team of DFC staff.

 **marmey** 05-09-2011 4:12 PM

Well done to you all - a great story

LEAVE A COMMENT

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