**Innovative Workforce Fund: Good Practice Report**

This Good Practice report is a companion to the information about the Innovative Workforce Fund (IWF) projects on the dedicated IWF website [www.workforce.nds.org.au](http://www.workforce.nds.org.au)

The website presents the experience and lessons generated by projects, including project snapshots, tools and resources and full project reports. Projects within each thematic group are compared via a set of questions specific to that theme. This report adds to this information and analysis by drawing out overarching themes and lessons. It is set out in three sections:

1. The first describes the approach to IWF program design and management.
2. This is followed by a description of IWF outcomes under each theme heading. It identifies the approaches or resources that can be immediately applied and makes recommendations about the next steps for building on project outcomes.
3. The final section reflects on lessons for commissioning and managing workforce innovation initiatives.

# Program design and management

Thirty projects were funded out of 253 applications across two rounds. The rounds were open for relatively short periods (as shown below) because of the tight Fund time-table:

* Round 1 6 March - 27 March 2017 – 168 applications received
* Round 2 31 May to 16 June 2017 – 85 applications received

Round 1

Round 1 projects targeted the Australian Government’s stated theme areas:

*Stream 1:* Redesign support worker roles and test new work roles including strategies to improve access to allied health-related supports in areas of thin supply such as shared workforce and allied health assistant models.

*Stream 2:* Streamlined administration practices such as human resources, recruitment and retention of staff, including work arrangements that demonstrate more effective workforce utilisation, supervision and support.

*Stream 3:* Role of technology in workforce practices.

*Stream 4:* Workforce development in rural and remote areas (including Indigenous workers), and strategies to build capacity to attract and develop the workforce in thin markets.

The assessment methodology was developed with the input and approval of the Independent Advisory Group

Rigorous assessment methods were used, with the following four criteria being scored and weighted by panels of assessors:

1. Innovativeness
2. Impact
3. Project design
4. Value for money

Recommendations were made about Round 1 projects on April 13 2017; the Minister’s approval was given on 4 July 2017.

Round 2

Round 2 projects were similarly assessed but the themes Round 2 projects targeted were more specific than the broad areas identified for Round 1. Round 2 reflected areas that the Independent Advisory Group felt were not adequately covered by Round 1 projects. These were:

*Stream 1:* the innovation process

*Stream 2:* utilisation of the workforce

*Stream 3:* participant led projects on quality and workforce.

Round 2 projects were approved by the Minister on 16 August 2017.

All selected projects had signed project agreements by 22 September 2017. A late project, replacing one that returned its funds, was funded in July 2018 and will complete in March 2019.

Project coaching team

A Project Coaching team, consisting of 8 coaches, was formed in July 2017. Each coach was allocated approximately 4 projects each according to their field of expertise. Projects were informed that project coaches were available for support and monitoring and most worked with their coach throughout the project’s life.

The role of project coaches was four-fold:

1. to be a critical friend to projects, questioning assumptions and drawing out the program logic
2. to build capability for self-learning by collecting, analysing and applying experience
3. to act as a reference point to identify opportunities for cross-project connections and to connect projects to other relevant expertise and resources
4. to advise the NDS Project team about at-risk projects that could not be easily managed via a positive coaching approach.

The coaching team was made up of experts who could support others to develop and apply project management skills. They also had a depth of experience in workforce-related issues. Each had a specialist area that was the basis of the match with their suite of projects.

A full day coach’s induction was held in mid-July. Following this the coaches contacted the projects and discussions commenced. By 15 September 2017 all coaches had met with their projects at least once and subsequently, coaches met with project coordinators on average monthly.

Coaches communicated regularly with NDS and the project team, including the Project Consultant, and also participated in team meetings. Communication was facilitated via a social media platform, Slack. Specialist web writers were used to stimulate creative ways to collect and use project artefacts such as audio recordings and images.

Project methodology recommendations

The main issue for projects was the short project time-frame. It was originally intended that all Innovative Workforce Fund projects be complete by May 2018, just over one year. Since Ministerial approval for selected projects did not eventuate until August 2017 project life-spans were even shorter – around 10 months for Round 1 projects and less than 9 months for Round 2 projects.

Later in 2017 the project end date was extended from May 31 2018 to 30 August 2018. However, the extension was received a little late in the piece to be of use to all projects. Some had created budgets which did not allow them to extend project time. Others had staff members on fixed term contracts. Initially only 17 of the 29 funded projects applied for the extension, though subsequently others also extended their final reporting dates.

Proponent organisations had difficulty starting up quickly, because generally they did not have spare staff on hand, and many found it hard to recruit quickly. A project time-frame of two years would have allowed:

* a more thoughtful phase of project set-up
* adequate time for recruitment of project staff
* more time to connect projects that were working on similar issues
* more time for results to be achieved.

# Lessons by theme

This section provides an overview of the outcomes achieved by IWF projects by theme and recommends the next steps required to advance this work. The approach highlights lessons emerging from multiple projects and cites examples of individual projects to illustrate these insights.

## Theme One: Designing service user-led support

### Summary

* **Summer Foundation** and **JFA Purple Orange** tested approaches and developed tools to empower service-users to express and communicate what they are looking for in their workers and how to meet these needs. In the Summer Foundation’s project participants with complex support needs created training videos for their support workers. Story videos were also created in the JFA Purple Orange project which documented tips and traps and other resources for self-managed users, families and workers.
* Projects from **Griffith University, UNSW** and **Community Living Project** provided detailed descriptions of the relationships between service users and support workers. They provide insights into what the ‘right relationship’ means for the skills, values and training of workers, the quality of support that service users need and the organisational capability needed to support these ways of working.

More information is on the IWF website at [www.workforce.nds.org.au/category/designing-service-user-led-support](http://www.workforce.nds.org.au/category/designing-service-user-led-support)

What does it mean to be ‘person-centred’? What do ‘self-directed’ or ‘service user-led’ services look like and how do ‘empowered relationships’ between support workers and service users operate effectively? While these terms are widely used, they are often vague and poorly understood. Much of the initial work to build and demonstrate these ideas has been pioneered by passionate advocates over many years. The NDIS provides both opportunity and expectation that these arrangements move from the margins to influence mainstream service delivery.

These projects both promoted confidence for people to self-manage their support as well as supporting more empowered relationships between those requiring and providing support. They cover both self-managed and provider-delivered supports. Evidence suggests that self-managed arrangements can provide positive outcomes for both service users and workers. Whether people choose to fully self-manage or not, people who rely on home-based support need to manage at least some aspects of their relationship with workers or depend on their family members to do this.

### Common practices and shared lessons

**Opportunities for active engagement** All projects successfully demonstrated ways to support mutually beneficial relationships between people with disability and those who support them. Stand-alone resources and tools that the projects produce describe practical ways for people to explore and express their thoughts and preferences. They invite conversations that move away from defining goals to more informally explore what matters to each person.

The organisations hosting these projects are already committed to person-centred practice. They illustrate that, even when practitioners base their work on person-centred approaches there is scope to deepen understanding of what this means. The Summer Foundation shows how practice changed when complex needs participants have the chance to use their own words, and often, their own voice to express what matters to them. Each of these projects illustrated the mutual benefits that come from participation that builds the confidence and satisfaction of people with disability. Workers experience similar benefits as they understand more about what matters most to the person they are supporting.

**New ways of structuring and describing support** The job descriptions and advertisements describing support had a radical make over, moving away from the language of personal care to reflect expectations of the role, such as social connector, lifestyle coach, business mentor, to name just a few. This finding is common across IWF projects in other themes.

**Addressing both sides of relationship** All projects started with understanding the participant and supporting them to define and express their needs and preferences. The organisations pursuing these models already had a strong capability to do this. An unexpected learning for some is that it was equally important to support workers to work in this way. For example, CLP’s revised family-led support model includes a new role of Inclusion Coach to facilitate people/family and worker relationships and support all parties to participate effectively in their family-led model.

JFA’s research sets out the case for self-management and highlights potential risks associated with poorly managed relationships. People with disability and their families talked about the additional responsibilities that come with taking on formal responsibility, lack of information and support as well as practical problems such as lack of back up and the risk of losing good workers to other employers. For workers, problems can include staff isolation, lack of induction and ongoing training, insufficient and broken hours of work and blurred boundaries where workers can feel pressured to do more than they are paid for or are not comfortable or confident to do. Although some workers were very satisfied with their pay and conditions, this was not the case for everyone and working in this way also required workers to be better informed about their rights and obligations under different forms of engagement.

