

INCA CONSULTING

Evaluation of the Work and Development Order Scheme: Qualitative Component

Final Report



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EXECUTIVE SUMMARY

Introduction

Scope of the evaluation

Between August 2014 and March 2015 Inca Consulting undertook the qualitative component of the first evaluation of the Work and Development Order (WDO) Scheme, on behalf of the NSW Department of Justice. This report presents the findings of this research. Other evaluation work underway in the Department of Justice will integrate this qualitative work with quantitative analysis of program data.

Methodology

The methodology is summarised in the following figure. A full description of the methodology is included in Section 1.3.

Figure E1: Overview of the evaluation methodology



Key findings – outcomes

Effectiveness in meeting program objectives

- There was broad agreement amongst sponsors (94%) that the WDO scheme is achieving its objective of enabling vulnerable people to resolve their outstanding NSW fines by undertaking activities that benefit them and the community.

Client outcomes

- 95% of sponsors said the scheme had helped reduce the level of stress and anxiety their clients felt about their fines debt.
- 87% of sponsors said the scheme had enabled clients to address the factors that made it hard for them to pay or manage their debts in the first place.
- The key client outcomes identified were:
 - Providing relief from a major cause of stress, about which many clients feel powerless to do anything. For many, this enables them to start addressing other issues impacting on their lives.
 - Engaging with counselling or treatment to address their issues that impacted on their ability to take control of their fine debt, ie engagement with services that otherwise would not have happened.
 - Providing incentive to commit to drug treatment and recovery.
 - Encouraging a case management approach and access to a range of services.
 - Facilitating the recovery of their driver's license, which enables work options and allows participants to meet family commitments.
 - Starting to feel they are regaining control of their lives.
 - Improving self-esteem and feelings of self-worth and self-efficacy.
 - Developing a greater sense of responsibility amongst some clients.
 - Providing a catalyst for a more positive phase of their lives, eg through education, training and finding work.
 - Overcoming social isolation by having some money 'in the pocket' (because of not having to pay fine instalments), or as a result of working alongside others at an organisation (some even stay on to volunteer afterwards).
 - Modelling of better relationships with government agencies, which are seen as giving the person 'a second chance'.
 - Providing a safety net for the most vulnerable, including those with mental illness and intellectual disabilities, who, due to the often chaotic nature of their lives, may find it difficult to manage debts.
- Most participants received no further fines during their participation in the scheme. It should also be acknowledged that it is unrealistic to expect the WDO scheme to address the often multiple underlying reasons a person gets a fine in the first place.
- Perceived negative client impact was negligible. Where sponsors expressed concern, this tended to relate to their view that clients sometimes took the scheme for granted, that

they might use the WDO scheme as a ‘safety net’ rather than an opportunity to change behaviour.

Organisational outcomes

- Sponsors identified a number of ways in which their organisations had benefited from the WDO scheme, such as:
 - Providing a tool of engagement, an incentive for clients who might otherwise be reluctant to engage (or stay engaged) in counselling or treatment.
 - Particularly in the case of D&A treatment, giving clients an additional incentive (getting clean is usually the main motivator) to persist with treatment.
 - Helping organisations/clinicians to build rapport and develop trust with clients, who are often very grateful that the organisation/caseworker is helping them.
- Providing a referral source for volunteers (often complementing the Work for the Dole and Community Service Order programs).
- Some sponsors, primarily government organisations, indicated concerns relating to the administrative tasks for WDOs and the time required to undertake them.

Key findings - scheme administration

- The main reasons sponsors sign up for the scheme is to meet the needs of their existing clients and to expand the range of services they can offer. However this depends on the nature of the organisation – eg many of those providing voluntary work through WDO do so to meet their need for volunteers.
- The process of applying to become a sponsor is seen as being quite straightforward. Most sponsors said the application process was about as simple as you could ask for, given the nature of the scheme.
- Most sponsors apply for WDOs for any client who may be eligible, although 10% said they offer the scheme only to a sub-group. This discretion depends on the sponsor’s perception of how ‘in need’ the client is (eg financially, or in relation to mental health or drug and alcohol addiction) and/or how serious and motivated they were to change. It is clear that sponsors sometimes play a gatekeeper role in identifying where clients may be trying to ‘play the system’.
- For most sponsors (72%) the WDO scheme is a regular part of their operations or service, and many sponsors have integrated asking about SDR debt into their regular intake processes.
- Some key barriers to applying for more WDOs were identified:
 - clients with fines not meeting the eligibility criteria
 - no suitable clients with fine debts
 - clients declining the suggestion of doing a WDO
 - staff capacity to supervise WDO activities
 - availability of suitable activities locally.
- The application process (for clients) was generally not seen as a barrier to scheme growth; indeed the process of applying for WDOs was seen as simple and straightforward, particularly with the support of the WDO Hotline.

- Applying on the basis of *acute economic hardship* is seen as simpler than the other grounds for eligibility, and is also more common. *Intellectual disability or cognitive impairment* is seen as the hardest of the five criteria, followed by *serious drug/alcohol addiction*. However it is also the case that sponsors tend to apply under the criteria with which they are most familiar, those that reflect the core work they do, and those for which it is easiest to gather the evidence. For these reasons, application criterion should not be taken as a proxy for the issues that a client might have.
- Sponsors tend to directly provide activities that are core business for them, and refer out to third party organisations for non-core activities. Some sponsors take a case-managed approach, tailoring a program of activities across providers. Some are clearly very experienced and good at developing a program based on client needs, while others focus on just the service they provide directly.
- Few sponsors are delivering mentoring programs at present, and the reasons for this are not clear.
- Third party referral is common among government and NGO sponsors, but prevalence depends very much on the *nature of the activity*, with health treatment being the most likely to be referred out, and volunteer work and mentoring being the least likely. *Sponsor type* is also a factor in referral patterns: NGOs are much more active in referring than government sponsors for drug and alcohol, medical health and mental health treatment, and educational, vocational and life skills courses.
- Surprisingly, sponsors often were not aware that the scheme allows referral to a third party. Many sponsors only refer to third parties they know and trust to deal with their client and report honestly and reliably on their compliance. This highlights the importance of sponsors fostering effective partnerships with other service providers locally.
- The practice of varying of cut-out rates (by special application) is rare. The one area in which a few health provider sponsors use their discretion was in applying hourly rates instead of compliance model rates, because this was more appropriate to the client's treatment. The facility to vary the rate does not appear to be well known either.
- Few sponsors experience difficulties in reporting. Often sponsors build in WDO reporting into their own client management systems. This appears to relate primarily to instances when third parties are slow or unreliable in reporting hours. Some technical issues with the portal and the reporting schedule were also raised.
- The WDO Hotline was widely praised for the staff's helpfulness, effectiveness and willingness to sort out client and sponsor issues. The Hotline was generally seen as a cornerstone of the scheme, without which it could not work. The Hotline functions not only as a source of information and advice, but also as a proxy training mechanism.
- Additional supports could include:
 - additional training
 - better availability of promotional materials for clients
 - networking opportunities with other sponsors
 - regional support services
 - improved portal capability
 - better knowledge about other sponsors in their area.

Future directions and areas for improvement

Sponsor recruitment and retention

- Sponsor recruitment should be prioritised through identification of gaps in the current sponsor network. Strategies with potential include targeting high-capacity organisations (eg large multi-branch NGOs) that can implement the scheme in multiple locations or parts of their service, government agencies (eg Corrective Services) and ‘gatekeeper’ services such as volunteer resource centres. It is also sensible to look at the reasons behind sponsor attrition (beyond the scope of this project).

Communication and promotion

- A single consolidated website, supported by fresh branding for the scheme.
- Communication materials for sponsors; but these communication materials should focus on raising awareness, leaving the sponsor to fill in the detail as part of their own process. Niche marketing is recommended over broad communication/mass media to ensure that access to the scheme remains targeted just to those who need it most. Options could include looking at SDR’s communication when fines become overdue, as well as other touch points people have when they are struggling to make repayments or needing to call on other hardship provisions (e.g. banks, utility companies, Telco providers).

Support and guidance for sponsors

- We do not believe it is necessary to introduce a broad-based financial reimbursement for sponsors. However, there may be a place for targeted support of particularly crucial elements of the scheme, e.g. gateway services such as volunteer resource centres, or health practitioners in private practice.
- The WDO Hotline is highly valued by sponsors and provides essential ‘learning in the moment’ while helping minimise administrative tasks. It is a cornerstone of the scheme that functions at once as a source of information, an access point to the scheme, a risk management strategy, a trouble shooting mechanism and a proxy training mechanism.
- The portal may be overdue for a system upgrade. This should be a follow up piece of work for the WDO Governance Group.
- There is demand for further training: webinars and other similar low-cost training options may be worth investing in, particularly if they can be recorded and watched through the portal as videos, as required.
- Although communication between sponsors and SDR is excellent, there is a gap in peer-to-peer communication across the sponsor network. There is scope for promoting greater opportunities for sponsors to network with each other, and at the very least, know who else is a sponsor in their area (eg through a searchable database of all active sponsors within the portal).
- It is important to acknowledge that, rather than over-reaching the boundaries of the scheme, sponsors tend to operate well within the guidelines and reflect a high degree of conscientiousness and self-governance. The key to further development of the guidelines should be to help sponsors self-regulate and self-govern, rather than introducing new business rules that unduly limit application of the scheme in too narrow a way. The goal

should be not to prescribe their practice, but to optimise their application of the scheme in their setting, in light of the broad goals of the scheme, to maximise both its reach and the benefit in the target population.

Design of the scheme

- *Resolving differential perspectives on scheme intent:* there are differences between what sponsors see as the intent of the scheme, and the stated intent of the scheme. While both views see the scheme as something to help vulnerable people who might otherwise be harmed by their fine debt, a common belief amongst sponsors is that the scheme also serves a rehabilitative function, and therefore those who do not rehabilitate or ‘learn their lesson’ may not be deserving of further opportunities. It would be timely for the key stakeholders to have a discussion around these issues and determine whether these issues need to be addressed, and if so how, so that the objectives of both the WDO scheme and the sponsor organisations may be pursued.
- *Eligibility:* there is little that was found in the research that would warrant varying the eligibility criteria in order to improve the function or reach of the scheme. Issues such as the inclusion of gambling addiction, youth and adjustment of income thresholds should be able to be dealt with within the current guidelines.
- *Activities:* youth mentoring raises the most questions, and there is no clear rationale for it only applying to young people under 25, nor for why it sits solely within the compliance model (as opposed to hourly rate). School attendance also raises a few questions, for there are some who would like to see WDOs available as another tool available for truancy management.
- *Cut-out rates:* an hourly rate accrual pathway (at \$50 an hour) could be established as the new *default* track for circumstances that currently default to the compliance method (i.e. for WDOs that are primarily in the drug and alcohol and mental health treatment categories). The scheme should keep the compliance method open as an option, for the same reasons as it was included in the original design. There is also an argument for making a specific ruling on methadone ‘dosing only’. However, such a determination would need to be made in close consultation with the Ministry of Health.

Governance and monitoring and management

- Members of the governance group have identified a need for minor improvements to their processes, including:
 - Clarification (and perhaps revisiting more broadly) the demarcation of who is responsible for what within the scheme; ensuring adequate and effective sharing of learning, data, information, knowledge and new ideas between the partner organisations;
 - A streamlined processes for proposing changes to the guidelines when required; and
 - Development of better ways to resolve issues with the program out of session.

- Other agencies with strategic alliances are important for the expansion and positioning of the scheme, and should be included in discussions about ongoing development. These include Corrective Services, Juvenile Justice and the Ministry of Health.
- In addition to further exploring the high rate of sponsor attrition, there would be merit in addressing economic evaluation questions about the value of the WDO scheme to the NSW government.
- While at this stage we see no need to reactivate the dormant sponsors' monitoring committee, it would be worth looking at engaging selected sponsors to co-design improvements to the scheme, eg through an expression of interest process.

1 INTRODUCTION

1.1 Aims of the evaluation

In August 2014, the NSW Department of Justice commissioned Inca Consulting to undertake the qualitative component of the first evaluation of the Work and Development Order (WDO) Scheme. This is the first evaluation of the scheme since its full introduction in 2011, and it builds on the findings and recommendations of the pilot evaluation.

Following four years of permanent operation, the overall objectives of this evaluation are *formative* in nature:

- to identify the strengths and weaknesses of the scheme as it is currently operating; and
- to inform the strategic development and direction of the scheme into the future.

This report presents the findings from this work. Other evaluation work underway in the Department of Justice will integrate this qualitative work with quantitative analysis of program statistics.

The purpose of the evaluation is not to establish the rationale for the scheme's existence, nor to inform a 'stop/go' decision about its continuation. Neither does the evaluation need to carry out a 'performance audit' function with organisations supporting the scheme, as a separate process for that has already been established.

1.2 The Work and Development Order Scheme

For the most part, and for most people, court fines and penalty notices provide an effective disincentive for certain offending behaviours (e.g. travelling on a train without a valid ticket or parking on a clearway) and are an important complement to other crime prevention strategies (e.g. loss of points on a drivers' license, for a driving offence).

However, there are some circumstances under which the impact of fine debt can be disproportionately negative, producing outcomes that are at odds with the intent of the fines system as a whole. Quoting from the 2011 evaluation of the WDO pilot scheme¹:

For people with a mental illness, unstable housing, acute financial stress or limited cognitive function, accumulating outstanding debt from fines and penalty notices is often a result of multiple contributing factors. These include:

- *having a range of other competing debts, bills and expenses, and needing to make difficult choices about which get paid*
- *new fines having little meaning, as repaying any amount feels out of reach*
- *engaging in confused, anti-social, risky or self-destructive behaviour due to mental illnesses, behavioural disorders or substance abuse*
- *denial, ignorance or misinformation about one's personal debts and the State debt recovery process.*

Inability to repay fine debt has a range of consequences, not the least of which is suspension of one's driver's licence.

The psychological impact of un-payable fine debt tends to be described by WDO participants in terms of burden, stagnation, anxiety, captivity, death and despair.

¹ *A fairer fine system for disadvantaged people: An evaluation of the time to pay, cautions, internal review and the work and development order scheme.* May 2011. Available online at http://www.lpcldr.lawlink.nsw.gov.au/agdbasev7wr/lpcldr/documents/pdf/a_fairer_fine_system.pdf. Quotation taken from Appendix B, page iii.

Participants speak of hopelessness, shame and negativity that pervades other areas of their life, and leads to a heightened sense of anxiety.

The trigger for these negative psychological impacts is not necessarily the amount of debt owed; rather, it is the perceived impossibility of ever being able to be free of it.

The WDO scheme enables eligible people who are experiencing extreme hardship (for one reason or another) to reduce their fine debt by participating in voluntary work or approved courses or programs. The scheme was introduced alongside a number of other reform measures under the *Fines Further Amendment Act 2008* (NSW). Together, the purpose of the changes was to ameliorate the systemic difficulties that fines present to very disadvantaged people in the community.

WDOs apply to any fine debt with State Debt Recovery (SDR), and allow the debt to be reduced by up to \$1,000 a month, until it is completely paid off. During a WDO, SDR also ceases enforcement action associated with the debt and lifts any driving restrictions.

Eligibility for a WDO is open to young people and adults with a fine debt who: have a mental illness, intellectual disability or cognitive impairment; are homeless; have a serious addiction to drugs, alcohol or volatile substances; or are experiencing acute financial hardship

A number of eligible activities can be undertaken under a WDO, to reduce fine debt:

- unpaid voluntary work for or on behalf of an approved organisation reduces debt by \$30 an hour, up to the \$1,000 maximum per month;
- undertaking financial counselling, other counselling or participating in educational, vocational or life skills courses reduces debt by \$50 an hour (\$350 for a full day), again up to the \$1,000 maximum per month; and
- full compliance with a mentoring program, drug or alcohol treatment or medical/ mental health treatment (in accordance with a treatment plan) reduces debt up to \$1,000 per month. Partial compliance may result in proportionally less debt reduction.

There are certain restrictions on these activities. For example, mentoring programs can only be included in a WDO if the client is under 25 years of age, and people applying on the grounds of addiction must include drug/alcohol treatment in their WDO, although they may engage in other activities as well.

A WDO is a three-way agreement between SDR, the client and an approved sponsor (who may be an NGO, health practitioner or a government agency) and in some cases, a third-party activity provider appointed by the sponsor organisation. (Since being made permanent in May 2011, the WDO scheme has grown rapidly. At the time of reporting, there were 1,251 sponsor organisations registered in NSW, of which 709 were considered 'active' (had opened a new WDO in the past 12 months). Most are not-for-profit organisations or healthcare providers, complemented by a smaller number of government agencies.

1.3 Methodology

The qualitative work for the evaluation was undertaken between August 2014 and early March 2015. The research process is summarised in Figure 1.1 (overleaf).

Figure 1.1: Overview of the evaluation methodology



Planning

A number of program documents were provided as background to the project, and the consultants met with representatives from the Department of Justice for a briefing and to discuss the methodology. Following this meeting a project plan was finalised.

Sponsor survey

A survey questionnaire was designed in consultation with the WDO Governance Group, and piloted with a small number of sponsors (n=12). A survey invitation was then emailed to the primary administration contact for each sponsor location. Non-responding sponsors were emailed a reminder and then received a letter regarding the survey. Although online completion was the main option for responding, sponsors were also able to run through the survey on the phone (via the SDR Hotline) or send in a hard copy to be entered by SDR. About a dozen sponsors chose these alternative options.

A total of 323 sponsors responded to the survey, representing 26% of all sponsors and 36% of active sponsors (ie those who had an approved WDO in the past 12 months). Details about the final survey sample are included at *Appendix A*.

An Interim Report was prepared at the conclusion of the survey research.

Organisation and client interviews

Qualitative research was used to gather more in-depth information and perspectives from sponsors and some of their clients, as well as third party organisations. Sponsor organisations were excluded from the qualitative sample if they had been selected for the separate audit process or had completed the survey and asked not to be approached for follow-up.

The four fieldwork locations (Illawarra-Shoalhaven, Central Coast and Lower Hunter, Central West NSW and Western Sydney) were selected to illustrate different levels of maturity of the scheme, with some regions having experienced more support and promotion (e.g. from Legal Aid NSW and Aboriginal Legal Service NSW/ACT) than others. Face-to-face interviews were in these four regions, and telephone interviews were conducted in a fifth 'region', namely 'rest

of NSW⁹. The interview discussion questions used for the interviews can be found in *Appendix B*.

Sense making workshops

Three separate workshops were conducted with key WDO stakeholders to discuss the findings and consider various options. A workshop was held with each of the following: Department of justice, Legal Aid NSW and SDR.

2 FINDINGS RELATING TO OUTCOMES

This section presents a synthesis of the findings from the sponsor survey and interviews with sponsors, clients and ‘third party’ organisations.

2.1 Effectiveness in meeting program objectives

Sponsors were told in the survey that, “the broad objective of the WDO scheme is to enable vulnerable people to resolve their outstanding NSW fines by undertaking activities that benefit them and the community”. Almost all felt that the scheme has been very effective (67%) or fairly effective (26%) in achieving this goal.

Health practitioners tended to be a little more conservative in their response (53% very effective, 40% fairly effective), but were still overwhelmingly positive. In explaining their responses, sponsors focused on the scheme’s capacity to assist the most vulnerable to resolve their fine debt and to allow them to move forward in their lives. Some comments included:

“We provide services to highly disadvantaged people. Unpaid fines can lead to unmanageable debt which can result in loss of housing due to inability to pay rent, lack of funds to provide basics for themselves and their families - eg food. The scheme enables people to alleviate this pressure (which is often just one of many) and at the same time they contribute valuable time and energy into our organisation, which often lifts their self esteem and confidence and skills levels at the same time.”

“We have seen the changes that occur in clients as a result of both being able to free themselves of a significant debt that they were unable to service, while at the same time gaining new skills or addressing learning difficulties. This leads to new hope as well as the prospect of becoming a more productive member of the community. One immense benefit towards employment and community participation is the ability to have RMS restrictions removed.”

“We have found the program incredibly effective and a compassionate way to assist vulnerable people to change their lives.”

“The financial requirements of fines are often beyond our clients’ financial resources. WDOs allow them to remove the often very large barrier of debt and then move forward in their education and greater life plans.”

“We have seen young men eliminate their fines and change the course of their lives.”

“Win-win. Encourages consumers to attend treatment, helps them out of stressful situations, benefits the community by encouraging citizenship and community health.”

“We work with a very disadvantaged community and this scheme enables them to resolve in some cases long-term debt that they would never be able to pay off with such limited resources.”

“The WDO program has changed the lives of our inmates. They are extremely motivated to wipe off their debts as they have said to me that before they felt there was no point in trying to pay it off because the amounts are so huge they couldn't make a dent. Now they see debt free as an achievable goal. They also say that once they wipe the debt their plan is to keep it that way. They told often about now being able to go for their drivers' license. This program is beyond extremely effective for our inmates.”

Those who expressed some reservation about the effectiveness of the scheme were primarily concerned that some people might take the opportunity for granted or treat it as an ‘easy option’, without modifying their behaviour that resulted in the fines in the first place. There came from the research with sponsors a strong sense of the scheme being there to do more than relieve people of their fine debt; for many sponsors, the scheme should also have a rehabilitative effect so that the client ‘learns a lesson’ and avoids future fines. It is important to note that this is not a stated outcome of the WDO scheme and is not referred to in the WDO Guidelines. However this aspect is something that many sponsors overlay on the scheme, and in some cases has influenced their perceptions of effectiveness. This is discussed further in Section 4.2. Some example comments included:

Survey comments from sponsors included:

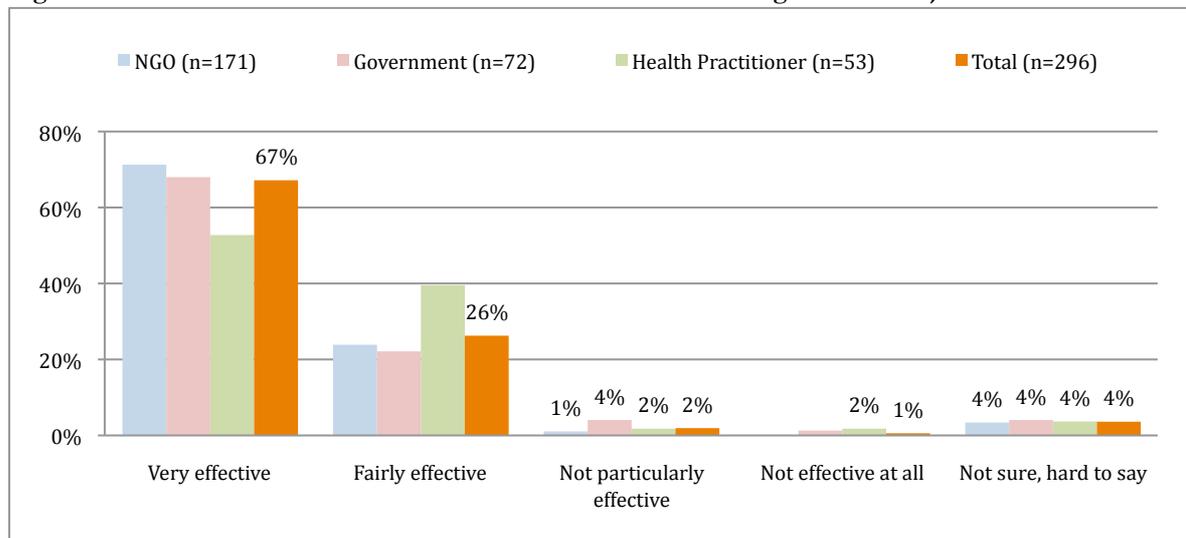
“Young people we work with, at times, view WDO as an easy way to get rid of fine-debt, and when WDO completes, he/she is made subject to further fine - ongoing cycle.”

“Often the same people come back over and over with the same fines, also if they are logged in the system before they finish their hours they often don't come back to finish them as they get their licence back etc.” “For some it is effective but for others they feel it is a right, but also don't take responsibility for their debts and gain little from the activities. At times they try to bully those administering the WDO. There are those few who do truly benefit but the others abuse the opportunity.”

“There need to be measures in place for people that continue to receive fines. WDO is a great scheme, however it can be taken for granted and we want people to take ownership for not paying fines and to change their behaviour in future.” (Sponsor)

“The majority of inmates use the scheme as it should be used. A small minority have a sense of entitlement and make unreasonable demands bordering on harassment/ abuse the system i.e. they focus on the reduction of fines rather than the benefit of the intervention.” (Sponsor)

Figure 2.1: Perceived overall effectiveness of the scheme in achieving its broad objective



N=296 sponsors who have supervised one or more WDOs.

2.2 Client outcomes

Sponsors were very positive about the outcomes of the scheme for their clients who had participated. For example, in the survey:

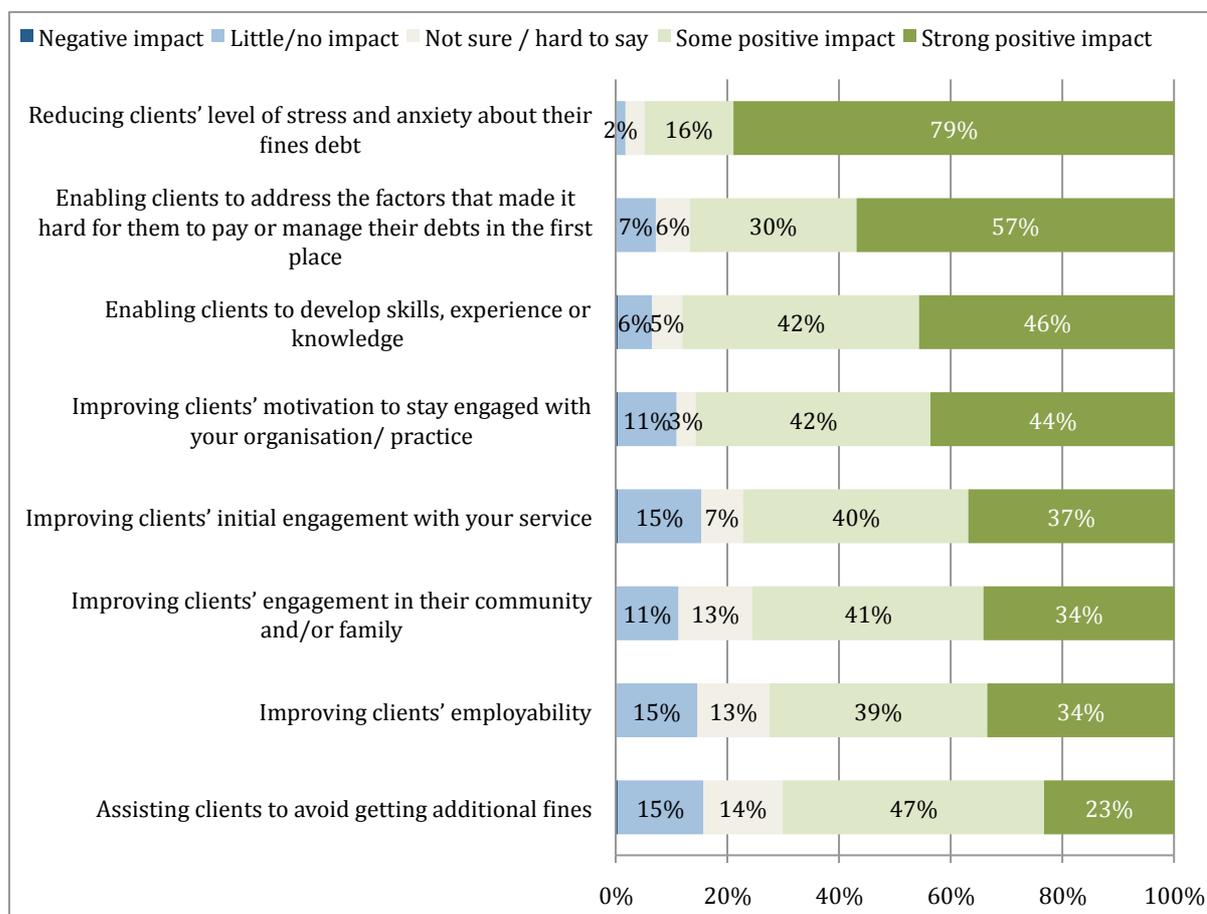
- 95% said the Scheme had helped reduce the level of stress and anxiety their clients felt about their fines debt (79% *strong positive impact*, 16% *some positive impact*); and
- 87% reported the Scheme had enabled clients to address the factors that made it hard for them to pay or manage their debts in the first place (57% *strong positive impact*, 30% *some positive impact*).

Results for other client outcomes can be seen in Figure 2.2. The one major ‘other’ client outcome that sponsors mentioned in the survey and our conversations but is not reflected in the chart is the impact of a WDO on self-esteem and self-worth.

“They feel they have a chance to make things right again, they feel less overwhelmed by financial debt this make a huge impact to their mental health”. (Sponsor)

My clients have said that before the scheme they would keep offending, as they did not think they could ever pay their debt - now see some hope that they could eventually get their licence back -gives them motivation not to re-offend (& get more fines.) (Sponsor)

Figure 2.2: Perceived impact of the WDO scheme for clients



N=295 sponsors who have supervised one or more WDOs.

Comments in the survey and the qualitative research strongly reinforced these findings. Sponsors and clients identified a number of positive client outcomes, including:

- relief from a major cause of stress about which many clients feel powerless to do anything;
- the ability to take care of one major cause of stress which enables them to start addressing other issues impacting on their lives;
- engaging with counselling or treatment to address their issues;
- for drug treatment, preventing retrograde steps in recovery: because they can budget for it, patients may be able to remain dosing at a community pharmacy (more flexibility and autonomy) instead of having to return to the public clinic (fixed, inflexible dosing times);
- encouraging a case management approach and access to a range of services;

“It’s a weight off their shoulders. They can start to get some other things sorted out in their often chaotic lives.” (Sponsor)

“They can see the end goal of getting their license back.” (Sponsor)

“[My caseworker] helps me with my studies. Before, I was at TAFE but I was jiggling a lot, I just didn’t want to do it. She got me back in and helps me stick at it.” (Client)

- the ability to get their driver's license back, which enables work options and allows them to meet family commitments;
- starting to feel they are regaining control of their lives;
- improved self-esteem and feelings of self-worth and self-efficacy;
- development of a greater sense of responsibility amongst some clients;
- for those doing volunteer work, a feeling of self-worth from contributing to others;
- some clients using the WDO process to springboard into a more positive phase of their lives, e.g. through education, training and finding work;
- overcoming social isolation by having some money 'in the pocket' (because they are not paying fine instalments), or as a result of undertaking voluntary work as part of a WDO in their community (some even stay one to volunteer afterwards); and
- modelling of better relationships with government agencies, who are seen as giving the person 'a second chance'
- Providing a safety net for the most vulnerable, including those with mental illness and intellectual disabilities, who, due to the often chaotic nature of their lives, may find it difficult to manage debts.

"I like it because it's a hand-up, not a hand-out". (Sponsor)

"It teaches them how to goal-set. Weekly goals are important, for all aspects of their lives, not just paying off the fine." (Sponsor)

"When I was paying off my fines, I wouldn't go out, because I didn't have any money to go out. These days I can go out, I don't have to spend all day inside. Mentally, it's so much better. Like I was stressing, like 'What am going to do?'. Right now, it's stress-free." (Client)

"The absolute relief when they're shown there is no debt left is something that words cannot explain." (Sponsor)

Case study - Brian

Brian is in his late fifties and does volunteer work under his WDO driving a truck for an NGO in Western Sydney. When Brian began working two days per week at the organisation six months ago, he had approximately \$120,000 in SDR debt. He feared he would have to go bankrupt and lose his house and would be unable to continue caring for his disabled father.

Brian applied to SDR himself and was given a list of organisations to sponsor his WDO. He chose this NGO because it is close to his home and allows him to get to his father when required. He has one day's work a week at his former company. He is also paying \$100 per fortnight to SDR and on his current trajectory he anticipates clearing his debt in six years.

"They were threatening to cancel license and registration, but I was making some attempt while I could afford it – 'cos I was getting a supplement carer's pension and they were taking that, which made it very difficult to live. So I had to do something – it was either go bankrupt or get some kind of casual work. And so I got put onto this."

Brian says the scheme has been a 'life saver':

"It's saved my backside basically. See I'd have to have sold the house 'cos I'm living at Dad's place... But it got to the stage where I was going to have to sell the house, or sell Dad's house, and do something. I didn't know what to do. This was thrown in my lap and it was a way out... Two days a week for six years, versus losing the house – it's a good result to me."

Case study – Brett

Brett is in his early 30s, living in social housing on the Central Coast. He is on the Disability Support Pension, and several months ago was at risk of losing his tenancy in public housing due to property maintenance issues, significant rental arrears and loud noise leading to neighbour complaints. Brett was referred to PHAMs (the Personal Helpers and Mentors program), an intensive mental health and tenancy support service. Over time, he went through a number of phases in what he and his case worker focused on:

- Step 1: The focus was on basic function and stabilisation of his behaviour (avoiding angry outbursts and so on – Brett was physically unable to sit still in meetings). This involved team work between psychiatrist, psychologist and general practitioners, including medications
- Step 2: The focus shifted to Brett's tenancy, to avoid going to the tribunal – this was stabilised through a brokerage arrangement.
- Step 3: The focus turned to Brett's utilities (he was about to get cut off) – this was resolved through a payment plan.
- Step 4: Brett's focus then turned to his state debt of around \$7,000, which was mostly from trains (riding without a ticket, drinking on the platform, offensive conduct) when he was unwell. Brett's caseworker set him up with a WDO, using the model of \$1,000 per month for full compliance with his treatment plan. Brett and his case worker agreed on a minimum set of activities for each month, which he always achieved.
- Step 5: Brett is still 'paying off' his WDO, but doesn't have long to go. He is also paying his rent and his utilities, and is sober. His focus is now on custody of his daughter.

In terms of avoiding future fines, some clients were said to ‘learn their lesson’ about the transgression/s that resulted in them getting their fines, while others continue to struggle with this aspect of their lives. A small number, it was believed by some sponsors, may persist with the actions that resulted in them getting their fines.

Instances of negative client impact were extremely rare and isolated. Examples that sponsors gave were

- under-reporting of client activities leading to hours not getting counted – frustrating for clients;
- clients missing out or having a late start due to difficulty proving eligibility; and
- perceptions that some clients may use the scheme as a ‘safety net’ rather than an opportunity to change behaviour (this issue is discussed in more detail in Section 4.3)

“I’ve seen it engage inmates, for sure. One guy refused to come to programs – everyone said ‘don’t bother with him’. I sat down and said ‘What’s going on?’ I asked him about his debts, and he did have some so I said ‘How about you come along and you can get those debts down’. He got so much out of it, and said ‘I want to do another program straight away’ when the first one finished. He had no state debt by then, but he came to that second group and he stayed.” (Correctional facility sponsor)

“Every single time I get a ticket now. It’s like ‘It’s only one stop...’ Nup. I’ll get a ticket. Cos even that one stop I have a chance of getting a fine. And I think to myself, ‘What’s the point?’.” (Client)

“Clients demand free counselling in order to get rid of their debts, and continue to live in a chaotic or unmotivated way.” (Sponsor)

“Inmates who would normally be reluctant to ask education about reading courses have now got extra reason to do so. It has also spread good will among the inmate population so that as there is less anger amongst those who would normally have been stressed by debt, the tone in class has improved. I can’t speak highly enough.” (Correctional facility sponsor)

Case study – Kelly

Kelly is a young volunteer who has a terminal illness. Her fines were from driving offences. Kelly cleared her debts by volunteering at the Before and After School Care and youth group, and also by helping run a fundraising event. Kelly is no longer able to volunteer regularly as she has become too sick, but now has relationships with a number of community centre staff and community members who are able to stay in contact and ask after her. *“I think she took a lot away, not just clearing her fine. She learned a lot of life skills here.”*

Case study - Nikki

Nikki is 22-year old woman who was recently placed with a specialist homelessness service in Western Sydney, having been in and out of refuges since the age of 16. Prior to her engagement with the service, Nikki started a TAFE course at a college on the Northern beaches but was not taking it very seriously and barely attended. When she turned 21, a caseworker at the homelessness service advised her that a vacancy had come up that would give her longer-term accommodation. By this time she had about \$1,500 of fines, from train and traffic/speeding offences.