### What can be scaled up now

These projects highlight an appetite among people with disability and their families to have access to advice and support about the different options and arrangements available to engage and manage their supports. Resources developed by IWF projects complement the recently released NDIS Guide to Self-Management, among other resources that support self-managed arrangements.

The following stand-alone resources generated by these projects are ready for distribution. See links on the IWF website at [www.workforce.nds.org.au/resources](http://www.workforce.nds.org.au/resources)

* The ‘how to’ guide and related examples created by Summer provide practical guidance on how participants can create a short video to instruct workers on their needs and preferences.
* Videos profiling self-managed workforce arrangements and related Tips and Traps were coordinated by JFA Purple Orange and their partners. Resources on This includes tips on topics like recruitment, interviewing, training, team building, giving and receiving feedback, and employer/worker relationships are covered.
* The project led by UNSW produced a simple guide for use by participants and their support worker to strengthen the relationship between them with both sides feeling good about their relationships.
* The Seven Steps to Self-Direction project from Griffith University created a 7-step workbook to support participants and their families to explore and establish appropriate supports and ensure strong teamwork with ‘the right relationships’ in place.
* CLP’s family-led model project yielded a booklet for people with disability and their families who are looking to strengthen opportunities to take leadership in the day to day management of their support even while that support is provided via a service.

### What requires further work

**Promote and track what works:** Within funding timeframes it was not possible to assess how useful or effective these tools and strategies are beyond very small user trials. It would be useful to track take-up and feedback from people who use these tools to understand impact on quality of relationships and support.

Most of the approaches rely on the active involvement of families and friends. Testing and monitoring should also assess how these tools can be used by people who lack this layer of support or whether for them, different approaches need to be developed.

**Consolidate information and support self-managers:** Available evidence suggests a link between self-direction and overall improvement in health and wellbeing. The next step for government and the NDIA is to consolidate relevant resources and incorporate them as part of an active strategy to promote awareness and build confidence and capacity of service users to explore self-direction. Funding communities of practice that provide opportunities for people with disability and their family and friendship networks to learn from others about these options and the tools available to support them would improve the likelihood that people will explore these opportunities. Currently pre-planning is largely unfunded and delivered by service providers.

**Provide advice and support to workers:** Most projects rightly focus on building agency and capability of participants to exercise greater choice and control over their own supports. Projects also highlight the need to concurrently support workers to understand opportunities, rights and responsibilities to provide supports in new ways and contexts. This is currently a gap that should be addressed.

**Clarify link to pricing:** The tools and methods demonstrated by these projects facilitate people to explore their interests and express their preferences. For people with complex needs, this type of support could be part of support work, support coordination or allied health assessments. The NDIA should review any pricing impediments and advise both planners and service providers on the conditions under which these types of good practice can be funded via Plan and Financial Capacity Building, Allied Health Individual assessments and/or assistance with decision-making, daily planning, budgeting. The projects highlighted the long term benefits to service users and outcomes under the Scheme that can result from improved support relationships.

**Take-up by service providers:** While self-management is one option, all providers should embed practices to promote empowerment and mutuality in their support models. The projects describe what person-centred practice looks like, but offer limited insights about the practicalities of integrating these approaches into business models. The CLP project most directly explores this challenge but, as much of their experience has developed under state-based funding conditions, it provides limited insights about viability under the NDIS. Pricing should incentivise providers to promote increased independence, which may include supporting a transition to self-management. Further work should explore the implications of implementing these approaches. For example, establishing ‘right relationships’ takes different amounts of time depending on the individual participant and worker. How do organisations budget for this level of flexibility? how do they balance client control over staff selection and rostering with offering sequential and adequate hours of work to staff? what expertise do service providers need to support and facilitate these arrangements and how could peer workers contribute?

## Theme Two: Servicing markets where demand is low

### Summary

The relationship between place, health and wellbeing is increasingly recognised and reflected in the emphasis on building place-based supports to meet the needs of people with disability and maintain connection with local communities. Projects under this theme demonstrate approaches to building or extending local capacity to deliver supports to locations that are poorly serviced and to support people considered ‘hard to reach’. Strategies broadly divide into two groups. One relies on using technology to connect participants to specialist expertise, illustrated by projects undertaken by Aspect and Deaf Services. The second group focuses on recruiting and building a local workforce, demonstrated by the NPY Women’s Council, Synapse and Centacare. These approaches are not mutually explosive and illustrate ways to address chronic support and workforce challenges experienced in thin markets. Both rely on building partnerships and working together with local community stakeholders.

New ways to deliver supports: Teletherapy

This strategy is explored in most detail by Aspect (Autism Spectrum Australia) and Deaf Services. The Aspect project used teletherapy to deliver supports to children with autism living in rural and remote locations. Pre-existing experience of working in these settings and working as part of a multidisciplinary teams was a key criteria when recruiting therapists. Among a range of interventions trialled, Deaf Services used technology to deliver speech therapy as part of early childhood supports to deaf and hearing-impaired children. These projects provide insights into the conditions under which distance support is most likely to work well. Both projects emphasise that distance delivery is only one element of a delivery strategy and complements, rather than entirely replacing, face-to-face interactions.

### Common practices and shared lessons

Aspect drew on guidelines developed in the health sector, together with their direct experience to suggest frequency and timing of these sessions. They found this delivery option worked better for some types of supports than others. They encountered obvious limitations to delivering therapy that requires physical interaction such as positioning a child’s hand to improve writing skills. They also foreshadowed that, as experience and confidence build, they will explore the potential to deliver a broader range of supports including intensive behaviour support using teletherapy. Deaf Services found that distance delivery is not well suited to doing assessments but is more useful for delivering supports such as speech therapy, deaf awareness training, Auslan training and support coordination.

In both projects, the level of IT testing, training and support was critical to successful outcomes. For this reason, IT experts were an integral part of the Deaf Services team, working alongside workers and managers to plan and roll out the project rather than being brought in as trouble shooters once problems occurred.

Innovative uses of existing technologies

Deaf Services tested several technologies to improve access to supports in remote locations. This included using kiosks, establishing an iPad and PC loan program and using remote video platforms. Services included interpreting, delivering speech and other therapies, support coordination, Auslan training and deafness awareness training, delivered across six different locations. They document methods and challenges to building local partnerships with community organisations and local LACs to facilitate these options. Outcomes from this project suggest that these approaches may also be useful for engaging ‘hard to reach’ participants. In one case, a man borrowed an electronic tablet to take home to his caravan to arrange support coordination. In another, an Indigenous participant in Cairns used a handheld device to access a remote interpreter to support him to participate in his mother’s funeral service. Reliance on establishing an elaborate system for lending tablets and covering the cost of data to support video streaming was required as these needs were not supported in NDIS plans.

Adapting for place and people

* Without existing local connectedness and credibility, delivering supports in rural and remote areas will either fail or, at best, requires a long establishment phase. Local service delivery is most likely to work when managed by or in partnership with local players although simply being local is not sufficient. It also requires an understanding of models of support appropriate for supporting an ‘ordinary life’ for a person with disability. This is sometimes contrasted with the health or medical model that seeks to cure or fix health-related issues.
* The process of engaging ‘hard to reach’ participants and workers requires time to adapt methods and design information appropriate for the context.
  + The NPY project involved community elders when designing posters to explain the NDIS and promote related work opportunities. This was critical to their impact and acceptance, as was engaging a worker with high credibility and who spoke language.
  + Having a dedicated resource available to both raise community awareness of the NDIS and promote related work opportunities was time-consuming but invaluable in the case of the NPY project. They engaged 136 community members in forums and conversations. Thirty seven people expressed an active interest in work opportunities and of these, six were employed during the project, two were men. Although the numbers are small, the significance of this outcome should not be underestimated as they not only demonstrate success in engaging a very hard-to-engage cohort but also in shifting deep cultural and gendered attitudes about the nature of support work. This was assisted by emphasising the empowering role that workers can play to link participants back to their community and land.
  + The Synapse project reviewed and adapted practices based on the feedback of their Indigenous staff and participants. They applied this approach to everything, from designing accessible recruitment processes to reviewing the way supports are delivered.

Building local capability

In addition to understanding, respecting and connecting to place, projects also built local capacity.