During her intake process, the caseworker told Nikki about the WDO scheme and how it could help her:

“I was like, ‘Are you serious?’ I couldn’t believe it. I was already paying \$20 a fortnight. At that time I was on my Ls and I kept getting suspended because I wasn’t paying my fines so I thought the least I could do is \$20, but you know, I could also use that \$20 for other stuff.”

On her WDO, Nikki meets regularly with her caseworker. She has returned to TAFE, having enrolled in a college nearby, and will complete her Certificate III in Beauty Therapy at the end of the current semester. She has also undertaken life skills courses (eg cooking, managing finances and paying bills, living on your own).

“I never used to talk to case workers or do counselling or anything like that. I never got anything out of that. So why should I do it? [After I started doing the WDO] Now it just comes freely - I walk into the office and I’m like ‘I need to talk now’”.

“It’s not really about the fines, I think that’s just, it’s like a benefit to me for what I’m doing here. You know what I mean? If I want to improve my life, like this is a benefit for me. It will only work if I make it work. Like if I don’t take the step, it’s not going to take the step with me.”

Case study – Di and Lorraine

Di and Lorraine are Aboriginal elders in a coastal town in NSW. Di lives on the Carer’s Allowance and a small wage; Lorraine is in a similar situation.

Di had a \$500 fine debt, and Lorraine a \$200 debt, both of which have been cleared through WDOs by volunteering at the Aboriginal Corporation. Di’s fine was from two low range speeding tickets.

Di started paying the fine back by instalments, but then took up a WDO to finish it off:

“\$500 was too much of a big amount to kick, and paying \$50 a fortnight was the difference between food for my family and food just for me and my husband. We’ve told our community if they’ve got fines they can do them here. So I asked the admin office if I could do one too, and she said sure.”

Case study – Jeanette

Jeanette is a single mum in her late 30s who lives in Aboriginal community housing. She had \$2,000 in fines for not voting and because her dog bit someone. Prior to her WDO she had a time to pay arrangement with SDR, repaying \$30 a fortnight.

While interstate visiting a sick relative Jeanette missed a few instalments, and her bank account was frozen. This was very difficult for her, particularly as she was the primary carer for this relative at the time. She learned about WDOs when she was relaying this story about her bank account to another woman back home. Word of mouth is particularly important as a communication channel in her community. When asked to explain the general understanding of the WDO scheme in the community, Jeanette explained:

“The grapevine is that WDOs are a way to pay fines off, get them out of the road so it doesn’t go too far. You can stop them coming to visit you, and you don’t have to worry about it no more. You can just get it done – you WDO it.”

Jeanette was hugely relieved to hear about the scheme. Her WDO involves voluntary work at the local Aboriginal Corporation, helping 4-5 hours per week with administrative duties in the office (on the phone, replying to emails, organising printing for meetings etc).

Jeanette’s fine is now almost paid off, down to just \$300 (10 hours to go).

Case study – Nick

Nick is an unemployed machine worker in his late fifties, who accumulated \$2,500 worth of debts in a fairly short period of time. Some smaller fines from driving offences went unpaid due to being out of work, which then led to additional fees and then loss of his license.

He started coming to the neighbourhood centre for lunch a few times a week, and through that heard that that you could work your fines off at the centre. Nick asked the coordinator, who agreed and signed him up for volunteer shifts in the kitchen and doing pack-up. He then went on to extend his WDO to include a TAFE computer course and a Certificate II in Aged Care.

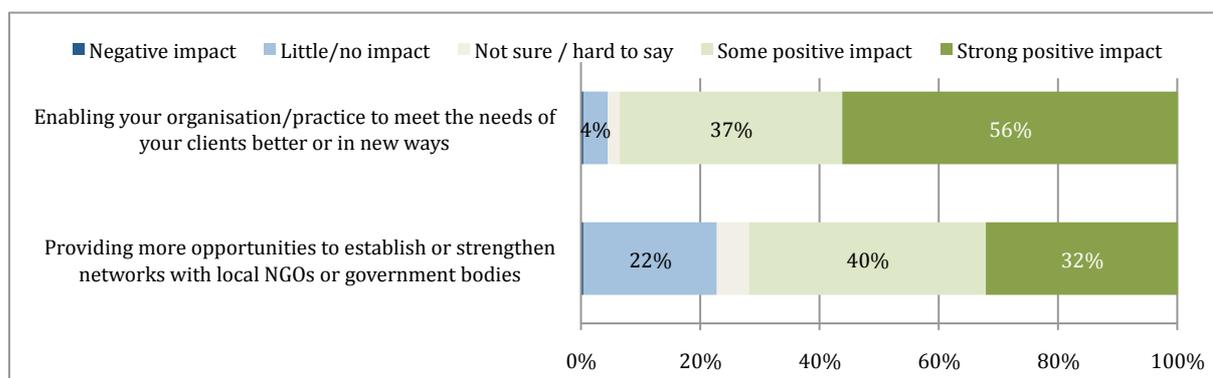
With his fines now paid off, Nick has agreed to stay on as a lead volunteer for as long as he is able (i.e. until he finds work). He has even had one or two paid shifts at the centre, filling in for staff when they are on leave. For Nick, his WDO has helped him ‘stay out of the doldrums’ and move on from that unfortunate period in his life. Without the WDO he would have been paying off the debt from his unemployment benefit until the Christmas after next, at \$20 a fortnight.

2.3 Organisational outcomes

Both parts of the research found the *organisational outcomes* were very positive. For example, in the survey (Figure 2.3):

- 94% indicated the scheme had enabled their organisation or practice to meet client needs better or in new ways (56% *strong positive impact*, 37% *some positive impact*); and
- 72% reporting that the Scheme had provide more opportunities for their organisation or practice to establish or strengthen networks with local NGOs or government bodies (32% *strong positive impact*, 40% *some positive impact*).

Figure 2.3: Perceived impact of the WDO Scheme for sponsors



N=295 sponsors who have supervised one or more WDOs.

During the qualitative research phase, sponsors identified a number of ways in which their organisations had benefited from the WDO scheme, such as:

- providing a tool of engagement with clients who might otherwise be reluctant to engage (or stay engaged) in counselling or treatment;
- particularly in the case of D&A treatment, giving clients an incentive to persist with treatment;
- helping organisations/clinicians to build rapport and develop trust with clients, who are often very grateful that the organisation/caseworker is helping them;
- providing a source of volunteers (often complementing the Work for the Dole and Community Service Order programs).

It was pointed out that the extent to which clients benefit from the scheme depends on their length of engagement:

“It’s a hook for getting people into treatment. If you can get them to comply for 8 weeks, the penny might just drop.”
(Sponsor)

“WDO is a clear benefit, an additional selling point for our service. A foot in the door, if you like. It increases our professionalism. We’re not only offering financial counselling, it actually has a tangible benefit”
(Sponsor)

“I never ever liked interacting with caseworkers, but if good outcomes are going to come for me, then why not?”
(Client)

“The level of impact depends on the amount of hours required. A client who completes 10 volunteer hours will of course gain less of the indirect outcomes than a client who has to volunteer with us for several months to meet their WDO requirements.” (Sponsor)

A number of organisations that provide unpaid work opportunities under WDO reported having some clients stay on to volunteer after their WDO has been completed because they like the organisation, community and/or environment.

In the survey, around one in ten sponsors (9%) said they had noticed changes in the demographics or needs of their client base, as a result of becoming a WDO sponsor. In most cases this related to mainstream services (e.g. neighbourhood centres) shifting towards having a broader client base. A number of sponsors also noted that since becoming a WDO sponsor, they have been getting more ‘eligible’ clients – eg those on low incomes, with SDR fines, and referrals from Legal Aid and Corrective Services

One in eight sponsors (12%) indicated that there have been aspects of the WDO scheme or practices of sponsor organisations that have raised concerns for them. Concerns were more commonly raised by government sponsors (17%) than others (11%), and were in line with the comments noted above at the end of Section 2.1. Where negative organisational impact was identified in the survey, this mainly related to administrative burden.

“We see people become more involved in the community because of the scheme and we have volunteers who have continued on volunteering with us after they have completed the WDO.” (Sponsor)

“I have wondered whether the WDO changed their motivation for treatment but all of them continued treatment and made big improvements after they had finished their WDO, so actually it helped them stay in treatment.” (Sponsor)

“Since we have started running the WDO Scheme it has benefited us by gaining new volunteers and helping out our existing volunteers and it gives them a reason to get up in the morning to come in and do a days work to pay off their fines.” (Sponsor)

Case study - Greg

Greg is 37 and is married with two children and another on the way. He works part time at a neighbourhood centre in a regional town, doing a range of jobs often involving driving an organisational car. Greg admits that he gets ‘one or two fines a year’, usually for traffic infringements. At the moment he has about \$750 in fines owed to SDR. The last fine resulted in loss of his driver’s license.

He was on a payment plan, but found he didn’t have enough money to pay the required amount regularly.

“I made deals with [SDR], when I originally set it up to pay it off, that I couldn’t keep. But what choice did I have?”

He knew about the WDO scheme as his employer is a WDO sponsor (doing life skills courses and voluntary work). He thought he wouldn’t be eligible under the financial hardship criterion, but when he enquired he found that under his current work arrangements, he was eligible. So far under the WDO he has undertaken an anger management program and is about to start a new men’s program.

“To be honest, the main motivation is financial - to pay off the fines. Like I don’t have \$50 extra a fortnight to be playing around with – we just don’t have that money floating around. I’ve got a family and we’re on a tight budget. If it wasn’t for doing this, then I still would have had the fines and I wouldn’t be able to get my license back and I wouldn’t be able to work”.

Greg thinks the scheme plays an important role in helping participants to see the goal of being debt-free as achievable:

“Once you get to a certain stage, people give up. It’s too big, it’s too much, what can you do? Stuff it. Don’t deal with it.”

“That’s one chunk of money now that I don’t have to worry about. So it’s one bill off the table, off the next bill. It’s freedom.”

However Greg felt the threshold for establishing financial hardship was too low – in fact he suggested the rate was below the poverty line - and it could act as a disincentive for someone to look for work:

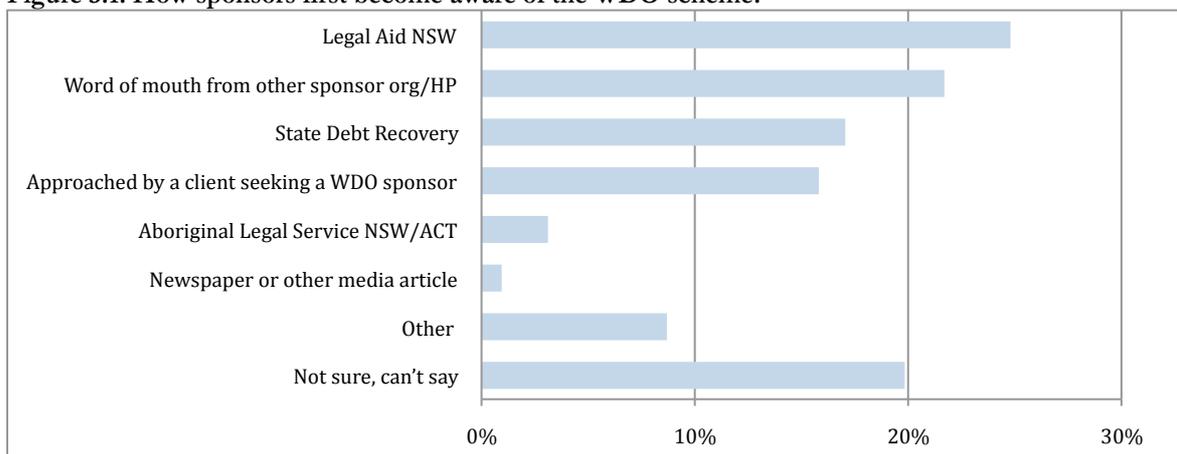
“I was able to do it because I don’t earn a lot of money, but what happens if I start to get a job full time, then that takes this away, and then you’re back under the same stress. I think the mark needs to go much higher to represent the average person. I’m not a bad person, but I still get fines. And there’s a lot of people in the same boat as me who get fines. And we are working.”

3 FINDINGS RELATING TO SCHEME ADMINISTRATION

3.1 Joining the scheme

Word about the scheme has spread via a number of channels, with no single information source dominating the communication landscape (Figure 3.1).

Figure 3.1: How sponsors first become aware of the WDO scheme?

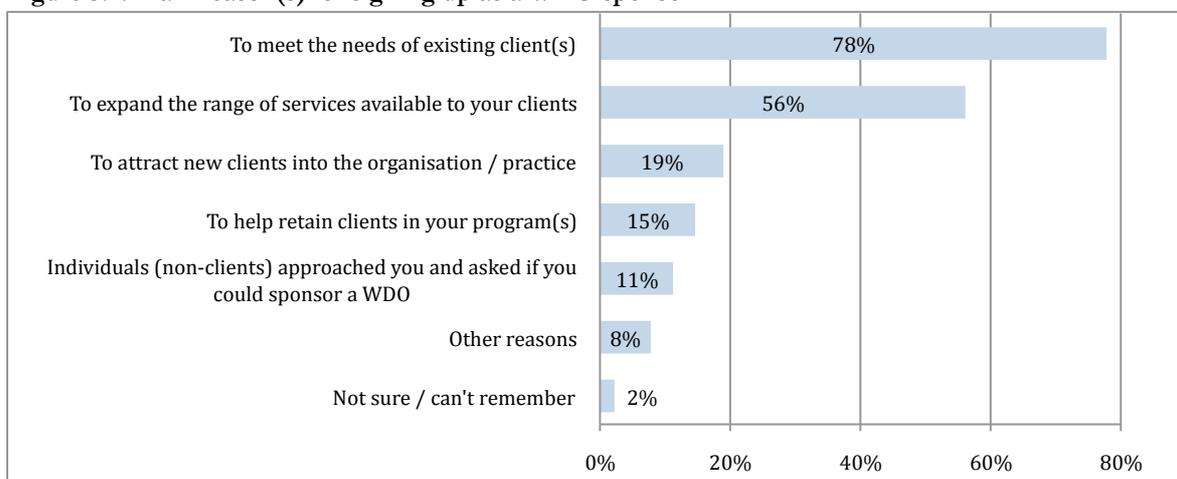


N=323. Multiple responses allowed, with the exception of 'Not sure, can't say'.

Centralised promotion (e.g. by Legal Aid or SDR) has been less of a feature for health practitioners than other sponsors. Instead, health practitioners were much more likely than others to have discovered the scheme through direct request from a client seeking a WDO sponsor (46%, compared with 10% for NGOs and 5% for government sponsors) or word of mouth from other sponsors (31%, compared with 18%-20% for NGOs and government).

Sponsors mostly reported signing up in order to meet the needs of their existing clients (78%) and expand the range of services available to them (56%). It was less common for sponsors to report joining to attract new clients (19%) or respond to direct requests for sponsorship from non-clients (15%) (Figure 3.2).

Figure 3.2: Main reason(s) for signing up as a WDO sponsor



N=323. Multiple responses allowed, with the exception of 'Not sure, can't say'.

Many of the organisations that provide voluntary work opportunities through WDO are clearly in a different situation, as their regular clientele may be quite separate from the WDO clients. Many of these organisations rely on programs such as WDO, Work for the Dole and Community Service Orders to help supply a voluntary workforce.

“We are an Indigenous arts & cultural centre, many of our members have outstanding fines so it helped them clear them and gave a point to their volunteering at the centre”. (Sponsor)

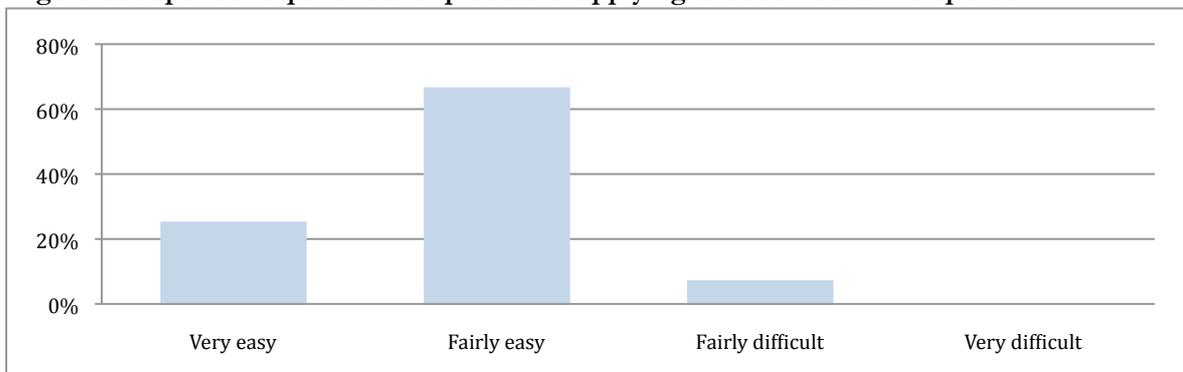
The process of applying to become a WDO sponsor is seen as being quite straightforward (Figure 3.3), particularly in the eyes of government sponsors (34% *very easy*, compared with 22%-25% for other sponsors). In our qualitative consultations, most sponsors said that the application process was about as simple as you could ask for, given the nature of the scheme. The few improvements that were suggested were:

“We need 10-12 people a day to run our three trucks and keep going, so WDO is one of the ways we get volunteers”. (Sponsor)

- ensuring the language is clear in the online registration form (e.g. being clear whether the information required pertains to the client or the sponsor)
- including ‘if relevant’, acknowledging that some questions may not be relevant to all sponsors
- indicate the timeframe for the processing of sponsor applications.