* + Aspect’s delivery of teletherapy in remote communities relied largely on working through local support teams, which could comprise family members, teachers and learning support officers, supported by a centrally located therapy team. They found that job roles and boundaries were more flexible and responsive in rural compared with metro environments and that teachers and learning support staff were enthusiastic about being able to access specialist advice on the needs of children with autism.
  + NPY and Synapse emphasised the importance of recognising and valuing cultural knowledge as a core competency. In addition to recognising the cultural skills and contribution of Aboriginal staff, Synapse also engaged a cultural mentor. The mentoring role and responsibilities were co-designed with Aboriginal staff. This role was critical to retaining staff. The NPY project as identifies the need for a similar role to retain new worker recruits.
  + The Centacare project set out to establish a web-based hub to support people to prepare and register as contractors to deliver supports in four remote locations in Far North Queensland. The project was unable to achieve this within the project timeframe although the barriers they encountered provide valuable insights. First, the delays to NDIS rollout and appointment of LAC roles meant that their initial assumptions about points of connection did not eventuate. Negotiating the approval of local shire councils was a precondition to proceeding and was a more lengthy process than anticipated. They assumed that local people would have at least a basic awareness of the NDIS but discovered that this was not the case. They also came to realise that the content required to prepare and assist new workers to register would be difficult for them to develop. In view of these challenges, the project withdrew from very remote areas to focus instead on the Atherton Tablelands. Although still isolated, there were a number of service providers already operating in this area and people were more aware and engaged with the NDIS. They also switched from targeting individual contractor recruitment to supporting existing providers to review business plans and quality assurance.

**What can be scaled up now**

Rich descriptions of approaches and examples of materials and resources developed by these projects could be customised and adapted for use by other providers delivering supports in thin markets.

What requires further work

Many of the same issues faced by providers in thin markets are reported under the theme of diversifying the workforce. Some additional themes relevant to rural, remote and very remote locations help to refine understanding of what more is needed.

**Telehealth:** The potential for telehealth to deliver solutions should be further explored. The experience of the IWF projects together with other similar projects funded under the SDF should be consolidated. Some initial questions that could be further explored as these approaches are tested by multiple providers are:

* What is the evidence on the types of therapeutic supports and other preconditions that make it likely for teletherapy to work well and how does this differ for different types of supports? Understanding more about how these arrangements work has implications for the approach to funding sessions and travel.
* What is the appropriate amount, timing and mix of distance and face:face delivery and what are the pricing implications?
* Is it possible to develop a standardised approach to measuring effectiveness to assess trialling different strategies in different contexts?

**Other technologies:** The Deaf Services project demonstrates the potential to harness widely available technologies such as tablets to extend supports to people, including those who are hard to reach, those living in remote locations as well as those who struggle to access relevant expertise in very thin markets. Establishing and managing a borrowing library to supply participants with tablets and cover the costs of data sufficient to access video streaming was a significant project cost that could be removed if planners recognised this as a necessary cost of accessing supports within individual plans. The merits of this option should be considered by the NDIA.

**Building local workforce:** These projects demonstrate that it is possible to recruit local workers. It is cost-intensive to initiate this work and without continuity to promote these work opportunities and mentor new recruits, the progress made will be wasted. Further work should build understanding of the level and type of support needed to build local capacity, how this changes over time, how it is reflected in pricing or other funding streams and common elements of critical roles such as community connector and cultural mentor. Clearly one-off project funding is not a good match to build sustainable solutions in these locations.

Although the Centacare project was not successful in achieving intended project outcomes, in the absence of a service provider presence, the option of recruiting, training and mentoring a contractor-based workforce could be worth further exploration. It is more likely to succeed if managed by organisations with an existing local presence or connection, partnering with providers with established expertise in recruiting and mentoring new workers and operating an employment platform.

**Market stewardship:** As already noted, it is not possible to build a workforce in isolation. The challenge of pacing recruitment and on-boarding of new staff with finding relevant work opportunities was noted by all projects in this theme and echoes by other IWF project experience. There are limited options available for individual providers to generate an informed and engaged market. It requires the active promotion of information on good practice support options and the timely approval of NDIS plans.

These projects explored ways to engage and recruit a workforce to more closely match the characteristics and interests of the people they work with. Within relatively short timeframes, projects demonstrate that it is possible to recruit a more diverse workforce comprising people who are under-represented both as clients and workers in disability and including both Indigenous and CALD workers. In most cases, projects exceeded their own expectations and uniformly report enthusiastic support both from service users and workers. Their experience also sheds light on the obstacles to implementing or scaling up these approaches.

### Common practices: Shared lessons

* Engaging ‘difficult to reach’ cohorts was a common goal. NPY Women’s Council describes the myriad of factors that act as barriers both to Aboriginal people accessing NDIS support and to considering disability work as an option. Over 60% of service users attending Plumtree’s planning workshops, delivered by peer workers, came from a CALD background. Wellways targeted both workers and service users from the LGBTIQ community and Ethnic Community Services Coop (ESCS) recruited workers from over 8 different cultural backgrounds, more than 95% of whom were bilingual.
* Peer work was another common feature of the strategies demonstrated. Although definitions and job design varied, each project recruited workers with shared experience. For ESCS and NPY, the emphasis was on shared cultural experience. For Plumtree and Wellways, shared experience extended to a personal experience of disability. Recognising and valuing the contributions of people with lived experience was a central feature of these projects. This echoes similar observations of projects in remote and very remote locations where cultural knowledge and experience was critical.
* Community credibility and connectedness was a key to success. Organisations with well established relationships and networks are best placed to lead or partner on this work. For example, the NPY project worker’s skills in local language and support of community elders were critical to success.
* Recruiting people from communities with low or no attachment to the NDIS means that projects straddle the dual roles of providing information about the scheme as well as recruiting workers. This was a strong element of the NPY and ESCS projects. The ability to both engage these communities and then translate this contact into job placements within the project timeframe is an impressive achievement.
* Each project found new ways to design and explain support work. Though each targeted different cohorts, they shared themes of empowerment, social justice and meaning. The NPY project talked of supporting people to re-engage with their community life – get back on country, participate in cultural activities and take an active part in community life. Wellways appealed to people from the rainbow community with a passion for supporting their peers. ECSC emphasised living well and having fun. Plumtree’s peer work roles were designed to empower parents to navigate choices for their child’s support.

Projects also encountered similar issues and barriers:

* Project funding enabled dedicated resources to meet the up-front costs of specialist recruitment. The outreach and onboarding costs associated with recruiting these new cohorts is not met by individualised NDIS pricing that makes no distinction between worker cohorts. Price loadings for delivering supports to remote and very remote areas appear to be inadequate. The prospect of investing in this level of recruitment and development, only to lose staff to market competitors, is a significant deterrent to scaling these models.
* Recruitment efforts can be wasted without a timely link to work options. A lag between building new workforce capacity and developing a ready market can undermine viability at the outset. Organisations with scale and different service streams are better placed to retain the people they recruit in interim roles until an appropriate support job comes up. ESCS planned to mitigate this risk by assigning new workers to roles in disability, aged care and child care. They found that higher qualification and experience barriers in these other sectors meant this was not practical. Interestingly, they also discovered that while service users valued receiving support from a person from a non-Anglo-Saxon background, this alone was more important than achieving an exact cultural or language match. The Wellways project reports a similar finding where peer work is more highly valued than an exact client-to-worker match.
* In addition to higher costs of engaging and recruiting, these workers require more intensive mentoring and supervision. Projects tested multiple ways to meet this challenge. The ESCS project employed people with lived experience to co-design recruitment. Applicants were invited to submit a video clip of their responses to a series of questions developed by people with disability. This same group then participated in staff selection and mentoring new workers. Use of social media platforms proved a cost-effective way to connect workers to provide mutual support and video diaries recorded by new workers allowed supervisors to stay connected and quickly identify and respond to issues. Whether costs of ongoing mentoring can be absorbed in the NDIS operating environment is yet to be tested.
* NPY and Synapse both used innovative methods to recruit ATSI workers in regional, remote and very remote locations and identified the need for ongoing cultural mentoring. Pricing does not support recruitment or ongoing mentoring costs needed to attract and retain these workers.
* Lack of suitable training was an issue for some projects. Wellways and Plumtree leveraged or developed relevant training in-house, available on the website. NPY noted that although TAFE publicity indicates capacity to customise for local needs, this did not translate into available training and there was very little alternative training relevant to their new recruits.

# Self-organising teams

# Most people want to be supported by reliable, appropriate workers yet often the reality looks very different – a revolving door of workers directed by rigid rostering systems. These projects are introducing teamwork arrangements to change this paradigm.