“To assist offenders to clear debts so they can be released with ability to have a clean slate and regain licences etc.” (Sponsor)

Figure 3.3: Sponsor experiences of process of applying to become a WDO sponsor



N=266 sponsors (from a total of 323) who could recall the application process.

3.2 Applying for WDOs

A total of 300 sponsors in the survey reported having submitted at least one WDO application on behalf of a client (Figure 3.4).

- The most common situation was for WDO applicants to be existing clients of the organisation (81%). Most sponsors in this situation (nine out of ten) said they made WDOs available for any client who might be eligible. Only one in ten said they offered the scheme only to a sub-group of clients; this decision tended to relate to the sponsor’s perception of how in need the client was (eg financially, or in relation to mental health or drug and alcohol addiction) and/or how serious and motivated they were to change. It was also clear from the research that sponsors sometimes play the role of ‘gatekeeper’ in

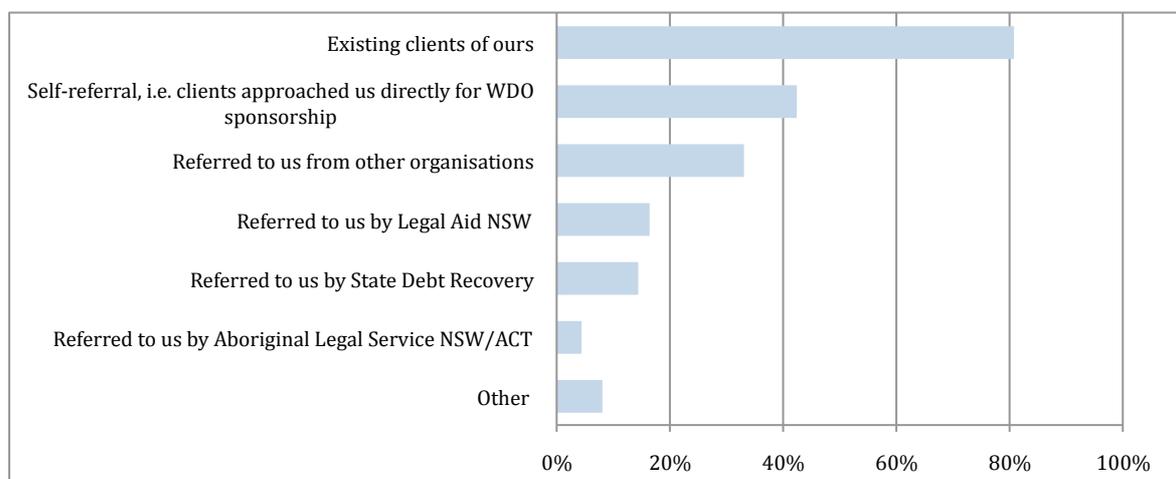
identifying where clients may be trying to ‘game’ the system. In both the survey and the qualitative interviews, a few sponsors said they will generally extend the opportunity to an individual a limited number of times before they decline to sponsor them for a further WDO, or otherwise politely tell the person they do not have capacity.

“I suspect some have tried to ‘game’ WDO, along with their gaming of the offer of substance misuse treatment. They don’t last on my sponsorship.” (Sponsor)

- Around two in five sponsors (42%) reported self-referrals, where people had approached them directly for a WDO. This experience was more commonly reported by NGO sponsors (51%) than others (30%). These sponsors mostly attributed these self-referrals to word of mouth from other clients (70%); fewer than half of these sponsors said they were listed on the SDR website (43%), or advertised WDO sponsorship as a service they provide (43%).
- Referral from other organisations was reasonably common, although less so from Legal Aid (16%), SDR (14%) or ALS (4%) than other organisations (33%). Referrals were more commonly reported by NGO sponsors than others.

“I’ve had interest from people who want to do it to get their fines paid but don’t want to be involved in the service wholeheartedly. I have only been offering it to people who are already making effective changes whose fines are a barrier to recovery.” (Sponsor)

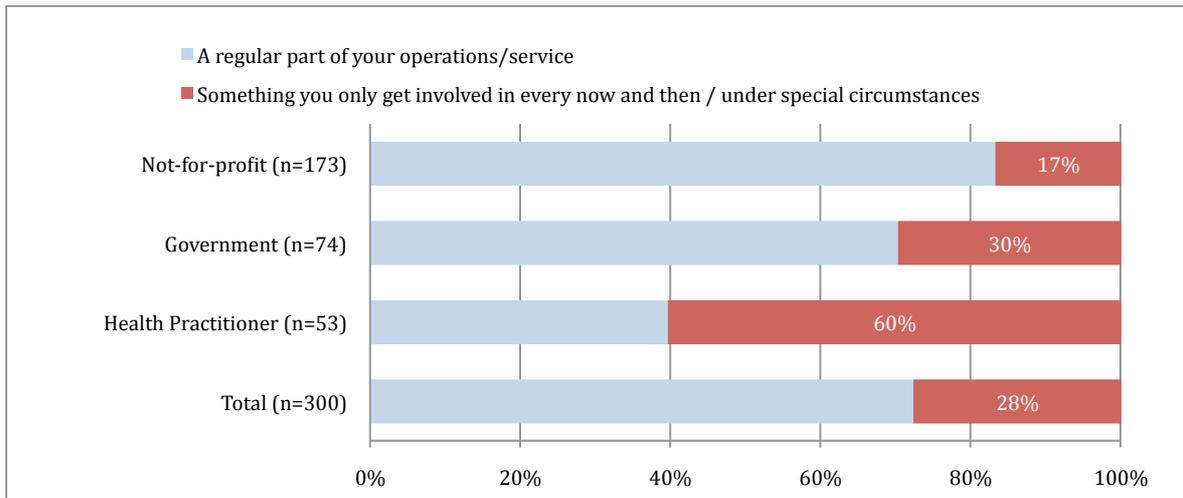
Figure 3.4: Where have your WDO applicants come from?



N=300 sponsors who have submitted one or more WDO applications on behalf of a client.

Three in four sponsors (72%) said that the WDO scheme is a regular part of their operations or service. This leaves 28% who only get involved in WDOs ‘every now and then’ or under special circumstances. There was significant variation between sponsor-types in this regard, health practitioners (60%) being more discriminating than government (30%) and NGO sponsors (17%) (Figure 3.5).

Figure 3.5: For your organisation/practice, would you say the WDO Scheme is...



In the qualitative research, many sponsors had integrated asking about SDR debt into their regular intake processes. Many had adapted their intake forms/questionnaires to include a question about SDR debt, and some had gone further to include a WDO field or tab in their client management systems.

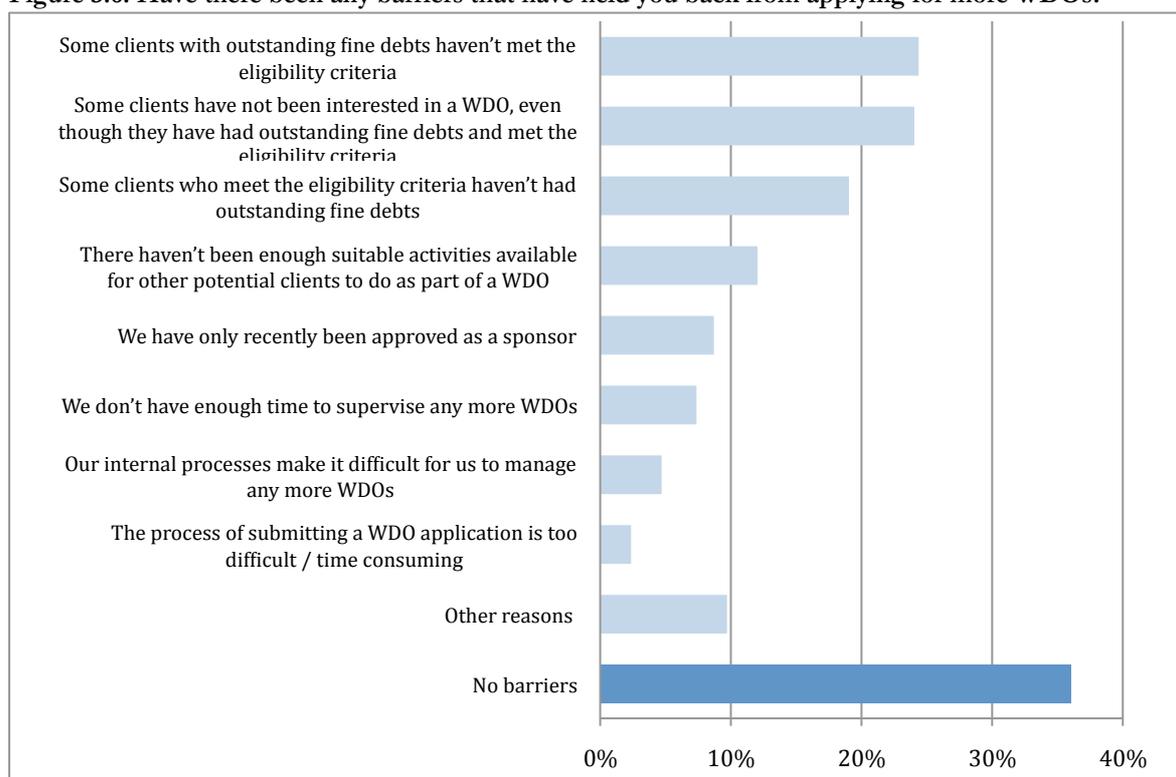
Among the ‘active’ sponsors who had submitted a WDO application, two in three (63%) identified one or more barriers that have held them back from applying for more WDOs. As shown in the Figure 3.6:

- Two of the main factors relate to client suitability for the program: clients with fines not meeting the eligibility criteria (24%) or suitable clients not having fine debts (19%).
- One in four said they had clients who had declined the suggestion of a WDO even though they have debts and meet the criteria (24%).

The barrier of not having enough time to supervise WDOs (7%) was more of an issue for NGOs (11%) than others (3%). It also depends on extent to which activity undertaken as part of a WDO is core business to the organisation, and backed up by established record keeping and client management systems; as opposed to activity that is ‘bolted on’ to their usual activity.

One in eight sponsors (12%) said they might have been able to apply for more WDOs if there were more suitable WDO activities for clients. When specifically asked about this issue in a follow up question, two in five (41%) said that there are WDO-related activities that would benefit their clients but are unavailable (or very hard to come by) in their area. This included a reasonably even spread of the six activity categories. One specific example from the qualitative fieldwork was capacity constraint for volunteering in one particular regional centre, particularly in the bigger NGOs that also supervise work-for-the-dole placements.

Figure 3.6: Have there been any barriers that have held you back from applying for more WDOs?



N=300 sponsors who have submitted one or more WDO applications on behalf of a client.

Hardly any sponsors (2%) identified the WDO application process as a barrier to growth. Indeed the application process was seen as a simple affair, particularly once they had 'got the hang of it' after the first few times. The fact that they have to call the Hotline every time also means that any queries or uncertainties with the application can be resolved on the spot. New sponsors particularly appreciate this, as it helps them relax in the knowledge that they are doing things properly.

A few sponsors did identify some issues that limited the number of WDOs they sponsor. The main issue was organisational and staff capacity, particularly for NGOs. It should be noted that sometimes the barrier could reflect a limited understanding of the scheme's scope, as the case study below illustrates.

Case study: Limited understanding of the scheme limits the number of WDOs

This youth homelessness service provides crisis accommodation and case management to young people. They are contracted by FACS to provide crisis housing and case management to around 450 young people annually. Currently all WDOs are managed by the service's one registered counsellor, as the staff are of the understanding that one-to-one counselling is the only activity they are permitted to do under the scheme. The counsellor has a maximum caseload at any one time of 15, which means that they know there are a number of clients who are missing out. The staff were unaware that clients could be referred outside the service as part of their WDO.

Correctional facilities have particular issues around managing demand with existing resources, while at the same time ensuring fairness and transparency among the inmates, as the case study below illustrates.

Case study: Managing demand for WDOs in a correctional facility

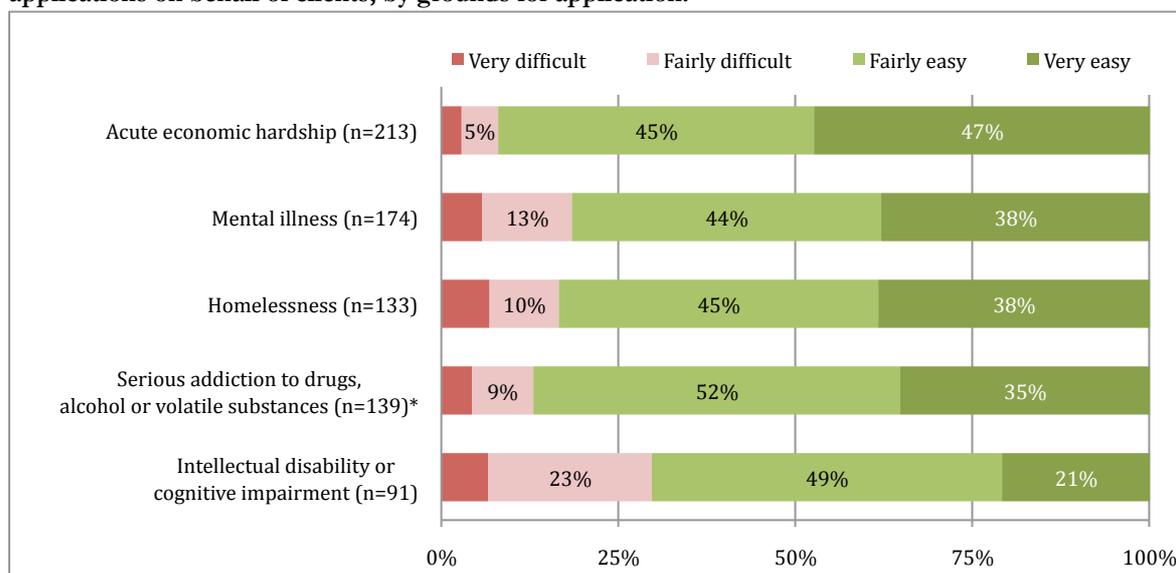
In one correctional facility, WDOs are offered to inmates in conjunction with two voluntary programs, one relating to drug and alcohol use (Smart Recovery) and the other an education program. The administrators of this facility have set tight restrictions on eligibility for the scheme, both to ensure consistency and transparency for inmates and also to manage volume:

- Smart Recovery can only count as an eligible activity for a WDO if the inmate has a pre-existing addiction that led them to custody. This course runs for 40hrs in total, with debt reduced at \$50 an hour.
- The education program runs for 20 weeks (5 days a week, 4 hours a day), with a focus on literacy, numeracy and life skills. Inmates can only apply for a WDO with this program if they have a pre-existing addiction, cognitive impairment or mental illness (as determined by the LSI-R¹ tool). WDOs are not offered to inmates undertaking part-time education or distance education.

The scheme is not available for all voluntary courses that run in the facility, e.g. anger management. Staff members reported that offering WDOs with this course would require evidence of mental illness prior as a trigger for the offence that led to their conviction. This is not actually true and leads us to assume that the staff in charge of making applications don't understand the eligibility criteria.

Applying on the basis of acute economic hardship tends to be seen as being simpler than the other grounds for eligibility, and was also more common among our sample of sponsors. Intellectual disability or cognitive impairment is seen as the hardest of the five grounds to apply under (28% *very difficult* or *fairly difficult*), followed by addiction (Figure 3.7).

Figure 3.7: Perceived ease of assembling the proof of eligibility documents and submitting WDO applications on behalf of clients, by grounds for application.



* At the time of this survey, addiction could only be applied for by NGO and Government sponsors.

The qualitative consultations found that sponsors tend to apply under the criteria with which they are most familiar, and those that reflect the core work they do (e.g. a counseling service tends to apply on the ground of mental health; a material aid NGO on the grounds of financial hardship, a crisis housing service on the grounds of homelessness). Sometimes this is because they have identified relevant criterion, but often it is because this criterion is the easiest (of several that could apply) for which to obtain evidence, or simply because the sponsor is in the habit of doing it this way.

This comes through in the survey as well, where (for example):

- health practitioners reported much less difficulty assembling proof of mental illness (63% *very easy*) than NGOs (21%) or government services (36%); and
- health practitioners also had less difficulty with proof of intellectual disability (42% *very easy*) compared with NGOs (16%) or government services (21%); but
- health practitioners had more difficulty with proof of homelessness (45% *fairly difficult* or *very difficult*) than NGOs (12%) or government sponsors (17%).

One implication of this is that analysis of SDR data about grounds for eligibility cannot be taken as a proxy for why the applicant has fines, why those fines are overdue or what they will necessarily be doing as part of their WDO.