Teams are often described as ‘self-managing’ or ‘self-organising’. These term describe work design features such as the span and extent of decision-making authority, scope to define team purpose and objectives and autonomy to make decisions about how work is done. Typically the level of self-management evolves over time as teams move from more traditional, hierarchical management to more autonomous decision making.

The two projects that are most advanced in implementing team-based work solutions are Amicus, a small-medium sized provider in regional Victoria and Avivo, a large provider based in Perth. In both organisations, teamwork was a good fit with organisational values. It offered potential for clients to have closer contact and greater control over their relationship with the service and their workers. For workers, it could offer more engaging roles with increased autonomy. From an organisational perspective teamwork holds the promise of providing cost efficiencies without sacrificing connections with participants, families and workers or reducing service quality.

A third project undertook a teamwork trial in rural Tasmania which ceased at the end of the funded period. Although much smaller in scale and therefore, quite idiosyncratic, their report documents useful insights about the do’s and don’ts when introducing these arrangements.

**Common practices: Shared lessons**

**Clear purpose, effective communication:** Clear messaging about why teams were being introduced and finding ways to share experience and facilitate learning are critical. All projects identified that they should have spent more time and effort to get this right. Avivo cautions that the voice of managers and office-based staff is loud compared to the voices of workers and customers, yet these latter stakeholder views are vital. As a result, Avivo slowed down their initial rollout schedule to allow more time for feedback and finetune their approach to team design. Striking the right balance between encouraging experimentation and responding to a desire for certainty and clarity is another common challenge. Parkside workers were frustrated by a lack of clarity about purpose and expectations.

**Soft skills and coaching:** Working in teamsis not intuitive. This was a key insight for Amicus. They started out assuming that staff would be able to work together effectively but later introduced training to build communication and teamwork skills. Workers participating in the Parkside team project reinforced an appetite for better training and support to understand expectations and build capability to participate effectively. They also reflect on new skills needed, pointing out that workers with increased autonomy may have a greater need for emotional support and structured debriefing opportunities as well as practical skills such as ability request or enter information into IT systems. These were more relevant than additional technical skills.

Both Avivo and Amicus established dedicated roles to build team work capability. Avivo discovered that struggling teams were often slow to ask for help, emphasising the need for active mentoring and support in the early stages of team formation.

**Test, challenge and refine thinking:** Having opportunities to reflect on and learn from experience is essential. Each project describes the processes they used to consciously review and learn from their experience.

**Organisation, management and systems alignment:** Committing to changing work arrangements is a major undertaking rather than an isolated exercise. It involves rethinking not only service delivery but all elements of the management, administrative structures and organisational culture that underpins business operations. Building worker autonomy and responsibility can also be confronting for managers who are used to being in charge. Some of the cost efficiencies of these models rely on reducing central office management and administration and these decisions need to be carefully planned and managed. Projects also identified the need for rostering software and related IT support to facilitate workers in taking on greater responsibility for their own work.

Outcomes for clients and workers

Initial evidence suggests that teamwork is compatible with high client satisfaction. Organisations undertaking these projects started with a reasonably high level of client satisfaction. Amicus noted that team function and client satisfaction was higher where there were well-established worker-client relationships. Staff were allocated to teams based on worker-client relationships rather than team member preference. They also note the potential for tension between service users expecting greater involvement in selecting and managing their staff and the flexibility needed to operate the teamwork model. They plan to provide new participants with a clearer explanation of their team model. Parkside clients appreciated having decision-making closer to them – locally.

The impact on worker satisfaction levels was also positive, reflected in lower rates of sick leave and staff turnover for team participants than for those not engaged in teams. However, in the Parkside team there was dissatisfaction about the additional skills and hard work required without award reclassification or compensation – so much so that the team withdrew from the trial before it ended.

Financial viability and sustainability

Projects are at a very early stage of assessing ongoing viability of team models. Amicus and Avivo anticipate cost savings in the longer term to offset the initial investment associated with establishment. Savings are anticipated in administration, coordination and rostering and travel. Amicus also expect initial coaching costs to remain constant as the organisation continues to grow, so that costs will be shared over a larger number of teams.

**What can be scaled up now**

There is considerable interest in team working arrangements as evidenced by organisations independently experimenting with these forms of work. The IWF, together with a range of other SDF-sponsored initiatives, supported an analysis of award classifications, which will be of use to those experimenting, and produced many relevant resources. This works complements a solid body of literature on teamwork and growing body of experience within the sector.

**What requires further work**

Establishing agreed measures to track service user and worker outcomes and financial viability of these models under the NDIS would provide useful evidence for others interested in this approach. Building relevant measures could be incorporated into the work of a facilitated community of practice.

Dissemination could be assisted by time-limited support for facilitating communities of practice to learn and share approaches and experience. NDS currently hosts state-funded workshops and facilitates meetings of interested providers in some states.

These projects highlight the need to build skills in communication, negotiation and IT to participate effectively in teams. This is relevant information for training providers.

## 4a Building capability – New approaches to delivering support

These projects explored solutions including the redesign of supports and related jobs to extend workforce capability.

Allied health assistants

Three projects explored the use of allied health assistants (AHAs) to alleviate workload pressures on allied health professionals and improve implementation of therapy plans. The Monash University project targeted capacity building for people with neurological disability living in group homes. Their project illustrates the potential for goal-oriented, time-limited allied health supports to improve the quality of life for people with ABI. The project team acknowledge the limitations of their work in measuring participant outcomes but provide anecdotal examples of positive impact such as one client who was supported over six sessions to attend a JAM music session independently. In this project, supports were either delivered by AHAs or by students performing in this role.

In rural Tasmania, Anglicare explored AHA roles to free up therapists in short supply. It was planned that support workers in these roles would facilitate access to allied health supports, attend appointments and assist clients in implementing therapy plans. They developed a detailed delegation and supervision model, describing the tasks that could be assigned to an assistant role. Only two participants took up the offer of this type of support, limiting the scope to test and evaluate the approach and highlighting the importance of concurrently building a market for new support offerings.

Plumtree recruited parents as peer workers to perform a number of different roles including allied health assistant. There are interesting differences in the approach taken by these projects to defining and setting boundaries for the assistant role. Plumtree also identified the importance of informing participants about new support options and are producing a short video to promote awareness.

**What requires further work**

* The value of strategies that extend allied health supports depends on whether the type of support offered is appropriate and improves outcomes for the participant. More work is needed to determine whether and in what circumstances this option is likely to have positive outcomes. For example, introducing new people for short term contact can be unsettling for some people with neurological disability.
* The projects acknowledge that further work is needed to collect and evaluate evidence about the impact of AHA supports. It would be useful to establish some common measures for this purpose.
* There are significant differences in the assumptions about responsibilities, skills and supervision requirements of AHA roles. Clarifying the definition of AHAs would assist service providers to explore and support people to undertake this role where appropriate. In the absence of a coordinated, national approach, there are efforts to address this gap. Each of the IWF projects developed their own version and some jurisdictions have also proposed guidelines such as has recently released a supervision and delegation framework developed by the Victorian government.
* The Monash project demonstrates the use of students working under supervision as a potential source of workers to support people with ABI in group homes to achieve short term goals. There is potential to further explore synergies between universities seeking meaningful work placements for their students and sector capacity to provide quality support. Any development of this approach should also consider the impact on support worker roles.   
  In the Monash project, the costs of supervision were met by the university. A potential obstacle to scaling their model is the ongoing capacity or willingness of universities to meet clinical supervision costs.
* The viability of these approaches to extending capacity building supports depend on this being an element of a participant’s plan. The Monash project express concern about the lack of funding for this item in many plans.
* NDIA pricing continues to price AHA roles below general support for personal care. Unless addressed, this will mean these roles are not widely adopted. The McKinsey price review recommends introducing tiered pricing to more adequately reflect different AHA roles. In addition to reviewing the hourly rate for this role, pricing needs to factor in costs of training and supervision.

Christie Centre

The Christie Centre operates in Mildura where participants and service providers have both struggled to access complex behaviour support planning and implementation expertise. Their solution was to engage a team of allied health workers comprising an Advanced Practitioner employed in-house and a private practice speech pathologist and occupational therapist on contract. The role of the team was to develop meaningful support plans and train and supervise staff in their implementation.

A key objective achieved by the project was to reduce notifiable incidents. This was attributed to staff training although further work would be needed to understand exactly what training translated into improved practice and whether there were other, equally significant factors contributing to this outcome.

Engaging a senior practitioner in-house is one solution to address skill shortages in geographically isolated markets. This solution has not been tested in an NDIS context and further information is needed to assess viability, such as:

* Level of local demand needed to support an in-house role
* Potential for partnership arrangements to share the costs and expertise of a specialist role and approaches to facilitating these. For example, could a regional coordinator assist these arrangements as part of the Local Care Workforce Program?
* Comparison with other solutions. For example, clients routinely travelled to larger centres such as Bendigo. Could technology support mentoring of local staff by health practitioners in central locations and how do outcomes compare.
* Options for providing professional support to advanced practitioners operating in isolation.

Growing Potential

In this project a provider of ECEI supports established a partnership with an Aboriginal health service located in a regional centre. The project employed local Aboriginal staff in support work and allied health assistant roles to provide a point of cultural connection between families and other health workers, including doctors and therapists working in the health centre. The project worked with the health service to identify clients who could be eligible for NDIS plans, facilitate assessments and connect people to services.

The project included a focus on raising the understanding of health practitioners about the needs of clients with disability as distinct from those with other health needs. In exchange, the cultural expertise of the health service was leveraged to build connections with the local community.

Findings confirm those of other IWF and SDF projects and emphasise the need for culturally appropriate pathways for Aboriginal people to access and engage with the NDIS. Appointing people from, or with strong connections to, the local community was a critical element, as is the language they use to explain concepts such as disability in ways that are culturally relevant.

Outcomes were assessed mainly in terms of the extent to which this model opened up a client referral pathway from the Aboriginal health service to the ECEI provider. They succeeded in doing this and also found that once attached, their clients were reluctant to try any other local services. Over 90% of service users requested multiple services from project workers before seeking out other service options.

This project illustrates both opportunities and risks in leveraging the strengths of Aboriginal Health Services to extend supports to people with disability.

* It is also clear that without dedicated effort and resourcing, there will be limited engagement for ATSI participants. This project illustrates how a 1:1 partnership between a local health centre and a service provider can open up a pathway. It provides less insight into the contributions of other local stakeholders. Specifically, what are the respective roles and capabilities of LACs and partners in the community, including Early Childhood Partners, service providers and other community-based organisations and how can these be effectively coordinated?
* The approach of establishing a referral pathway modelled by this project could reduce rather than expand choice if local Aboriginal health services direct potential clients exclusively to one service provider. There may be good reasons for this. For example, if there are no other local providers or if they are not culturally sensitive. However the prospect of individual services capturing local referral networks highlights potential tensions between facilitating market development and consumer choice on the one hand and building market access for an individual service provider on the other.
* This work highlights the opportunity for government to coordinate further work with service providers and potential community partners, such as Aboriginal health centres, to demonstrate and promote effective partnership models.

Melbourne University

This project aimed to train the disability workforce to deliver customised employment support. Melbourne University worked with four service providers. Six people with disability and nine workers participated.

Customised employment starts from the premise that every person is employable. The method involves a discovery process explore the strengths, needs and interests in order to understand the person and their ideal employment situation. The report notes that this process alone is less about securing employment and more about exploring possible directions and interests. In this respect, it shares similarities with other processes used in person-centred planning and goal setting.

This project confirms that, along with other person-centred planning, discovering potential directions and interests related to employment opportunities should be included as a funded element of capacity building. The project was very small in scale and although it described aspects of the approach, detail on the intensity of staff support required and how this varies over time, the resources needed to prepare and mentor staff and an indication of useful skills and experience to inform staff recruitment would need further exploration to assess viability of this model although it is noted that other versions of customised employment are already operating in Australia. The project identifies varying approaches by NDIA planners to assessing eligibility of this type of support. This reinforces the need to communicate to all planners the options supported by the NDIS.

## 5b Building capability – New approaches to training

Three projects experimented with using gaming or immersive technologies to support workforce development and learning. Enabler Interactive is a small company with strong connections to advocacy networks and an interest in working collaboratively to develop personalised training resources. Its vision was to build a personalised training experience for support workers using video game technology that could be customised to individual user needs. Spinal Life set out to evaluate the potential of VR technology to provide training for both support workers and clients. They purchased and tested VR hardware and software components, system configurations, distribution options and two off-the-shelf VR specific training applications. House With No Steps (HWNS) tested whether immersive learning could better equip support workers to identify and handle stressful work situations. Based on initial research, they then commissioned the development of prototype scenarios for further testing.

HWNS went from being technological novices to scoping, commissioning and road testing a basic room-scale VR prototype. The other projects made less progress but generated valuable insights about the conditions, expertise and steps required to improve likelihood of success.

### Common practices and shared lessons

**Multi-disciplinary teams.** By their nature, these projects require a combination of expertise. They required an understanding the requirements of support work and the necessary skills, aptitudes and attitudes valued by clients, workers and host organisations. Investigating the potential of interactive technologies also requires experience and technical knowledge of this rapidly evolving market. A third element is an understanding of workforce development and learning. Financial and evaluation skills are important to assess the cost/benefit and viability of different solutions. Finally, these projects need strong project design and management, including the capacity to engage and coordinate this breadth of expertise.

It proved difficult to get the right mix. With hindsight Enabler identified the lack of an experienced game designer as a gap in their team. They also discovered the importance of facilitating the contributions of different experts. They found, for example, that game designers were not equipped to make sure that game activities adequately meet learning outcomes. For HWNS, coordinating input from multiple partners was more time-consuming than expected.

**Defining and testing assumptions.** A common risk for these projects is defining a scope of work that is appropriately ambitious but also achievable. Enabler started with the idea that a gaming format could provide a standalone training solution. This proved much more difficult than anticipated as did the assumption that content could be easily customised based on existing training content. They also expected to find a market for quality, client-focused video-based training. Instead they found that service providers did not see the lack of quality training as a problem and are unlikely to pay for training beyond regulatory compliance.

Early testing would also have benefited Spinal Life. This project invested in high end technology on the basis that they would find relevant off-the-shelf content to use, only to find that the available content was limited for their purposes and the technology they invested in requires ongoing investment to maintain currency. They conclude that investing early in VR technology is risky in the context of a rapidly developing market.

In contrast, HWNS were not wedded to a particular technical solution. Instead, they began by understanding the problem they wanted to solve by asking support workers and managers about the challenges and risks they faced at work. They describe different problems of resisting the appeal of novelty at the expense of relevance and allowing time to build understanding of the problem to be solved rather than responding to early pressure to show concrete outcomes. This is a common dilemma for innovation projects. They need space to explore and test their thinking, navigate ambiguity and, if necessary, to conclude that their initial approach is not likely to work.

**Confirming and testing the potential market:** A common lesson across the IWF projects is the importance of concurrently building potential markets. Enabler had to revise their initial assumptions when feedback from service providers found that the market for training was narrowly focused on compliance.

**What can be scaled up**

At this stage projects highlight some directions that could be further explored and traps to be avoided. HWNS made most progress. They have developed a prototype scenario that can now be further tested and used as the basis for designing other scenario content. Some of the documentation produced to support this work could benefit others interested to take this approach.

Costs and options for developing this type of immersive experience are changing rapidly although at least for now, scope for replication will be limited without ongoing funding. One expert estimated average costs for presenting basic scenario content for piloting at between $30,000 and $50,000.

**What requires further work**

While immersive technology may play a role in workforce development, relatively high costs and low appetite for training in general, raises the question about whether this should be a priority for public spending. However the relatively small scale and insular nature of the disability sector market means that, without funding, the sector could miss out on access to leading edge training options. The IWF projects indicate some guidelines for future investment.

* **Strengthen project planning and management:** The sector is new to managing these types of projects and are novices in navigating options available through this technology. To avoid costly learning phases, particularly for small and medium players, there is a strong argument to fund an independent coach/curator to facilitate collaboration between service providers, digital practitioners and systems architects and knowledge experts in training content and adult learning principles. The interactive media sector in Australia has the technical skills required by these projects but stronger links between this expertise and the disability sector would improve future outcomes.
* **Develop a library of shared resources:** Rather than funding individual service providers to build scenarios for their own use, future funding could develop a scenario library, suitable for use or further adaptation by multiple service providers.
* **Invest in high value content:** This is a relatively high cost form of training that should only be used where there is a compelling argument that this approach is likely to achieve better outcomes than more conventional options such as the use of training videos or roll plays. HWNS was inspired by the use of immersive training to support training of emergency response workers and this directed them to focus on using this approach to help workers understand more about their response to stressful or risky work situations that are otherwise difficult to replicate in training environments.
* **Build market awareness:** Disseminating outcomes is a challenge for all innovation projects but especially where it requires access to specific software and hardware. Screenshots and video clips are limited in being able to convey the potential of an immersive or interactive product. If further funding is allocated to these kinds of projects, it should be complemented by providing a strategy to build sector awareness and provide advice about accessing and/or developing experiential training and development resources.