There are circumstances, however, where establishing eligibility for *acute economic hardship* may be difficult. Young people who have run away from home, people who are transient, women fleeing domestic violence, young adults living at home but not financially dependent on their parents, people with unstable casual incomes, and people living in share housing (as eligibility is determined on *household* income, not individual income) are just a few of the types of potential WDO applicants who might be excluded. The application process does accommodate ‘exceptional circumstances’, however it was clear from the survey and qualitative consultations that this is not always understood by sponsors.

A further issue regarding the acute economic hardship criterion is that the threshold income levels seem to be set quite low – in most cases significantly lower than the poverty line. This may reflect the levels that were set when the guidelines were written. It was suggested that the income thresholds should be pegged to the poverty line, and adjusted each quarter along with the poverty line levels.

One final issue raised in the consultations related to whether *gambling addiction* could be considered alongside *serious drug and alcohol addiction*.

3.3 Delivery and referral of WDO activities

Determining WDO activities

In our qualitative consultations, we typically saw sponsors directly providing activities that are core business for them, referring out to third party organisations for non-core activities. Some sponsors described a case-managed approach and tailored a program of activities that could include things like meetings with a case manager, counseling, participation in anger management or parenting programs, attendance at TAFE or another educational institution and financial counselling. Some sponsors have approached case management of WDO activities quite creatively, planning the activities that are identified in a thorough assessment (see case study overleaf).

Other sponsors focused on just the service they provided directly. This kept the scheme quite simple for them, as they had no need to establish a process for verification of hours undertaken off-site.

Some sponsors argued that what constituted a suitable WDO activity depends on the needs and circumstances of individual clients. For example, one domestic violence service wanted to include ‘soft-entry’ courses like yoga and book club for a highly vulnerable woman who was not ready to engage in something like a domestic violence survivors group. An Aboriginal NGO running life skills courses engaged three of its WDO clients to help with developing a new course focusing on the multiple and varied needs of young women with drug and alcohol issues; they wondered if the eight or so hours they spent developing the program could be counted as ‘voluntary work’ in their WDO.

Case study – Effective planning of WDO activities (1)

This employment service joined as a sponsor because the scheme fit neatly with their focus of helping clients address their barriers to getting into work. One of the major barriers for their clients (in a regional area) is not having a driver’s license. The other main reason people want to take on a WDO is when they want to clear their past – start with a fresh slate. This employment service talks about this in terms of ‘barrier servicing’.

For all new clients, the service runs through an ‘assessment pack’ which helps identify barriers to employment. There are two main trigger points in the list of questions where state debt comes up: transport issues and legal issues. The field officer we interviewed said they wait until the second appointment before mentioning the possibility of a WDO, to ensure they have rapport with the client and that the client really is keen to work:

“I want to be sure that a WDO will actually benefit them – help them move forward – and that they will appreciate it. I have to take responsibility for whose fines we clear out. I got burned once, cleared a guy’s fines for him and then he came back with \$6,000 worth of fines six weeks later. If someone’s not serious about wanting to address their barriers to work, they’re wasting my time and I’m not doing them any favours either.”

Eligibility is simple to establish under financial hardship, as this service’s clients are all referred to them by Centrelink. The activities the client undertakes as part of the WDO generally fall into three categories, depending on need:

- mental health and mentoring support from a local third party provider
- participation in an employability skills short course (20 hours over four days)
- volunteering at local Op Shops or the youth centre (Police checks and Working With Children checks are required for volunteer work at the youth centre)

The field officer typically goes back to the same third party providers (for mental health, mentoring and voluntary work) as they are ‘on board’ with the scheme and supply high quality paperwork that makes her task of reporting easy. The third party volunteering organisations are all Work for the Dole providers as well, so have good systems in place for recording time sheets and reporting activity.

Generally, sponsors are highly aware of the ‘social contract’ that characterises the WDO scheme and do not wish to dilute the scheme, but some wonder if activities could be deemed on their merits for particular individuals.

While significant numbers of sponsors provide opportunities for WDO clients to participate in unpaid work, medical or mental health treatment, drug and alcohol treatment, educational/vocational/life skills programs and financial or other counselling, few sponsors offer mentoring programs for people under 25 years of age (just 24 in the survey and none of those interviewed for the qualitative research). Mentors tended to be either paid workers at a youth or other service, volunteers, or Aboriginal cultural mentors from the local community. They tended to focus on life skills and employment with their young mentees.

Case study – Effective planning of WDO activities (2)

A neighbourhood centre advertises the WDO scheme on their website and leaflets, in newspaper ads, and on the notice board in courts. They report that ‘people who come here have seen the ad or heard from a friend. The worker described their intake process in the following terms

“I offer different types of services, ask them what they want to pursue. I always keep in mind what might be beneficial for them. I have had two people go eternally to D&A counselling. I have had another person go to a Better Reading program. Another did voluntary work at the tip shop – close to home. Otherwise our own services are counselling (various – financial, family) and voluntary work in community garden. Two people admitted they hadn’t seen a GP in years – so we included that for them. Others have done training – one person was enrolled in TAFE and brought proof of her work to count for hours.”

“I don’t do full assessment – just a rapid assessment to determine what’s the best use of the WDO. I use the questions they tick at the top of the second page, grounds for application. I ask them to select all that apply, then go from there. I try to focus the WDO on that, if they are responsive. If not, go to training – what do you want to do for work etc – see if there’s any courses to do etc. Then volunteer work. They know that this is all for their good, so they are very responsive at the initial interview.”

Case study – Differential use of the WDO scheme in one organisation

One large NGO uses the scheme in three different ways, out of the one office:

- They run a learner driver program for young Aboriginal people who have been caught driving unlicensed. If participants in this program have unresolved fine debt with SDR, they are offered a WDO on an hourly rate basis (\$50 per hour.)
- They run an intensive program for young parents at risk of losing custody of their child(ren), which includes three sessions a week of case management. Participants are offered WDOs at \$1000 a month for full compliance with program (including attendance at meetings, following through on commitments/behavioural goals etc).
- The NGO also has a relationship with an Aboriginal arts organisation that runs a gallery space. This Aboriginal organisation provides volunteering opportunities for a number of local Aboriginal men, but did not want to sign up as a WDO sponsor due to a perception of administrative burden. Instead, the mainstream NGO signs up the men as volunteers and then ‘places’ them with the Aboriginal organisation, which then reports back hours on a monthly basis by email. There is a service-level agreement between the two organisations, and works well for the Aboriginal organisation: “[Mainstream NGO] is an administrative machine, and we’re really small. Government is using NGOs to do service delivery without paying for admin. So as long as [mainstream NGO] is willing to do the yards on the admin, that’s fine by us.” The WDO scheme has supported their community development approach, giving them ‘something to offer’ that is valued by community members and community organisations and lifts their profile and credibility in that space.

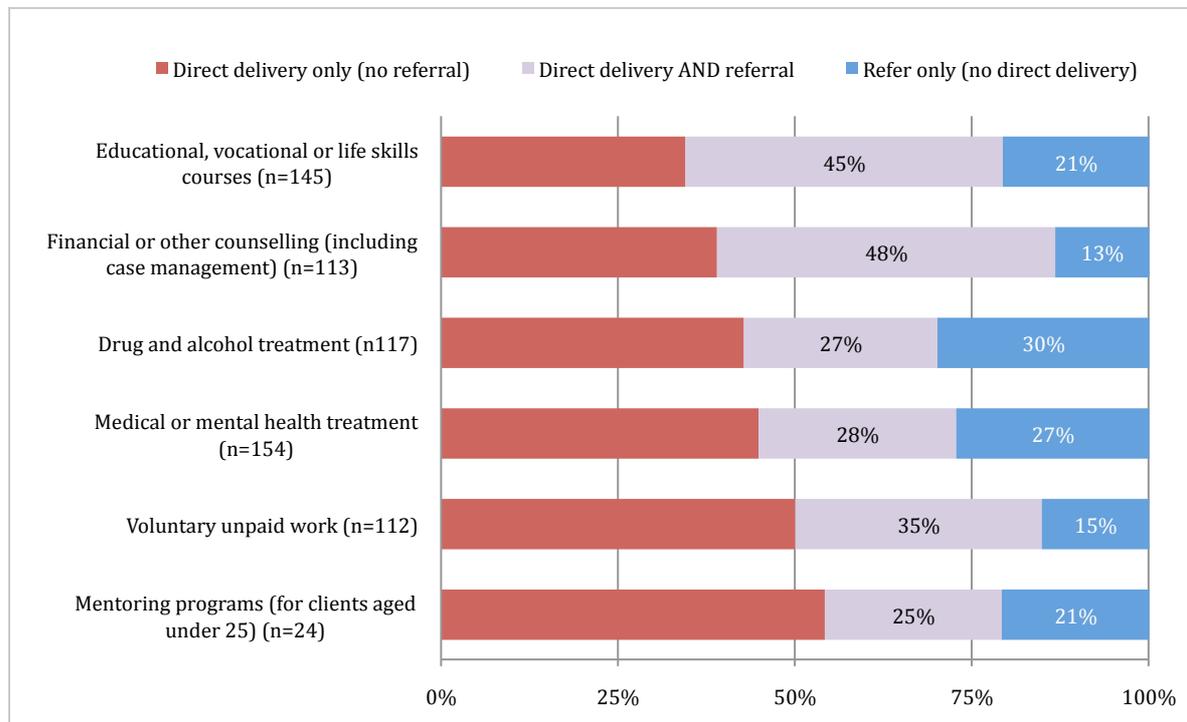
Referral to third parties

The survey found that third party referral is common among government and NGO sponsors, but prevalence depends very much on the nature of the activity involved (Figure 3.8). For example:

- mentoring and volunteer work was the least likely to involve a third party referral, with over half of sponsors reporting direct delivery only;
- health treatment (including for medical health, mental health and addictions) was the most likely to involve a referral, with one-third of sponsors active in this category doing no direct delivery at all; and
- counselling and courses were the most mixed, with almost half of sponsors reporting a combination of direct delivery and referral.

Digging deeper (where sample size allows), we see that the *type of sponsor organisation* is also a factor in referral patterns. Perhaps not surprisingly, NGO sponsors are much more active referrers than government sponsors for drug and alcohol, medical health and mental health treatment (see Figures 3.9 a and b). NGOs were also more prolific referrers than government for educational, vocational and life skills courses (Figure 3.9c). Furthermore, at least one or two sponsors in each fieldwork location were unaware that the scheme enables sponsors to refer to third party organisations for other activities.

Figure 3.8: Who provides WDO activities to clients?



Sample only includes government and NGO sponsors.

Among health practitioners, third party referral for medical or mental health treatment was rare: only 21% (11 of 53) reported any referral activity to other treatment services being included as part of a WDO.

Figure 3.9a: Referral patterns for drug and alcohol treatment

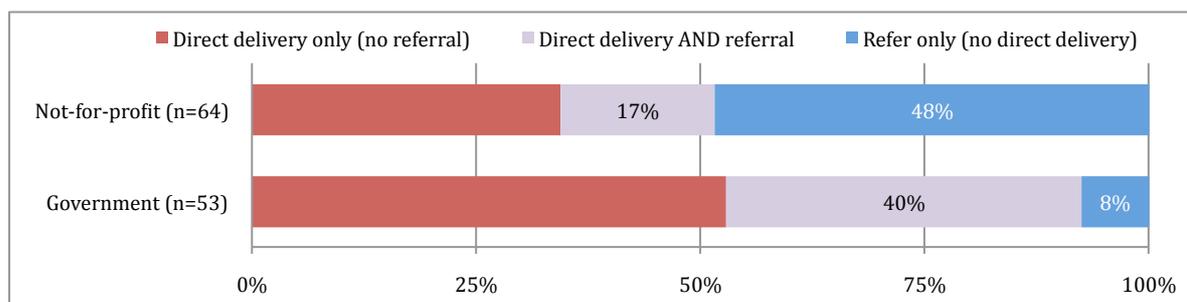


Figure 3.9b: Referral patterns for medical and mental health treatment

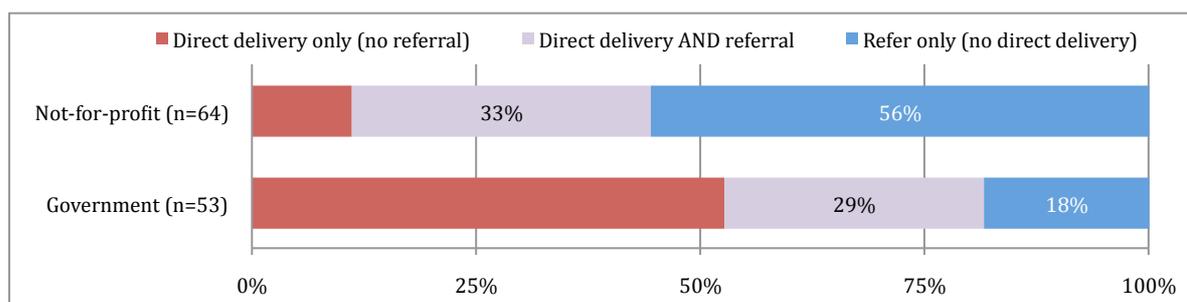
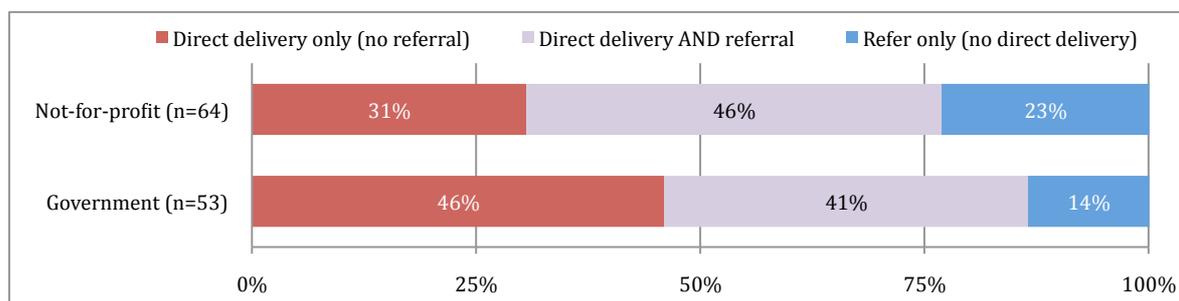


Figure 3.9c: Referral patterns for educational, vocational or life skills courses



The nature of the relationship a sponsor had with a third party tended to be important in their decision to refer a WDO client. Many sponsors said they tend to only refer to third parties they know and can trust to deal with their client and report accurately, honestly and reliably on their compliance.

The survey found little consistency in the checking of insurances and qualifications prior to making a referral. Among those who solely referred to third parties (for any activity; n=92), 42% said they always checked insurances and qualifications, 11% sometimes and 47% never. The main reason for not (always) checking was the third party being a reputable operator, already well known in the community and/or to the sponsor.

A few sponsors gave examples of third party relationships that had not gone well, where the third party did not reliably report attendance, and had sometimes resulted in clients not having time recorded against their WDO on time, or at all.

The process for third party reporting varies. At one end of the spectrum, some sponsors (usually government agencies such as Corrections or Juvenile Justice) have developed protocols which require formalised reporting entered into a case management system and verbal/written reports on the client's progress. Some sponsors accompany WDO clients to some of their appointments and can therefore confirm attendance themselves. At the other end, some sponsors simply ask third parties to confirm compliance via email or phone that the client attended their appointments. Somewhere in the middle, some sponsors have developed timesheet templates that WDO clients and third party organisations complete – these are then returned to the sponsor, in some instances by the client and in other instances emailed/faxed by the third party.

3.4 Cut out rates

Nearly all sponsors interviewed for the evaluation took the cut-out rates in the scheme guidelines at face value and applied them consistently. The only area in which a few health provider sponsors used their discretion was in applying hourly rates (eg \$50 per hour for case management) vs compliance model rates (eg \$1,000 per month for treatment). No one said they varied the cut-out rate to achieve certain outcomes; indeed, many were not aware they could do this. Some health (particularly drug and alcohol) providers thought it could potentially be useful to do so with some clients, in order to keep them in treatment longer, although said they would be reluctant to vary the cut-out rates from those that are published.

Case study: Hourly vs compliance model cut-out rates

A government mental health service in regional NSW uses an hourly rate, rather than the compliance model that would see the debt reduced at \$1,000 a month.

I'm working with one young man who has gone from \$1,400 to \$300. I could have worked the system and got rid of his debt within two months. You can 'exploit' the system, for want of a better word. But because I wanted to engage him, I spread it out.

Wiping out \$3,000 in three months just seems too fast. If I do that I've lost my engagement tool... One of the hardest things about [our clients] is that they want to isolate themselves. They're schizophrenic, depressive – they don't want to meet with us, or take a tablet. So for us, the WDO is a very useful tool for keeping appointments and opening doors.

I also don't want them to think it's that simple – otherwise why would they buy a train ticket? I realise that's my moral judgement – but there has to be an element of work here. That's the W of WDO, right?

On reflection, however, this worker acknowledged that the \$1,000 a month compliance model would be suitable if a person had a very large debt, such that reduction by \$50 an hour did not provide a meaningful incentive for cooperation. Even still, however, this worker said she would structure that \$1,000 out for them:

I like people to have goals, to break down their activities into tasks. So if someone had a big debt and I was going the \$1,000 a month model I would split it out for them: hygiene, meds, sunshine, counselling and so on – make it all add up to \$1000, and reward progress along the way.

Case study: Why a sponsor won't vary cut out rates

One large NGO runs an intensive parenting program and participants can write off \$1,000 a month for full compliance. The facility for registering a write-off of less than \$1,000 a month in the WDO scheme is not used, as the concept of 'partial compliance' is not relevant in the parenting program itself. The participants in this program are reportedly often reluctant to be involved with the service or the program. The WDO gives the case managers a "significant carrot" to get these young parents "over the starting line", giving them time to build engagement.