## Structuring the innovation process

The two projects in this stream took different approaches to generating new thinking about workforce challenges. In addition to testing specific ideas, they are profiled in this category because of the structured processes and tools they used to do this.

Both projects worked with multiple service providers to come up with new work roles and service design solutions. TACSI started with two ideas. The first was to establish a shared pool of casual support workers. The second was to develop a shared after-hours on-call service. They developed a simple way to prototype their thinking and applied it to testing viability of their ideas, electing to prioritise the on-call after-hours service as the main focus of their project. ThinkChangeGrow (TCG) started anew, convening a series of workshops engaging a cross-section of service users, workers, managers and people from outside the sector to brainstorm approaches to redesigning support work.

The third project, by HWNS, set out to test the possibility of creating immersive learning experiences to improve training of support workers. A focus on the outcomes of their work is described in theme 5b on using technologies to build capability. Their project is included under this heading to focus on the approach they took to develop, refine and prototype their ideas.

**Common practices and shared lessons**

**Establish a common understanding of purpose and approach:** People often think innovation comes from a spontaneous big idea. These projects illustrate the deliberate steps involved in an intentional design process that participants engage in. When bringing together stakeholders from different organisations, it is also important to establish the scope of their shared problem, clarify the shared stake in the outcomes and agree on boundaries, roles and responsibilities.

For HWNS the challenge was to test their initial assumptions about the purpose of their project. Their starting point was an interest in using immersive learning experiences to assist support workers to be better prepared to work in situations involving risk. Early research revealed that their assumption that workers faced common risk situations needed rethinking when workers described risks as varied and unique as the people they support and the environments they work in. This insight was essential to shaping a credible learning experience and provided the basis for a detailed description of the purpose of their work.

**Managing participative processes:** Each project used co-design methods. It took longer than expected to coordinate the contributions of multiple players and to allow time and opportunities for underrepresented voices, including people with disability and workers, to be heard. The pay-off is that it results in more relevant and credible outcomes.

**Stay open and flexible:** Although each project demonstrates different approaches to discovering new ideas, they all highlight the importance of staying open and responsive to the information gathered rather than locking in to an early course of action. In each case the insights from early work helped to significantly refine the next steps.

One way the TCG workshops opened participants up to new thinking was to involve ‘wild card’ workshop participants. These were people from outside the disability sector who could provide a fresh and sometimes challenging perspective to the design process.

HWNS recognised the risk of being seduced by the technology rather than first confirming it is fit for purpose.

**Shift from thinking to doing:** The transition from idea to action is not always an easy one. It is important to know when there is sufficient information to take the next step. Having refined their initial thinking based on a research phase, HWNS used a hackathon where teams pitched competing ideas, using different software and technological applications. This provided information to inform their choice on the best approach to meet their needs. TACSI developed a simple prototyping method to test and refine their service design concept.

**What requires further work**

IWF funding provided opportunities for service providers to take a more deliberate, exploratory approach to generating and testing ideas based on collaboration across different organisations and different stakeholders. Structured innovation work is new for most disability providers and these processes are more challenging than in other industry contexts as it takes time to build the trust and capacity of stakeholders to actively participate in co-designing ideas. Without availability of funds to offset these costs, it is unlikely that this level of codesign will occur.

# Program management lessons

The experience of managing the IWF program provides an opportunity to reflect on lessons for future funding of work designed to stimulate innovation and foster take up of good practice. The environment for funding disability workforce initiatives is complex. There are multiple agendas, programs and sources of funding at both federal and state levels and across different government departments. This can result in duplication of effort and lost opportunities to progress learning rather than repeat the same insights. Without a plan to guide commissioning and evaluating activity, it will be difficult to track outcomes and act on lessons.

Reflecting on the experience of the IWF project, there is a compelling case to establish an overarching framework to underpin the next stage of support for innovative solutions to workforce issues. Such a framework would guide decisions about directly funding initiatives and could also provide a source of advice for other jurisdictions and departments to get best value from their investments.

The recommendations presented in this section begin by reviewing common challenges for organisations managing small scale, short time frame projects.

## Strengthen project management

The experience of managing thirty small-scale projects provides insights into the aspects of project management that presented problems for multiple projects. For most IWF applicants, project design and management is not core business. This is a significant shortcoming as these are often complex projects that require coordinating contributions from multiple disciplines with diverse interests. Even where projects engaged external research expertise, such as involving university partners, this did not guarantee better project or reporting outcomes. While poor research capability and difficulties curating the inputs of diverse contributors was a problem for many, some projects ably demonstrated this capability. For example, JFA Purple Orange coordinated a project on behalf of the National Alliance of Capacity Building Organisations, an established national network. The project engaged the collective efforts of six organisations located in different states. This project illustrates the advantages of working through established networks and relationships. Where these did not already exist, projects frequently experienced lengthy lead times, and in some cases, were unable to establish relationships or access relevant expertise within the project timeframe.

Challenges of attracting project staff with the appropriate expertise and lack of continuity of key project and management personnel caused significant delays and disruptions for some projects. In the early stages, the time lag between announcing successful applications and funding projects sometimes meant that those responsible for implementing the project may have had no involvement in developing the concept. In some cases this contributed to differences in understanding and expectations between project managers and the IWF team.

Timing was a problem for some projects in terms of their understanding of the NDIS. The rollout schedule meant that some projects had no or very little experience of working in this new operating environment. This made it difficult to assess both the level of interest and viability of new models to operate in an NDIS context.

While most projects were generous in sharing their experiences, some that were reluctant to disclose IP or consider options that were not aligned with their commercial interests. This is understandable, however funding demonstration projects needs to satisfy dual interests. The proponent organisation has a direct interest in undertaking the work. At the same time, the aim is to provide sufficient detail to make it possible to examine and potentially replicate new ideas across the wider sector. Unless this second aspect is addressed, impact is confined to improving the practice and business model of individual funding recipients. Some single organisation project managers had difficulty grasping this expectation.

Many projects struggled to distil, reflect on and communicate their experience. Contributing factors include the time and workload pressures experienced by project staff. This was particularly evident where organisations were concurrently transitioning to the NDIS with one strongly advising others not to embark on an organisational change project at this time.

In anticipation of some of these challenges, the IWF team provided a learning and evaluation strategy template and guidance on preparing progress and final reports. These templates are available on the IWF website. Each project was also assigned a project coach who provided a sounding board and facilitated connections between projects and to other resources and expertise. More capable projects were more likely to make good use of project coaches and were more open about describing both what worked and what didn’t. Ironically projects that faced most challenges and needed most assistance were less likely to seek help.

There are a number of ways to address these challenges when funding further work on workforce innovation.

1. **More tightly target funding**: The IWF invited applications to address four very broad workforce themes. The resulting projects were diverse in terms of focus, approach and outcomes. This can be useful to test current priorities and flush out new ideas. With the benefit of this experience the next round of work can be more targeted to either refine and consolidate emerging good practice, encourage adoption of new approaches or address remaining gaps. Recent changes in awarding ILC grants suggests a similar shift in approach.
2. **Two stage funding:** The nature of innovation projects is to push boundaries and explore new ideas. In some cases, the initial concept may not prove to be the best course of action or the idea may be sound but not matched by capacity to implement. For more ambitious or complex projects, initial proposals are often not sufficiently well tested to assess viability and likely value. For these proposals, outcomes would be strengthened by providing a small grant up front to allow initial concept to be further developed. This discrete discovery stage would confirm whether the proposed activity is viable and realistic within timeframe, has appropriate support and engagement of required players and can access relevant knowledge, skills and expertise. The time and resource intensity for this first stage would depend on the specifics of each project but is likely to require 6-12 months.
3. **Strengthened project oversight:** Innovation projects present complex management challenges. Innovation is, by nature, iterative. Unlike contracting for the supply of goods and services, these projects require active management that is not readily defined in milestones established on commencement. The IWF sought to strengthen governance by introducing the role of project coach a new to provide a dynamic connection between individual projects and the program overall. This strengthened projects in multiple ways. It provided a sounding board for their ideas, helped projects to refine project design and report on outcomes and provided early warning of projects that were struggling. The coaches also represented the interests of the wider IWF agenda, to generate insights and models with potential to be replicated throughout the sector. Accessing coaching support was optional and while those that made use of coaching valued this input, some projects chose not take up this offer.

Based in the IWF experience, future funded projects should consider embedding a similar coaching function into project design and management.

1. **Extended timeframes:** Projects routinely identified high initial costs associated with building relationships and partnerships, establishing shared understanding and work arrangements and securing required expertise, which is at risk of being lost at project completion. Longer project timeframes would allow projects to consolidate outcomes and make more effective use of the networks, skills and intellectual capital developed to undertake this work.

## A funding pathway to refine and implement promising new models

More complex, systemic solutions explored by some projects have shown promising initial results on a limited scale, often within a single organisation. The next step should provide a funding pathway to transition from small scale demonstration. This next stage of work would translate from idiosyncratic organisational solutions to generalisable models. This would involve establishing the core elements that underpin new practices, identifying the necessary preconditions and requirements under which the approach works best and building evidence about likely costs and benefits of different approaches.

Examples of promising strategies that should be considered for this next stage of investment are discussed in more detail under each theme heading. They include:

* the potential of technologies, including teletherapy, to extend supports to thin or under-serviced markets;
* strategies to recruit and support a local workforce in rural and remote locations and to increase workforce diversity;
* the use of peer work models to enhance supports available to people with disability;
* the potential and conditions required to benefit from new job roles such as allied health assistants.

A number of these models have also been explored with funding outside the IWF. Insights from this broader work should be taken into account in shaping the next stage of implementation.

Shifting from developing and demonstrating new approaches to promoting and replicating what works requires a different approach to project management. It is often outside the capability of individual service providers to engage the appropriate breadth of partners needed to test and refine selected good practice models. Project design needs to invite multiple service providers to partner together with other stakeholder, including policy makers who can concurrently address potential impediments to wider implementation. These collective inputs need to be centrally coordinated. Such an approach could either nominate a lead partner with relevant capability from within the sector or establish project management independent of the interests of any single organisation. Independent project oversight could also help alleviate concerns of some service providers about the competitive market environment that can act as a disincentive to direct provider:provider sharing.

## Build the market for good practice

Coordinated effort is required to promote the outcomes and insights generated by innovation work. There are four ways that government and the NDIA can immediately support the adoption or extension of good practice.

1. **Communicate and promote good practice:** Projects repeatedly identified the misalignment between workforce readiness and market demand, as potentially undermining even the most promising solutions. Immediate audiences for this information include service users, service providers and workers. It is also vital that NDIA staff, including planners, are aware of the evidence on good practice. Projects repeatedly identify variable interpretation of eligibility criteria as a barrier to sustaining new approaches. Messaging to communicate and promote good practice needs to be linked up across key players including DSS, NDIA and the NDIS Quality and Safeguards Commission as well as with jurisdictional partners.
2. **Ensure ongoing access to resources:** A number of projects demonstrate the application of a specific solution, supported by stand-alone tools and resources. For example, projects profiled under the self-directed theme produced ready-to-use resources. In one, the Summer Foundation set out to empower people with cognitive function or communication challenges to have a direct say in how they want to be supported. Their solution was to develop a practical guide and ‘how-to’ instruction videos for service users, their family and friends to develop their own short video to explain their needs and preferences to workers. Useful, standalone resources need to be easy to find.

Currently, IWF resources can be accessed via the IWF evidence base website hosted on the NDS website. Many individual projects also host their resources on their own websites. Ongoing access depends on host organisation willingness and capability to maintain this resource base. Government should consider options for ensuring ongoing access to project outputs. This could extend to linking to related initiatives or resources. The theme headings developed by the IWF could provide a useful structure to catalogue these resources.

The resources generated by the IWF add to a growing list of resources that are largely untested. Capacity to provide and report feedback on which resources are useful and in what contexts would assist in directing potential users to those they are most likely to find useful.

1. **Leverage opportunities to implement proven practices:** State and federal funding targeting specific workforce priorities such as regional, rural and remote workforce solutions could provide a valuable opportunity to advance implementation and provide feedback on existing solutions rather than reinventing them. Government can play a facilitating role by encouraging the adoption, refinement and sharing of feedback on existing ideas. Establishing mechanisms for policy makers, service providers and other stakeholders to review and share progress would improve responsiveness and capacity to target funding to address gaps rather than duplicate existing efforts.
2. **Time-limited funding of communities of practice:** Passive hosting of resources will limit take-up to those who are already actively seeking this information. Service providers that attended the NDS Out of the Box Conference identified the opportunity to hear and learn from others as the single most useful way to assist them to take the next step to implement workforce innovations. Service users also repeatedly identify the value of hearing from their peers. This suggests that time-limited funding of communities of practice could help to fast-track the adoption of existing models.   
     
   Models demonstrated by IWF projects that could benefit from this approach include opportunities for consumers to share experiences of self-managing their own workforce solutions and for providers to share strategies on recruiting and retaining under-represented workforce cohorts. A third area is sharing of experiences introducing self-directing teams. This is already occurring in Victoria where NDS has been funded to facilitate workshops as part of state-funded transition support.

## Build capacity to measure outcomes

As already noted, problem for innovation programs is that they aim to produce long term, systemic outcomes but are funded within short term timeframes. Evidence on impact is often not available within funding periods and measurement commonly relies on activity-based reporting. Since the purpose of experimentation is to test the proposition that activities will produce expected results, activity measures provide little useful information about whether an approach is likely to produce good outcomes over time.

The IWF team provided tools and templates to support projects to design measures and collect information that would assist them to reflect on and adapt their approach and track impact. Impact measures were defined under three broad headings: service user satisfaction and empowerment; worker skills and engagement; and, organisational sustainability. It is fair to say that many projects struggled to both define measurable indicators and report against them. Contributing factors have already been noted: some projects remain at the early design and testing stage; funded timeframes did not allow sufficient time or opportunities to provide meaningful information about likely impact or benefits, determine whether models are financially viable under the NDIS or assess potential for replication.

IWF experience also highlights the complexity of designing useful evaluation tools that shed light on what works and why. Some projects are well-aware of this challenge and specifically identified the need for further work on measuring impact. They also highlight the reality that this is not a straightforward task. While it is essential to have defined objectives and methods of tracking progress towards them, it is equally important to craft approaches that measure what is useful rather than simply what can be easily measured. Relevant outcome measures need to satisfy competing interests, to define common measures that allow a level of comparison and, at the same time, acknowledging the complexity and interdependence of factors and associated pitfalls of assigning causality.

Having identified at least some of the strategies that can address disability workforce challenges, the next step is to support the development of shared approaches and tools to collect evidence over time. For some types of projects, evidence collection could be quite simple. For example, where stand-alone tools and resources have been developed, a simple user feedback option would assist in identifying whether the approach provided is accessed and the extent to which it meets user needs.

Developing methods to collect and share evidence about more complex types of interventions will take more time to design. Codesign principles, modelled by a number of the IWF projects, should be adopted to ensure the breadth of participant, worker and provider insights are reflected. Measures will need to relate to specific types of interventions although the broad evaluation domains established by the IWF provide a useful starting point. These include measuring impact on the quality of support, the nature of jobs and financial viability. Measurement should be an embedded feature of all projects. In addition, co-ordinating the design of measurement instruments across projects and even across diverse funding sources could support an ongoing evidence base against which consumers, service providers, policy makers and other stakeholders can assess progress and compare outcomes of different approaches.

NDS logo ****

The purpose of this template is to document standardise information about each project. Much of this information is already available in proposal documents and coaches can pre-populate forms to identify any aspects that require further detail.