3.5 Activity reporting

Sponsors in the qualitative consultations were almost unanimous in saying that the regular reporting requirements for WDOs are rarely problematic. Most said it took them no more than five minutes per client to report each month, as long as they had received the reports from third parties and staff had maintained records in their own client record system.

A number of organisations had modified their client record/case management systems to include a WDO tab/page/field, which had made WDO reporting even simpler.

The regular reminder emails were greatly appreciated. A couple of sponsors suggested reporting at the beginning of the month, rather in the middle of the month, would suit them better because other reports and interagency meetings also tended to occur in the middle of the month. However others liked the ‘middle of the month’ setup as this avoided other reporting deadlines at month-end. Either way, it was commented that SDR was flexible enough to allow sponsors to delay reporting when needed, so timing is not a big issue.

3.6 Information resources and ongoing support

Almost all sponsors (99%) reported using at least one of the information and support resources that exist as part of the WDO Scheme, particularly the SDR WDO Hotline (91%) and WDO Guidelines (81%), followed by the SDR website (63%) and factsheets, brochures, posters and FAQs about the scheme (56%).

The survey found that the WDO Hotline was far and away the main information and support resource that sponsors had found ‘most helpful’. This was confirmed time and time again in the qualitative research: every sponsor consulted commented very positively on their experience with the Hotline.

The web, email and phone information services provided by SDR were much more widely used than those provided by other parties (Department of Justice, Legal Aid NSW and Aboriginal Legal Service NSW/ACT).

Compared with government and NGO sponsors, health practitioners were lighter users of many of these information resources, including factsheets, guidelines and training opportunities.

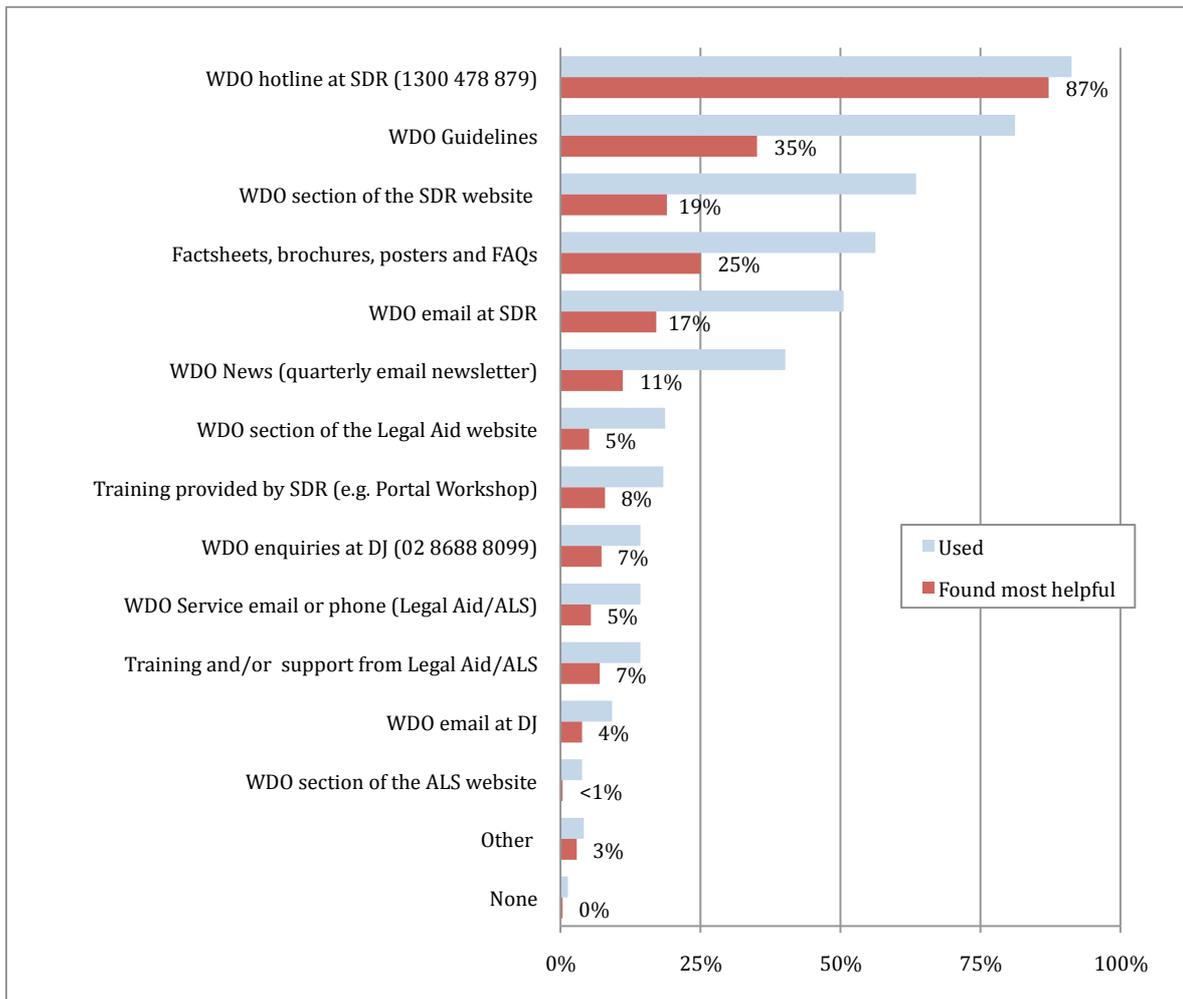
“The team are absolutely fantastic. When they get on the phone they’re down to earth, they’re real people”. (Sponsor)

“In 40 years of working in health, I haven’t come across another group of people for whom nothing is a problem.” (Sponsor)

“They follow through with what they say they’ll do – and that’s rare.” (Sponsor)

“The Hotline staff are awesome. There’s nothing they haven’t been able to sort out for me” (Sponsor)

Figure 3.10: Information resources and supports sponsors have used (F1) and found most helpful (F2).



All sponsors (n=317). Multiple responses allowed.

When asked to identify supports or resources that could assist program delivery, over one in five (22%) said they did not need any more support. Otherwise:

- half (55%) were interested in WDO-specific education and promotional materials for clients;
- more than one in four expressed interest in networking with other sponsors (28%).
- there was also some interest in additional training (26%), additional guidelines and resources for sponsors (17%) or regional support services to provide information and assistance (18%).

In the interviews with sponsors, we found that training was the main additional need – not so much the ‘101’ of how the scheme works fundamentally, but more about how the scheme could be ‘taken to the next level’ in their circumstances. Many sponsors interviewed had not done any formal training, but had ‘picked up’ their knowledge from the guidelines and assistance from Hotline staff. While the individualised help from Hotline staff is highly valued and seen as critical to the operation of the WDO scheme from the sponsors’ point of view, some form of specific training was identified as a way of enhancing sponsors’ confidence and competence in administering the scheme.

A number of sponsors also felt that a better knowledge of who the other sponsors were in their area, and networking opportunities with them, would be helpful. This would be useful to both those sponsors (particularly NGOs) who might have ‘overflow’ WDO clients they are unable to sponsor, as well as those whose flow of WDO clients has been slow. Some sponsors have also been more effective in networking and developing partnerships with other NGOs and services, both WDO sponsors and not, which has also assisted with third party referrals and management of third party relationships.

Case study: How local networking could help sponsors

This sponsor is an NGO providing a day club and excursions for people with mild to moderate intellectual disabilities. They finance the service through a recycling operation. They have three trucks that collect goods people throw out, then bring the goods back to the centre to be sorted and then put into the second hand goods ‘shop front’ which is open to the public. Apart from the manager, the service runs entirely on the work of volunteers, who are sourced from CSO, Work for the Dole (WfD) and the WDO scheme, as well as ‘volunteer’ volunteers from the local community. Approximately 10-12 volunteer workers are required each day to keep the program running.

The organization joined the WDO scheme as a sponsor about a year ago. In that time they have had just eight WDO referrals, all from Legal Aid. Due to the organization’s high level of need for volunteers, they had hoped for more referrals. The manager was not aware of any other sponsors in the area and did not know where they might obtain more referrals. She thought it would be very useful to know who else in the area was a WDO sponsor, as well as how they might be able to increase referrals from Legal Aid as well as other sources.

Case study: How local partnerships make a difference

This organization is an arm of a large NGO in a regional area and provides financial and gambling counselling to clients across the region. The WDO scheme fits seamlessly into their work, as SDR debt is one part of a client’s overall financial predicament. At their first meeting with a new client they specifically ask about SDR debt and suggest that the scheme could help them if they are eligible. The WDO scheme is helpful in engaging clients, particularly so with mandated clients who may not be initially motivated to do something about their debts. *“It can also keep some clients engaged for longer”* (Counsellor).

The organization has successfully developed a number of partnerships with NGOs in the region which has helped to identify eligible clients who might benefit from the WDO scheme. They do weekly presentations at an organization that services people with sub-acute mental health conditions and a number of clients have been referred this way. They also have partnerships with some other NGOs such as Barnardos and Interrelate, who refer clients for both financial counselling and WDOs. Through the partnership, they are also able to refer WDO clients to these organizations as third party service providers for counselling or life skills programs.

“Sometimes it’s their WDO, sometimes it’s ours... Our primary activity is financial counselling, and then we look at what other things they can do. It’s about creating partnerships and then using WDO as a tool”.

3.7 Other issues raised in the research

Transfer of WDOs

One issue raised in the context of correctional services is around the inability to transfer a WDO to a new sponsor when an inmate moves to another gaol or is released (on parole or not). The issue was explained by a couple of CSNSW sponsors:

“The inmates get a positive experience with us opening a WDO but they say to me that they are concerned that when they get transferred to another gaol the staff might not open a WDO there for them. CSNSW needs to make it part of our jobs to open WDOs for inmates who are engaged in programs or services. At the moment it is still viewed as being a voluntary thing i.e. the dedicated staff do it but others don't feel that it's part of their job and it at times can lead to bullying of the staff who do open WDOs. Inmates need certainty that they can ask anyone for assistance with a WDO and get one open if they meet the criteria.”

“[This] Correctional Complex houses several gaols and when the sponsor moves to a new location still on the complex he/she needs to change her administrator. This has proven to be not an easy task. Perhaps the administration of large complexes where staff often move around can be re-examined to find a more streamlined approach.”

Limitations on who can be a sponsor

The issue of health practitioners other than doctors being unable to sign up as sponsors was raised. It was pointed out that a number of drug and alcohol teams are staffed by nurses and nurse practitioners:

“Our Local health district does not allow Drug Health clinicians other than doctors to become WDO sponsors; nor does it allow Drug Health teams to become organisational sponsors.”

What counts as volunteering?

A few NGO sponsors were unclear about what duties could fall under ‘volunteering’, and clearly a few believed the examples given in the guidelines (gardening, cooking, property maintenance, cleaning and assistance with administrative duties) were the definitive list of duties that were permissible.

3.8 Sponsors’ suggestions for improving the scheme

Suggestions from sponsors for improving the scheme tended to be isolated, as most were happy with the way it operated presently. That said, the following list sets out the main ideas that were tabled in the survey and our qualitative consultations:

- Provision of forms/ templates for sponsors to use, e.g. timesheets, intake form asking about debt (suggested by someone from a Local Health District who said any new forms they produced had to go to a Forms Committee, whereas ‘outside’ forms did not).
- Adding extra flexibility to the portal, e.g. the ability to report before the 15th of the month, alter date of birth once entered, and enter smaller increments of time than whole hours.
- Reviewing reporting times – e.g. allowing beginning of the month reporting, or real time reporting.
- Reviewing income thresholds for financial hardship applications. One sponsor suggested they were set below the poverty line; another questioned why there were certain government income support payments that constitute automatic eligibility, but others that do not (Austudy, Abstudy).
- Allowing sponsors to re-open closed WDOs within a certain time period, without having to re-establish all the paperwork around eligibility.
- More training and networking opportunities, webinars, regional meetings.
- Updated brochures.
- A forum for sponsors.
- SDR field officers could visit sponsors.
- Writing to clients once the debt is paid off to let them know and make them feel they have achieved something.

4 DISCUSSION AND FUTURE DIRECTIONS

Having presented detailed findings from our consultation with sponsors, clients and third parties in Chapters 2 and 3, this report now turns to a discussion of the key implications for the scheme. This commentary is informed both by the findings themselves as well as collaborative analysis and sense-making exercises undertaken with the WDO governance group in December 2014, the WDO team at Legal Aid NSW and Aboriginal Legal Service NSW/ACT in mid-January 2015 and the WDO team at SDR in early March 2015. Note also that some of the discussion points here highlight the need for further analysis of quantitative program data – a line of work that is outside our scope.

4.1 Promotion and expansion of the scheme

The scheme has grown rapidly since it was formalised in 2011, particularly in the number of health practitioners who have registered as sponsors. Growth of the scheme even further is entirely justified by the positive outcomes of the scheme to date, and should be an important priority for the next few years.

Sponsor recruitment

Sponsor recruitment should be prioritised through identification of gaps in the current sponsor network. Analysis of these gaps should consider geographic and structural aspects of the scheme, as well as unmet need. Within this:

- There is an argument for targeting high capacity organisations that can implement the scheme in multiple locations or parts of their service – examples here include large multi-layered NGOs (including those that only deliver WDOs through a part of their operations, e.g. just in their employment service) as well as government agencies such as Corrective Services (where stakeholders report some inconsistency in the scheme’s application).
- There is also an argument for focusing on ‘gatekeeper’ services or organisations whose participation may open up the scheme into new directions. One example here is the network of volunteer resource centres across NSW, many of which are yet to engage with WDOs but could be a major source of coordination, facilitation and promotion for the scheme at the local regional level.
- There is also plenty of room to think creatively and promote the scheme widely, from local Aboriginal land councils to disability services, hospitals to Universities.

There are also one or two technical issues relating to sponsor recruitment that need to be addressed or streamlined. For instance, is there really a need to do reference checks on registered charities? Is there scope for health practitioners other than doctors to become sponsors? And is there a good reason why health practitioners can only sign up for medical and mental health service provision, and not drug and alcohol counselling?

Sponsor retention

Before jumping straight to recruitment of new sponsors, it would serve the scheme well to address the question of sponsor retention. Based on the data made available to us for sampling

in our survey, only around half of the sponsors who have registered with the scheme (709 of 1,251) have written a new WDO in the last 12 months. Sponsor attrition is an important factor for the governance group to explore further, as the design for this qualitative evaluation was such that we only really heard from sponsors who are actively participating in the scheme. Who are the sponsors that have become dormant or effectively pulled out? Why?

Public communications

The name of the scheme is not particularly catchy or self-explanatory, particularly compared to schemes like ‘Work for the Dole’ or ‘Time To Pay’. There are plenty of sponsors who make mistakes about what the scheme is called (Work Development Orders, Working Development Orders, State Debt Orders) and others in the community who are familiar with the scheme but do not know them as ‘WDOs’. However, changing the name from here would probably create more problems than it would solve. Rather, the challenge from here is to take the WDO ‘brand’ and strengthen it.

Part of this will require a fresh look at how the scheme is promoted online. While it is great to have information about the scheme on the internet, there are too many websites about the scheme without a clear hierarchy between them. Arguably the main resource at present is the SDR site, but there is also detailed information at the Legal Aid website as well as pages at Aboriginal Legal Service and Department of Justice websites, and probably others as well. Sponsors and potential clients may come to the scheme from different directions, so there is no harm having introductory information in various locations, but the ideal would be to have one ‘official’ site that everyone else can point to. This could perhaps be a page like www.wdo.nsw.gov.au, which would work just as well for all parties involved in promoting the scheme, and could be suitably co-branded.

Key features of the website could include:

- Testimonials or stories that demonstrate the value to clients, illustrate the flexibility / adaptability of the scheme do different organisations and allay the anxieties of potential sponsors about the administrative load they might
- Short videos that tell client stories and explain what is involved from their end
- A map-based listing of sponsors that allows potential clients (as well as other services) to search by suburb/postcode and activity type (rather than the current list within region in a large table)
- Ensuring mobile and tablet compatibility
- All resources for sponsors (including access to the Self Service Portal).

Promotion of the scheme to clients

There is a continued need for ready-to-go visual communication materials that sponsors can use to alert their community to the fact that they offer the scheme (e.g. A3 posters, smaller ads that can be put in newsletters or on Facebook). However, because the scheme operates so differently for different sponsors, these communication materials focus only on raising

awareness and leave the detail to the sponsor to explain as part of their own process – essentially the message is ‘inquire within’.

Beyond this, there are mixed views among project stakeholders and sponsors about whether mainstream broadcast advertising and promotion of the WDO scheme would be a smart idea. True, not everyone knows about the scheme, but is that a good thing for managing demand and ensuring that access to the scheme remains targeted just to those who really need it?

Perhaps the key gap is the ‘working poor’ – people who are not patched into the ‘service system’ *per se*, and could really benefit from the scheme but have no existing relationship with any sponsor organisations and no reason to engage with Legal Aid. Options here include re-examining the communication in the letter from SDR when fines become overdue (user testing of different messages?), as well as other touch points people have when they are struggling to make repayments or needing to call on hardship provisions (e.g. with banks, utility companies, telco providers). Our recommendation is to experiment with different approaches over time, and where possible target particular locations where the sponsor network has capacity to respond to in influx of inquiries.

4.2 Support and guidance for sponsors

Financial subsidy for sponsors

Sponsors make a significant in-kind contribution to the administration of the WDO scheme. Although they are all aware of this, few begrudge it. They signed up for the scheme to benefit their clients, and have accepted its administration and reporting requirements in the knowledge that they receive no financial reimbursement for this work. Meanwhile, significant gains have been made in streamlining the administrative load of the scheme and minimising burden (e.g. accepting receipt of certain Centrelink payments as adequate evidence of Acute Economic Hardship, rather than requiring bank statements).

Based on the evidence we have seen in the field, we do not believe it is necessary to introduce a broad based financial reimbursement for sponsors. That said, there may be a place for targeted support of particularly crucial elements of the scheme, e.g. gateway services such as volunteer resource centres, or health practitioners in private practice (whose income is derived from client payments alone, rather than block government funding for community service delivery). Decisions about financial investment should be based on need, as informed by further analysis of sponsor attrition patterns and gaps in the sponsor network.

The Hotline

The WDO hotline is an integral part of what makes the scheme tick. It is highly valued by sponsors and provides essential ‘learning in the moment’ while helping minimise administrative burden for them. The hotline also plays an important role in risk mitigation (nipping problems in the bud) and identification of emerging issues for risk management at a system level.

The self-service portal

Stakeholders who are close to the ‘back end’ detail of the scheme are generally of the view that the portal is overdue for a system upgrade. There are numerous ‘bug fixes’ that could be implemented in the application form, as well as structural changes (e.g. the ability to transport a WDO from one sponsor to another) that could not be implemented without system upgrade.

Scoping of a system upgrade should be a follow up piece of work for the WDO Governance Group, particularly SDR, in the wake of the audit, this evaluation and the revised guidelines. In considering the options, recognition should be given to the following:

- the principles of ‘choice architecture’ in the portal are a key way that SDR can guide sponsor practice, particularly by pegging certain low-risk settings as the ‘default’ option for a new WDO, and then allowing sponsors to deviate from these if there is a reason
- most sponsors think the portal is fine as is, and some have quite low pain thresholds when it comes to information technology and change
- the portal and forms work well at the moment because they are simple – caution should be exercised about any changes that add complexity
- changes should only be prioritised if they improve risk management of the scheme (e.g. a system lockout for new WDO applications if reports for existing WDOs are overdue), improve the level of support that can be given to sponsors (e.g. SDR being able to see sponsor’s screens in real-time, rather than having to ask sponsors to email screen shots) and/or strengthen the client outcomes.

Training

Webinars and other similar low-cost training options are worth investing, particularly if they can be recorded and watched through the portal as videos as required.

One recommended inclusion in training materials (possibly in the guidelines) is the presentation of brief scenarios or worked examples that demonstrate the range of different ways the scheme can and should be used. Some of examples in this evaluation may provide a good starting point for these stories.

Regional networking

Most sponsors that run the scheme have settled into a routine that works for them. While this is a key part of what makes the scheme sustainable (without major change), there is also a need to stimulate sponsor’s creative thinking about how else they could implement the scheme differently. Stories of leading practice from the field are an excellent way for sponsors to shine a new light on their own approach and consider whether they are getting the most mileage out of the scheme for their clients.

Although communication between sponsors and SDR is excellent, there is a big gap in the peer-to-peer communication across the sponsor network. Apart from through chance or existing professional relationships, sponsors do not know who else is operating in the area, let alone how they are implementing the scheme.

One easy win could be to provide current sponsors with a list of each other, with contact details. This could be implemented via the portal, with a mapping functionality and the option of filtering by type of activity etc. Implementing this would require permission from sponsors who have not agreed to be listed on the public website, perhaps through an ‘opt out’ process rather than an ‘opt in’.

Beyond that, sponsors will be keen to know what has been discovered and concluded from both this evaluation and last year’s audit. Given that new guidelines are also soon to be launched, it seems that the time is right for a WDO ‘roadshow’, or a series of WDO showcase forums that bring sponsors together. In terms of what sponsor networking eventuates from there, it would be advisable to put this question to the sponsors themselves and allow them to self-organise in a way that they feel will be meaningful and constructive.

Implementation of the guidelines

Our contact with sponsors consistently found them to be very conscientious, if anything operating more conservatively than they have to – well within the guidelines, rather than near (or beyond) the edges. Sponsors want to do the right thing, and by and large are well aware of restrictions in the scheme (e.g. not double-dipping on activities that are court mandated, legally required or counted as work for the dole).

Referral to third parties is one aspect of the scheme where sponsor practices are inconsistent. However, what we saw in the survey and in the field was not cause for concern – the sponsors we spoke to were conservative about external referral, and would only send people to outfits they trust and know will support the required reporting.

Third party referral is an area in which the scheme could develop, particularly as sponsors become more sophisticated in building a wider variety of activities into the WDOs they administer. If (on the basis of the audit) the WDO governance group feels that third party referral is an area that needs ‘tightening up’, provision of a checklist or referral protocol may be a good way of helping to standardise and guide practice.

The key with further development of the guidelines should be to help the conscientious sponsors (i.e. the vast majority) self-regulate and self-govern without unduly limiting application of the scheme in too narrow a way. The goal should be not to prescribe their practice, but to optimise their application of the scheme in their setting in light of the broad goals of the scheme, to maximise both its reach and the benefit in the target population.

4.3 The design of the scheme

The WDO scheme is widely regarded as an excellent piece of policy and a genuine asset for vulnerable people in NSW. There are a few issues with the design that need to be discussed here.

Resolving differing views about the scheme's intent

A significant theme that came through the research was that many sponsors believe the WDO scheme should serve a rehabilitative function, as well as helping vulnerable people to clear their debts. Many comments were made about some clients 'not learning their lesson', using the scheme only to clear their debts without intending to change their behaviour, 'playing the system' and so on. A number of comments were also made about 'deserving' and 'undeserving' clients. While the WDO Guidelines make no reference to rehabilitation outcomes, many sponsors do believe the scheme has such objectives, and sometimes will make value judgements that discriminate between those they believe deserve the opportunity, and those they think do not.

However this is not a straightforward issue. The majority of sponsors would describe themselves as being in the 'helping business'. For many of them, their core business is to support and help transform vulnerable people's lives. Corrective Services and Juvenile Justice services exist primarily to rehabilitate offenders. It is not surprising, then, that they might use the WDO scheme to help them pursue these objectives, overlaying rehabilitative objectives on the program. Indeed, it may be unrealistic to expect these organisations to suspend the philosophies that underpin their organisations, around reform and/or personal transformation. In short, they are only likely to support WDO as long as the scheme supports their overall mission.

It could also be argued that while the scheme is designed first and foremost to stop the fine system from doing damage to vulnerable people, there is a question about whether it is a good outcome if the scheme makes the fines system impotent for vulnerable people, through 'playing' of the system.

Working a way through these issues will be a delicate balancing act. Clarification of the scheme's intent and discussion of issues such as clients seeking successive WDOs is part of the solution. However it may be timely for the Governance Group to have the conversation about whether the differing perspectives can operate side-by-side, in order for the scheme to remain an initiative that meets both its own objectives and the sponsor organisations' objectives.

Client eligibility

This evaluation has not found strong grounds for adding or varying any of the eligibility criteria in order to improve the function or reach of the scheme.

- Gambling addiction is one that occasionally comes up in consultations, however this may make more sense as a consideration in acute economic hardship rather than a stand-alone category or part of the 'serious substance addiction' category.
- Another suggestion from within the stakeholder network was to amend eligibility to include a 'youth' category, for anyone who is under 18, or aged 18-25 with no income and living at home. This would cut against the focus of the scheme on 'vulnerable' people and potentially open up the scheme to criticism of being 'soft on crime'. SDR is currently

collaborating with other agencies on a youth engagement strategy, and we feel that it is best if this matter is referred to that group for consideration alongside other initiatives.

One lingering technical issue is with demonstration of Acute Economic Hardship by people who (a) are not on any of the Centrelink payments that provide automatic eligibility, and (b) live with their parents or in shared accommodation. There is also the matter of the level at which household income is considered 'low enough' – the threshold is currently below the poverty line, and widely considered to be too low. These matters have been discussed in Section 3 and are important to resolve.

Activities

The one WDO activity that raises the most questions is the rarely-used 'youth mentoring' category:

- We are aware of numerous projects (including projects funded by government, in NSW and elsewhere) where mentoring is entirely valid for people in their middle years and in later life. If mentoring is considered a legitimate WDO activity for under 25s, what is the rationale for it not being a legitimate activity for everyone?
- There is also no clear rationale for why mentoring sits in the compliance-based model, rather than at an hourly rate in line with case management and related activities.

Our recommendation is therefore that mentoring either be removed from the program or given the same status as case management (i.e. all ages at an hourly rate, rather than age limited on the compliance model). We note that this would require a change in legislation – this is one of the unwieldy features of the scheme.

One other potential activity that raises complications is school attendance. School attendance (for those under school leaving age) is mandatory, so cannot be included in a WDO. However, there are some who would like to see WDOs available as another tool available for truancy management. This is a complex issue, and another one for the youth engagement taskforce noted above.

There are also limits on the range of activities that can be provided by health practitioners, in some cases well within their normal scope of practice. Currently, health providers can only provide medical or mental health treatment as a WDO activity, whether directly or by referral. The WDO Guidelines are currently being amended in order to address this issue.

Cut-out rates and the compliance model

The hourly rate figures of \$30 for volunteer work and \$50 for other activities are perceived by sponsors and clients alike as generous – they certainly achieve their goal of attracting attention from potential clients, and there is no need to increase them now (or plan to increase them in the near future).

The differential cut out rates inevitably create some inequity between activities, as one stakeholder put it: *“what the single mum with three children gets off their fines for hours doing volunteering compared with what the kid with no responsibilities gets for going to TAFE”*. However, the differential is

not major and it does do its job in encouraging clients to seek out opportunities for courses and therapeutic programs where they are available and relevant.

Conceivably the hourly rates *could* be dialled back to \$20/\$40 per hour without derailing the program. However, there is no clear rationale why these amounts would be changed now, and part of the success of the scheme is that full debt resolution is not too hard to achieve. The idea is get rid of the debt, get it done and move on – and that’s what people do.

The \$1,000 cap is also not problematic. As far as sponsors and stakeholders are concerned, this is well in proportion to the scale of fines (e.g. \$400 for smoking on a train platform, \$200 for riding without a ticket).

However, there are some concerns (or at least queries) among sponsors and stakeholders about the compliance model accruing debt reduction, and the extent to which it makes it ‘easier’ to reach the \$1,000 cap than the hourly rate model. The compliance model applies only to the WDOs that are (primarily) in the D&A, mental health treatment and mentoring categories.

- One main issue here is that the *default* monthly debt reduction is set to \$1,000. Sponsors can ask to have this reduced in their WDO application, but they hardly ever (if ever) do – the capacity to reduce the monthly cap is a largely unknown feature of the scheme.
- Another is that the ‘contracted hours’ associated with this debt reduction start at a minimum of 1 hour per month. Although some sponsors build in a dozen hours or more, others set the bar at what seems to be a very low level, particularly when compared with the equivalent hours of coursework (20 hours) or volunteering (34 hours).
- The third is that health practitioners have no option but to use the compliance method. Some NGO and government sponsors apply the hourly rate model even though they are providing mental health services etc, because they “*don’t want it to be an easy write-off*” and prefer to spread the a small debt out over several months for longer-term engagement rather than having it resolved within 1-2 months. However, because not all sponsors have this facility or think about the scheme in this way, the situation can emerge where a drug and alcohol counselling relationship might work out at \$250 a session from Sponsor A, but \$50 a session from Sponsor B.

Our recommendation is that an hourly rate accrual pathway (at \$50 an hour) is established as the *new default track* for circumstances that currently default to the compliance method (i.e. for WDOs that are primarily in the drug and alcohol and mental health treatment categories). The scheme should keep the compliance method open as an option, for the same reasons as it was included in the original design. However, setting the defaults to the hourly rate model would require sponsors to (a) elect the compliance model, rather than making it the default and (b) set the monthly amount at a ‘fair thing’ rather than just defaulting to \$1,000 a month.

There is an argument for making a specific ruling on Methadone ‘dosing only’. However, such a determination should not be made without close consultation with the Ministry of Health, which funds the program in itself and will no doubt be across the evidence of how the scheme works best, and under what circumstances.

The potential for abuse of the scheme

As discussed above, sponsors sometimes raised the *potential* for rorting of the scheme by people who are able to pay their fine but, for example, have a drug problem or are voluntarily without a fixed address. WDO Hotline staff also said they were cautious about that, but had no way of systematically preventing it. This evaluation found no evidence of such conduct, but the absence of evidence is not evidence of absence. As highlighted above, the key emphasis should be on putting the onus on sponsors to self-regulate and not put people up for WDOs who are rorting the system. Worked examples/scenarios along these lines in the sponsor guidelines could be a good way of reinforcing this message.

The other priority is to make a decision about whether SDR ought to make more use of the ‘approval pending’ status when WDO applications are submitted that raise a ‘red flag’. Criteria for this review could include repeat WDOs for the same person and compliance-based applications where the activity level is below a certain number of hours and the dollar value of the write off is above a certain threshold. This is not to say that either situation is necessarily problematic (both are allowed for in the guidelines), just that they warrant a check (within 48 hours?) by SDR prior to being confirmed. Establishment of these ‘flags’ would require a system upgrade to the self-service portal; undertaking the reviews would also have resourcing implications for SDR.

4.4 Governance and monitoring and management

The stakeholders at the table in the governance group

The WDO scheme benefits greatly from long term continuity of commitment from the key agencies involved: Department of Justice, SDR, Legal Aid and the Aboriginal Legal Service. Along with the hotline, the high-functioning nature of this governance group is one of the great assets of the scheme that should be protected.

Members of the governance group have identified a need for minor improvements to their processes, including:

- clarification (and perhaps revisiting more broadly) the demarcation of who is responsible for what within the scheme;
- ensuring adequate and effective sharing of learning, data, information, knowledge and new ideas between the partner organisations;
- more streamlined processes for updating the guidelines; and
- development of better ways to resolve issues with the program out of session.

Other key stakeholders to engage

Other agencies with strategic alliances are important for the expansion and positioning of the scheme include Corrective Services and Juvenile Justice (particularly around how the scheme is could be implemented more consistently in custodial settings) and the Ministry of Health (particularly in relation to integration with policy and investment in drug and alcohol treatment and mental health treatment in NSW).

Two monitoring and evaluation priorities

One pressing issue for further exploration in the scheme is the high rate of sponsor attrition. There is a need to understand why two in five of the sponsors who originally signed up to the scheme have now become dormant, both in order to reactivate them (as appropriate) and to put in place strategies that will help avoid untimely departure from the sponsor network among those who still have a valuable role to play.

More broadly, and regardless of whether new funding submissions are required to assemble resources for the scheme (e.g. for regional sponsor networking or a system upgrade of the portal), there would be merit in addressing economic evaluation questions about value of the WDO scheme for the NSW government. A simple ‘balance sheet’ approach could be developed that considers:

- the investment by DJ, SDR, Legal Aid and the Aboriginal Legal Service;
- the amount of debt written off through WDOs, discounted by the likely amount that could realistically have been recovered, as well as the cost of enforcement in this recovery;
- an estimate of the in-kind contribution from sponsors;
- an estimate of the value of the volunteered hours (formulae are available for this); and
- at least a quantification of hours spent undertaking other therapeutic and developmental activities.

If more regular evidence is required of client outcomes, key questions from the survey developed for this evaluation could be included in the WDO closure process (or perhaps just in a random selection of them).

A responsive structure for listening to sponsors

A monitoring committee comprising WDO sponsors (of various types and locations) was established during its trial years (2009-11) to provide the governance group with an ‘ear to the ground’ about implementation issues. This committee is no longer operational; in its place the main ‘listening’ channels for the governance group are the emerging issues and patterns identified by WDO Hotline staff and *ad hoc* feedback from sponsors gathered by Legal Aid and the Aboriginal Legal Service as they promote the scheme in the community.

In our view, there is no great urgency to establish a new state-wide consultative structure with sponsors. The governance group has a good sense of the issues in the field through its existing channels, and sponsors’ main priority is to hear from each other – not to provide feedback to the governance group. If the regional networking model is developed as recommended, the governance group could certainly use these meetings or forums to gather feedback. Also, if there is something that the governance group particularly wants feedback on it could task the SDR Hotline staff with asking one or two key questions of sponsors when they phone up.

Co-design of service improvements

One potential area for further development with the scheme, emerging from this evaluation as well as the audit, could be the engagement of selected sponsors in co-design of improvements.

This could include some of the more sophisticated users of the scheme identified through the evaluation, or potentially a call for expressions of interest to the broader sponsor network.

Appendix A: Survey sample

The survey questionnaire was designed in consultation with the WDO Governance Group, circulated for comment twice before finalisation.

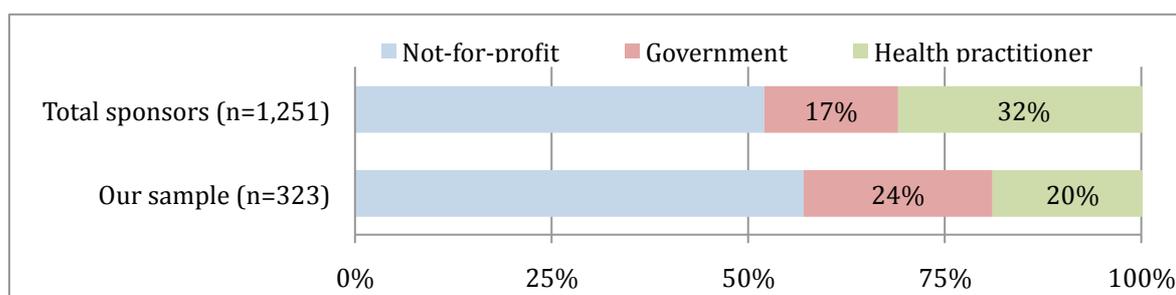
The initial invitation was emailed to the primary administration contact for each sponsor location on Tuesday 7 October, following a small pilot test (n=12) the previous week. Non-responding sponsors were emailed a reminder on Monday 13 October and then received a letter in the week commencing 20 October. Following interim analysis of the responses received by end October (n=241), an additional round of invitations was issued in late November to all participating health professionals, as well as other registered persons within government organisations (i.e. not just the primary administration contact). This lifted the total sample to a final size of 323 responses from 304 organisations.²

Although online completion was the main option for responding, sponsors were also able to run through the survey on the phone (via the SDR Hotline) or send in a hard copy to be entered by SDR. Around a dozen sponsors chose these alternative options.