**Project Establishment Template**

| 1. Fund Recipient Details | | |
| --- | --- | --- |
| Organisation Name: |  | |
| Street Address: |  | |
| Partnering Organisations:  (if applicable) |  | |
|  | |
|  | |
|  | |
|  | |
| Person Completing Progress Report | Name: |  |
| Position: |  |
| Phone: |  |
| E-mail: |  |

| 2. Grant Information | | | |
| --- | --- | --- | --- |
| Project Name: |  | ID Number: |  |
| Reporting Period: |  | | |

| 3. Project context |
| --- |
| Is this project addressing a specific service user cohort? |
|  |
| Is this project targeting a specific worker cohort? |
|  |
| Describe the site/scale of this initiative. For example, will it involve one or more locations. How many workers are employed at the site where this initiative is occurring? How many will be directly involved? |
|  |

| 4. Project description |
| --- |
| What is the need or opportunity this project is addressing? What evidence is this based on? |
|  |
| How are these needs currently met? |
|  |
| What is innovative about the proposed project? For example, will it generate a completely new approach or practice. If adopting an existing practice, in what way will it demonstrate significant improvements? |
|  |
| Attach updated program logic and detailed workplan showing how project milestones and outcomes will be achieved. |
|  |
| Attach evaluation plan detailing outcomes for service users, workers and organisations (refer to template). |
|  |

NDS logo ****

This template is designed to assist organisations participating in the Innovative Workforce Fund (the Fund) to plan evaluation and learning activities, start to implement these activities, and to reflect on what has been learnt. They are open to modification and adaptation in discussion with NDS.

Please note that a project coach/liaison person has been assigned to your project. Any questions should be in the first instance discussed with your coach.

**Project Evaluation Template**

1. Project contact details

Please provide contact details for:

* the person with main day to day responsibility for the project
* the evaluation and learning contact person.

These might be the same person or might be different people where responsibilities for managing, evaluation and/or documenting project outcomes are separate.

**Project contact person**

| Organisation |  |
| --- | --- |
| Project Name |  |
| Contact name and position of person responsible for project management |  |
| Contact details |  |

**Evaluation and learning contact person**

| Organisation |  |
| --- | --- |
| Project Name |  |
| Contact name and position of person responsible for evaluation |  |
| Contact details |  |

1. **Activity Work Plan**

Please update your initial work plan. Provide as much detail as possible to assist tracking progress of your project.

| **Milestones and deliverables** | **Tasks** | **Timeframe**  **(Due date)** |
| --- | --- | --- |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. Evaluation and learning plan

The general purpose of the evaluation and learning plan is to allow the tracking of projects in the Innovative Workforce Fund and to set clear and measurable outcomes.

The key overall evaluation questions for the Innovative Workforce Fund are:

| **For the IWF as a whole NDS will be seeking to answer the following key questions:** |
| --- |
| 1. To what extent have projects demonstrated innovations that improve workforce availability and ability to meet the current and future needs of NDIS participants? Specifically, how have projects achieved or contributed to positive outcomes for service users, workers and organisations? |
| 1. How have projects achieved these outcomes? |
| 1. What models or practices could be suitable for wider implementation? |

1. Outcomes matrix

The outcomes matrix overleaf shows the indicators, data sources and success criteria for each intended outcome of your project. Outcomes may have more than one indicator.

* **Outcomes** arethe most important changes you would expect to see as a result of the project.
* **Outcome indicators** describe what you will look at or measure to know whether an outcome is achieved.
* **Success criteria** describes the measure you will use to decide whether this outcome has been successfully achieved. These should be as specific and measurable as possible.
* **Methods** explain the information you will use and how you will find or collect it.
* **Timing** explains both frequency and when information will be collected. Indicate the date or month when a specific data collection method will be used.

To align with the goals of the Innovative Workforce Fund, the matrix is divided into three areas:

* Service user satisfaction and empowerment
* Worker skills, satisfaction and engagement
* Organisational sustainability (more clients, reduced costs, financial sustainability).

You will find it helpful to refer to your program logic so that specific outcomes link to the overall purpose of the project

1. Outcomes Matrix

|  | Outcome indicator | Success criteria | Methods |  |
| --- | --- | --- | --- | --- |
| Service user satisfaction and empowerment | |  |  |  |
| Eg Provide access to services that were previously unavailable within the local area | Service user take-up of new offerings | At least 6 new service users; 10 existing service users access new service. | Service user data  Our standard satisfaction survey | Report 3 monthly starting with baseline in September |
|  |  |  |  |  |
| Worker skills and engagement | |  |  |  |
| Eg Attract new and suitable workers to the sector | Number of new workers attracted and retained | 10 new workers complete three months of work and are positive about their experience | HR data  In-depth interviews with workers conducted by external evaluator | Report as per IWF milestones, interviews during April 2018 |
|  |  |  |  |  |
| Organisational sustainability | |  |  |  |
| Eg More appropriate services can be extended to existing and new service user cohorts | Take-up by new clients  Expanded number of new service offerings  Ongoing viability | At least 4 new ‘hard to reach’ service users  Model can be sustained within NDIS pricing  Business systems are in place to support ongoing delivery | Service user data  Costs and prices are documented  Business system and practice audit | Report as per IWF milestones |
|  |  |  |  |  |

1. Comments

| Please add here anything you want NDS to note about either your Activity Work Plan or your Evaluation and Learning Plan. Please speak to your coach as well. |
| --- |
|  |
|  |
|  |
|  |

## IWF milestones (add others if needed, eg Report to Board)

| Deliverable | Due date |
| --- | --- |
| Activity Plan and the Evaluation and Learning Plan due | September 2017 |
| Progress report due to NDS | November 2017 |
| Final Implementation & Reflection report to NDS | 12 July 2018 |
| Audited Acquittal report to NDS | 12 July 2018 |

NDS logo ****

This template is for organisations participating in the Innovative Workforce Fund (the Fund) to document their project activities, and to reflect on what has been learnt.

It is for adaptation and use as required by each organisation.

**Progress Performance Report Template**

1. Date when last updated:

| Organisation |  |
| --- | --- |
| Project Name |  |
| Contact name and position of person responsible for completing this report |  |
| Contact details |  |

**Reflecting on implementation and early outcomes**

The purpose of project documentation is to track projects of IWF projects and to learn about the things that worked well and not so well. This will assist in shaping future work and provide lessons for others.

The following questions provide a guide to the topics to address. Your coach can assist you to refine questions specific to your project.

### Project establishment

| How have you have engaged key stakeholders in the design and governance of your project. For example, what have you done to engage service users, workers and any other project partners and what have been the results? | |
| --- | --- |
| What are your initial observations about what is required to initiate this type of work? What factors helped or hindered getting underway? | |
| Project activities  | Describe the activities you have undertaken. Refer to your Activity Work Plan. | | --- | | **Has the project proceeded according to your Activity Work Plan?** If not please provide a detailed explanation of reasons and any changes you have made to revise your plan. |  Project outcomes  | **List outcomes that have been fully or partly achieved by your work so far.** Refer to your outcomes matrix in the Evaluation and Learning Plan. Include information about any changes you have made to the outcomes matrix. | | --- | |  |

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**Final Performance Report Template**

1. Project details

Date when last updated:

Version number:

| Organisation |  |
| --- | --- |
| Project Name |  |
| Contact name and position of person responsible for evaluation |  |
| Contact details |  |

1. Reporting on outcomes (2 pages, please append data collection instruments or more detailed reports in addition)

In this section you need to provide the results of your project.

You will need to refer back to your outcomes matrix in the Evaluation and Learning Plan you submitted.

Based on the outcomes you identified, describe what your project achieved and the evidence you collected to measure this outcome.

Report outcomes under the following three headings:

**2.1 Service user satisfaction and empowerment**

**2.2 Worker skills and engagement**

**2.3 Organisational sustainability**

1. Reflections (5 to 10 pages plus any attachments plus completed tools and resources)

Use these questions to reflect on your experiences through the project. Your coach can assist you if you need to customise questions for your specific project.

## Reflecting on implementation

1. Engaging stakeholders: What were the most useful strategies you used to engage and communicate about the project? How/why were they successful? What would you do differently?
2. How appropriate was your initial concept? What/did you change or adapt along the way and why?

## 3.2 Reflecting on impacts and outcomes

1. What are the top two or three things you have learned from doing this project?
2. Have there been any outcomes that have surprised you?
3. Were there outcomes that you expected to see, but didn’t?
4. How did you measure success? How well did this capture project outcomes? Is there other information that would have provided a better understanding of outcomes?

## Reflecting on context: what worked, for whom and in what circumstances?

1. What worked well to support the achievement of your intended outcomes? In what situations did it work well?
2. What didn’t work so well in your project? In what situations didn’t it work so well, and why?
3. Knowing what you know now, what would you do differently?

## Reflecting on legacy: how sustainable are the innovations demonstrated?

1. Are you planning to continue with any of the practices or initiatives you tested during the project? Which practices and what will it require to continue with this approach?
2. Please explain how the changes you undertook can be sustained within the NDIS pricing framework?
3. Is the approach you trialled suitable to be replicated or adapted by other disability service providers? If yes, what types of service providers would be most likely to benefit and what would they need to do?