The sample represents just under a quarter (24%) of total sponsor organisations at the time of the (n=304 organisations of a total 1,251). If we limit our focus just to sponsor organisations who had applied for a WDO within the year prior to the survey (since 1 October 2013), the response rate lifts to 37% (n=265 organisations of 709).

NGOs are somewhat over-represented in our sample, compared with Government and Health Professionals underrepresented (see Figure A1).

Figure A1: Sample composition



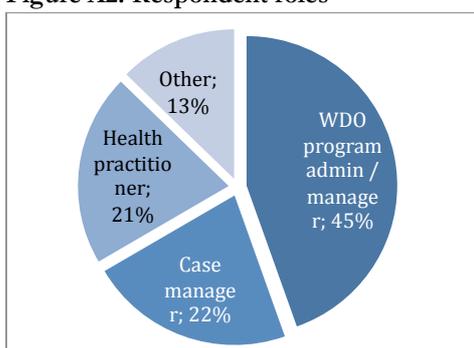
Most responses (307 of 323) provided a valid WDO ID, enabling data matching between the survey results and the records held by SDR. As seen in Table A1 overleaf, matching the 288 unique organisations in our sample against the SDR database shows the sample provides a good geographic coverage across the state, relative to the existing spread of sponsors.

² Note that the total sample includes 19 ‘doubles’ where different responses came from different vantage points in the organisation, e.g. administrator vs case manager, or different locations. Redundant duplications were removed.

Table A1: Sample location

Statistical Division	Survey sample	Total sponsors
Sydney	46%	45%
Illawarra	10%	11%
Mid-North Coast	10%	9%
Hunter	7%	6%
Richmond-Tweed	6%	5%
Central West	5%	5%
Northern	4%	4%
North Western	3%	3%
South Eastern	2%	3%
Murrumbidgee	2%	2%
Murray	1%	1%
Far West	<1%	<1%
Outside NSW	3%	4%

Just under half of the survey respondents were WDO program administrators or manager. Most others were case managers or health practitioners.

Figure A2: Respondent roles

Table A2: Respondent roles by organisation type

	Not for profit	Gov't	Health Practice	Total
WDO program admin / manager	112	30	2	144
Case manager	50	14	7	71
Health practitioner	1	16	50	67
Other	22	17	2	41
Total	185	77	61	323

Sponsors in the survey oversaw WDOs of all kinds (Table A3). (Note that the purpose of asking this question was to ensure that only the relevant follow-up questions were asked. The definitive data on this for the evaluation should come from the SDR database, not the survey.)

Table A3: Activities delivered by sponsor organisations in the survey

	Not for profit	Gov't	Health Practice	Total
Medical or mental health treatment	63	38	53	154
Educational, vocational or life skills courses	109	37	-	146
Drug and alcohol treatment	64	53	-	117
Financial or other counselling (including case management)	90	24	-	114
Voluntary unpaid work	105	7	-	112
Mentoring programs (for clients aged under 25)	20	5	-	25
Total*	173	72	53	298

* Excludes sponsors that had not (yet) applied for or supervised a WDO. Note organisations may provide more than one type of service.

Appendix B: Discussion questions for qualitative fieldwork

B1: Client interviews

Verbal preamble to interview

Explain verbally to interview participant that:

- The interview will last for 30-45 minutes. We can take a break part way through if they want to.
- The interview will be about their experience with the Work and Development Order (WDO) scheme – ways in which the Order has been helpful and how the scheme could be improved.
- The interview is part of a broader evaluation, which is being undertaken to improve the Scheme.
- The interviewer will take notes but is not taping the conversation. The participant can read the notes at the end if they want to.
- A (\$30) ‘thankyou’ voucher will be given at the end of the interview, and the participant will be asked to sign that they have received that.
- The interview is confidential. This means that:
 - Nothing said in the interview will be passed back to the organisation sponsoring their WDO, or anyone else.
 - The only people who will see the notes will be the people doing the interviews, for the purposes of analysis.
 - The interview will be analysed and written up alongside dozens of others.
 - The report will include quotes and examples, but no names or identifiable information will be reported.
- If there are any questions the participant would rather not answer, or if they want to stop the interview, they just need to let the interviewer know.

Confirm verbally that the participant understands the above and agrees to the interview.

Letter with incentive

This voucher is to thank you for participating in the evaluation of the Work and Development Order (WDO) scheme.

The purpose of the evaluation is to help the NSW Government improve the WDO scheme.

The interview was confidential, so nothing you said will get back to the people involved with your WDO, and the only people who will see the notes will be the people doing analysis and writing up the report.

If you have any questions about the interview, please contact Inca Consulting on 02 9081 8018 or by email at office@incaconsulting.com.au.

Thanks again,

Name of interviewer & date of interview

Background client information provided by WDO Sponsor org

- **Grounds for applying**, i.e. financial hardship / homeless / addiction / mental illness / ID/Cog Impairment
- **Nature of WDO activity**, ie unpaid work with or on behalf of approved organisation / medical or mental health treatment / educational, vocational or life skills course/ financial or other counselling / drug/alcohol treatment / mentoring program (<25s only)
- **Fines:** General nature and amount
- **Status of WDO**, i.e. duration of the WDO and if completed
- **Post-WDO engagement** with the sponsor or the org that they did their WDO

Interview topics

Warm up

- **Personal background** – where grew up, main activities during week, work (and income support), family etc
- **How they became aware** of the WDO scheme; any prior relationship with the sponsor organisation
- **Fine snapshot** – how many, what for, how much (total), amassed over what period of time etc
- **Perceptions of the application process**
 - finding a sponsor
 - how involved they were in the application process for their own WDO supporting information – ability to provide etc
 - timeframes and any other communications issues

Participation

- **WDO activities**
 - existing activities counted towards WDO, or new activities
 - perceived suitability to own circumstances – did activities address client's needs.
 - capacity to influence the activities included on WDO
- Did it all go according to plan (if not, how and why?)
 - Incl relationship with SDR, sponsor organisation and any third-party organisation involved

Outcomes

- **Impact of undertaking the WDO activities**, during the life of the Order / subsequently:
 - perceived benefit from WDO activity, whether glad to have done these things and what they got out of it, e.g. New skills? Feeling healthier / better equipped to deal with their life circumstances? More engaged with community? Education? Increase employment opportunities? Other ?
 - impact on relationship with other services (attitude towards them, engagement with them, compliance with treatment requirements/programs, etc)
 - any unintended negatives from WDO activities / activities seen as a 'waste of time'
 - any further fines accrued during scheme participation – if yes, what did they do about them?
- **Impacts of having no/less fines debt:**
 - mental health – incl stress, feeling overwhelmed, feeling powerless/hopeless
 - ability to work, drive, participate in community/family activities etc
 - ability to cover essential household costs (food, bills etc)
 - removal of enforcement actions e.g. reinstatement of drivers licence
 - physical health
 - attitude towards offending and fines – incl any subsequent fines they might have accrued
 - other (*probe for cleared fines as gateway to positive/constructive behaviour*)

Reflections

- **Overall satisfaction** with WDO scheme
 - whether recommend to others
 - any downsides / risks to watch out for
- **Ways to improve** the program
 - Promotion / communication
 - Structural / design issues
 - Local implementation issues

B2: Sponsor interviews

Verbal preamble to interview

Explain verbally to interview participants that:

- The interview will last for 45-60 minutes.
- The interview will be about their experience with the Work and Development Order (WDO) scheme:
 - how the scheme has operated, and what it's been like to administer
 - the impact of the scheme for their clients and their organisation
 - how the scheme could be improved.
- The interview is part of a broader evaluation, which is being undertaken to improve the Scheme.
- The interviewer will take notes but is not taping the conversation. Participants can read the notes at the end if they want to.
- The research is confidential, ie:
 - Nothing they said will be passed directly back to the Department of Justice, State Debt Recovery, Legal Aid, your clients or anyone else involved in administering the Scheme.
 - The only people who will see the notes will be the people doing the interviews, for the purposes of analysis.
 - The interview will be analysed and written up alongside dozens of others.
 - The report will include quotes and examples, but no names or identifiable information will be reported.
- If there are any questions the interview participants would rather not answer, or if they want to stop the interview, they just need to let the interviewer know.

Confirm verbally that the interview participants understand the above and agree to the interview.

Interview topics (tailor to NGOs vs health practitioners)

each interview to focus on issues of particular relevance to the sponsor

Warm up

- **Snapshot of organisation** – government/NGO, size, funding arrangements, client base, other programs/activities, staff qualification for providing these programs/activities?
- **Overview of WDO activity** – when registered, number of applications (successful/unsuccessful), number of current and completed orders etc, what kind of WDO activities provided/referred

Signing up as a sponsor

- **Their beginnings** – How organisation/practitioner found out about the scheme, reasons for signing up
- **The reality** – Anything about the scheme that has taken them by surprise / should have been told in advance?
- **Growing the sponsor base** – How more new sponsors could be attracted, and who this should target
- **Registration and approval process**
 - suitability of sponsor approval requirements (any missing? any unreasonable?)
 - suitability of documentation requirements (any unnecessary or difficult to provide?)
 - experience with the approval process (Application forms? Timeframe?)
 - any ways this could be improved

Client outcomes

- **Perceived value for clients**, including
 - positive impacts observed (expected and unexpected)
 - positive impacts anticipated but not observed
 - negative impacts observed (expected and unexpected)
 - negative impacts anticipated but not observed

Impact for your organisation, e.g.

- changes in the nature / characteristics of your client group
- changes in your own work practices

- changes your relationships with other services / local organisations
(*probe for evidence of enhanced collaboration between the justice, health and community sectors*)
- changes in your capability to work effectively with vulnerable and hard-to-engage client groups

Maximising the value of the scheme

- Satisfaction with the overall ‘outcome profile’ you have seen – is the Scheme delivering on its promise?
- Factors that limit the value of the scheme
 - limitations in capacity to refer to suitable WDO activities in the area
 - limitations in suitability of existing client base
 - other?
- Lessons learned about how to focus and configure the program on greatest benefit, e.g.
 - how to advertise/promote the scheme most effectively to clients
which client groups benefit most/least
 - which WDO activities are of greatest/least benefit to clients
 - which activities are easiest/hardest to get placements for
(this question is relevant to Legal Aid, ALS, SDR and services sponsoring WDOs on referral)
 - how they determine the best activities/which activities are suitable for their client
(relates to cut-out rate questions below)
 - how you have integrated and adapted the scheme to local conditions and your own internal operations
 - risks you have identified and how these have been managed
 - how you manage third party referrals (e.g. assessing the suitability of third party organisations which they may refer a client to as part of a WDO) –
 - Do you check staff qualifications and insurance coverage of third parties?
 - How do third parties report hours clients have undertaken with them as part of a WDO?
 - How do you regulate this?
 - how to ensure the legitimacy of the scheme:
 - *Select one of the 4 scenarios – see separate document*
 - For the WDO activity medical/mental health treatment, a WDO client can clear \$1000 a month off their fines debt for full compliance with their treatment plan. This can include attendance at a methodone clinic for dosing only. Do you think that the writing off of this amount of debt for methodone only treatment is beneficial to the client? Are there any risks/benefits you can identify for dosing alone to be counted as ‘drug and alcohol treatment’ for a WDO?
 - Decisions and discretion on cut out rates: *Sponsors have broad discretion to determine appropriate client activities and cut out rates for their client’s participation in WDO activities.*
 - Were you aware that you have the discretion to reduce the overall amount of fines debt that is written off?
The cut out rates of the different WDO activities vary. E.g. Educational, vocational, life skills courses attracts \$50 per hour/\$350 per full 7 hour day, whereas mentoring for persons under 25 attracts \$1000 per month for full compliance of hours proposed to be undertaken.
 - Have you ever felt pressured by clients that have large amounts of fines debt to select a WDO activity which will resolve their fines debt at a higher rate?
 - Do the cut out rates for the different WDO activities ever influence your decision of what activity to provide your WDO client?
Note: Mentoring can be written off at \$1000 for an hour of compliance per month as is the case for drug treatment. This is an issue that State Debt are particularly interested in as their data analysis found educational, vocational and life skills courses tended to be put down as mentoring. It is thought this is occurring due to the higher rate of fine resolution attracted by mentoring.
 - Do you have any internal processes to assist in determining which category of WDO activities a particular activity falls under?

Health practitioners only:

- For medical/mental health treatment undertaken for the purposes of a WDO, up to \$1000 fines debt can be written off per month if the client is fully compliant with their treatment plan. Sponsors have the

discretion to recommend that the fine debt is paid off at a lesser amount per month if they believe that it will be of benefit to their client.

- Were you aware you have the discretion to reduce the amount of fines debt that is written off?
- Do you, or have you, ever recommended a reduced cut-out rate?
 - If yes – why?
 - If no, Can you think of any circumstances where a reduced pay-off rate would be of benefit to your clients (eg – encourage continued engagement)
- If your client is involved in undertaking activities other than those that you supervise as part of their health treatment plan do you count these other activities toward their WDO? If yes – how do you monitor their compliance with the activities that you don't supervise to ensure that they can be counted toward the WDO?

Other program administration

- Overall impressions of the administration of the scheme, suitability of process etc
 - Familiarity with the guidelines, clarity and adequacy of the guidelines / other support available to you – anything you are unsure or concerned about
 - Hesitations / hassles in running it (e.g. admin burden for staff, cost to organisation)
 - Any external factors affecting your ability to deliver the scheme? (eg. funding cuts / new service models e.g. TAFE / homelessness sector)
 - How many people in the organisation/practice have access to the Self Service Portal?
 - If more than one: When access was provided to additional staff members, did they receive any training/make themselves familiar with the WDO Guidelines or the SSP Guide?
- The application process for clients
 - suitability of eligibility criteria for the different 'grounds' (any unreasonable?)
 - Are the proof requirements in the WDO guidelines clear and appropriate? If not, can you suggest any improvements which would make it clearer/easier for your organisation to provide these proof of eligibility documents.
 - suitability of proof of eligibility documentation requirements for the different 'grounds' (any unnecessary or particularly difficult for clients to provide?)
- The reporting process
 - appropriateness of the WDO reporting requirements, frequency (monthly)
 - any aspects of the reporting requirements you find hard to meet
 - use of online reporting tool, perceived usefulness
- What could be done to better support orgs, e.g.
 - Upon being approved, did you receive any training or resources on the WDO scheme or Self Service Portal? If no, were you aware these were available? If yes, how was this provided? SDR Self Service Portal training session? SDR WDO Hotline? Legal Aid / ALS WDO Service? Other?
 - training/info/advice/assistance – explore topics, delivered by whom, formats etc (eg Legal Aid staff / Hotline staff ?)
 - networking with other participating organisations
- Other suggestions for how scheme administration could be improved, streamlined etc

Close: Other suggestions for how the scheme could be improved – more sustainable for sponsors or third parties, or more beneficial for clients.

B3: Third party interviews

Verbal preamble to interview

Explain verbally to interview participants that:

- The interview will last for 15-20-minutes.
- The interview will be about their experience with the Work and Development Order (WDO) scheme:
 - their interaction with the scheme
 - the impact of the scheme for their organisation
 - how the scheme could be improved.
- The interview is part of a broader evaluation, which is being undertaken to improve the Scheme.
- The interviewer will take notes but is not taping the conversation. Participants can read the notes at the end if they want to.
- The research is anonymous, ie:
 - Nothing they said will be passed directly back to the WDO sponsor organisation or any clients, or anyone else involved in running the Scheme.
 - The only people who will see the notes will be the people doing the interviews, for the purposes of analysis.
 - The interview will be analysed and written up alongside dozens of others.
 - The report will include quotes and examples, but no names or identifiable information will be reported.
- If there are any questions the interview participants would rather not answer, or if they want to stop the interview, they just need to let the interviewer know.

Confirm verbally that the interview participants understand the above and agree to the interview.

Interview topics

- **Snapshot of organisation** – government/NGO, for-profit/not-for-profit, size, client base, other programs/activities, staff qualifications for programs/activities provided.
- **Overview of WDO activity** – where they take WDO referrals from, what these participants do?
- Reason why your organisation is not a WDO sponsor?
- **Impact of WDO activity – for clients:**
 - Do you find that WDO clients have a different attitude / mindset about their participation in the treatment/programs/volunteering opportunities they provide compared to your usual clients? (e.g. more reliable/regular/compliant)
- **Impact of WDO activity – for the organisation:**
 - Best / worst thing about the scheme for their organisation
 - Any changes in the nature / characteristics of their client group
 - Any changes in their own work practices
 - Was sponsor already referring to you, or was referral of clients a result of the WDO scheme? Any changes their relationships with other services / local organisations
(probe for evidence of enhanced collaboration between the justice, health and community sectors)
 - Any changes in their capability to work effectively with vulnerable and hard-to-engage client groups
- **Other impacts:**
 - Do you receive a financial benefit from providing activities to WDO clients?
 - How does the sponsor organisation regulate/supervise the participation of their client with your organisation?
 - Are staff in your organisation aware of the requirements of the WDO scheme/WDO guidelines? How does your organisation report hours completed by WDO clients to the sponsor organisation? Did sponsor organisation request information on/check your insurance policies and staff qualifications prior to referring WDO clients to you?
- **Close** – Any other suggestions for how the scheme could be improved – more sustainable for orgs or more beneficial for clients.