



# Evaluation of the Homelessness Industry and Workforce Development Strategy

Findings of the NSW Homelessness Sector Workforce Survey 2021

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## Acronyms and abbreviations used in this report

<b>ACCORD</b>	Redressing Aboriginal Homelessness Accord
<b>ACCO</b>	Aboriginal Community Controlled Organisation
<b>AHURI</b>	Australian Housing and Urban Research Institute
<b>AoD</b>	Alcohol and other drugs
<b>ASES</b>	Australian Service Excellence Standards
<b>BNG</b>	By-Name Group
<b>CALD</b>	Culturally and Linguistically Diverse
<b>CIMS</b>	Client Information Management System
<b>CoP</b>	Community of Practice
<b>DCJ</b>	NSW Department of Communities and Justice
<b>DFV</b>	Domestic and Family Violence
<b>IP</b>	Industry Partnership
<b>JWA</b>	Joint Working Agreement
<b>L&amp;D Framework</b>	Learning and Development Framework
<b>LGBTQI+</b>	Lesbian, Gay, Bisexual, Transgender, Queer and Intersex
<b>MOU</b>	Memorandum of Understanding
<b>RAP</b>	Reconciliation Action Plan
<b>SHS</b>	Specialist Homelessness Services



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# Executive summary

Homelessness NSW is contracted by the NSW Department of Communities and Justice (DCJ) to deliver the Homelessness Industry and Workforce Development Strategy (Strategy), on the understanding that this is done under auspice and in partnership with Domestic Violence NSW and Yfoundations (Industry Partnership (IP)).

Homelessness NSW contracted the Australian Housing and Urban Research Institute (AHURI) to evaluate the Homelessness Industry and Workforce Development Strategy (Strategy) 2017–20, and provide research to support the development of the Strategy 2020–24.

This report details the findings of the survey component of the Evaluation. The survey aimed to gather information from NSW Homelessness sector organisations and workforce. The survey had two components. One part collected data from CEOs and senior managers in relation to the organisation and the SHS funding contract (program). The second part collected data from practitioners.

## **Delivery of the Industry and Workforce Development Strategy 2017–2020**

Survey findings show that overall, the 2017–20 Strategy was implemented and delivered. The impact of COVID-19 on the sector was widely acknowledged. Overall, 85 per cent of managers thought that the IP had been effective or very effective in responding to sector needs in the past 12 months and IP initiatives were well received (e.g. Australian Service Excellence Standards (ASES), COVID-19 initiatives, Communities of Practice (CoPs), Network meetings, Client Satisfaction Survey).

Overall, IP initiatives and messages were well communicated to the sector. However, not all messages from the IP reach all parts of the sector workforce equally. As a result, not all sections of the workforce are aware of all IP initiatives and opportunities that are relevant to them. For example, around a third of respondents were unaware of network meetings. The evidence indicates that messaging about the Redressing Aboriginal Homelessness Accord (ACCORD) and cultural competence needs improving. While most managers were aware if the ACCORD, many practitioners were not.

## **Characteristics of workers in NSW homelessness services**

The NSW homelessness sector workforce is largely female (78%), most are born in Australia (82%) and speak only English at home (83%); 8 per cent identify as Aboriginal and Torres Strait Islander. Most workers are 25–54 years of age and are highly educated (51% hold a Bachelor Degree or higher).

Most staff are employed on a permanent ongoing basis (73%) and work full-time (77%). The sector workforce is stable and attracts few new entrants; lack of prospects for job progression and low pay may be impacting the sector's ability to attract and retain staff.

Sector staff usually work with a breadth of different client groups (seven on average), most commonly with Aboriginal and Torres Strait Islander people, people with mental health problems, Culturally and Linguistically Diverse (CALD) people, and people sleeping rough.

## Impact and suitability of the SHS Learning and Development Framework and Workforce Capability Framework

Most managers (85%) are aware of the SHS Workforce Capability Statement and most (75%) think it meets their program's needs.

There is a relatively high level of uptake of MTS training and most managers and practitioners felt it was relevant to the workforce. Managers indicated that 67 per cent of program staff had attended MTS training in the 12 months prior to the survey. Almost all managers (94%) indicated that new staff received training for Client Information Management (CIMS) client records and case management, and training for working with Specialist Homelessness Services (SHS) clients (76%).

Managers and practitioners alike were appreciative of the increased availability of training on Zoom. Online learning increased accessibility, especially for those in regional and rural areas. However, availability of courses (the right course at the right time and available training places) remains an issue. Time management issues (22%), lack of training opportunities in regional centres (18%), and lack of suitable courses (18%) constrained practitioners' access to training.

## Cultural competency

The survey highlighted that Aboriginal organisations and Aboriginal workers face unique challenges. NSW SHS organisations employ relatively few Aboriginal staff members, and even fewer are in managerial, leadership, or executive positions. Many organisations report difficulties attracting and retaining Aboriginal staff.

Most NSW homelessness sector organisations require their staff to undertake cultural competence training and most practitioners feel that they have the skills to engage with Aboriginal clients in a culturally sensitive way. However, the MTS training does not fully meet organisations' needs and two thirds of practitioners have accessed cultural competence training in other ways. This highlights that there is scope to review how cultural competence training is delivered through the MTS training calendar, including making training more culturally relevant to specific communities and providing better access to training.

There is considerable room for improvement in increasing organisations' cultural competence and safety. This includes:

- Increasing the number of Aboriginal staff members, especially in senior management and executive positions.
- There is a need for the IP to engage in further promotion, education and training about the ACCORD. This would increase knowledge across all levels of the sector, particularly among practitioners, and assist organisations with the implementation of the ACCORD in meaningful ways. In addition, practical strategies are needed to ensure that the ACCORD is implemented in ways that increase the cultural competency of SHS organisations and their staff. (See section 9.2 for information about the ACCORD.)
- There is scope for the IP to provide leadership, education and training to assist NSW Homelessness sector organisations to further develop and strengthen their capacity to provide culturally appropriate services and advocate to DCJ.
- There is considerable scope of the IP to offer support and training to leaders in NSW homelessness sector organisations to develop and strengthen their capacity for meaningful engagement with Aboriginal communities, and to strengthen the provision of culturally appropriate services for Aboriginal clients.

## Priority training areas across the NSW homelessness service workforce

The skills and capabilities of the NSW homelessness sector workforce largely meet the needs of the sector, though there is room for improvement, especially in relation to specialist skills such as advanced mental health.

- Managers' training priorities for staff are to equip them for working with: people mental health needs, Aboriginal and Torres Strait Islander people, LGBTQI+ people, victim survivors of Domestic and Family Violence (DFV), and people vulnerable to alcohol and other drugs (AoD) misuse. Training priorities for specialist skills are advanced mental health and cultural competence.
- Managers identified strategic planning and governance management for the community sector as the key priority for skills development for their leadership team. Training and mentoring for emerging leaders are a priority.
- Managers indicated that needed additional training is often not available through the MTS Training Calendar (29%).
- Practitioners' priorities for management and leadership training were professional and clinical supervision for managers, building workplace culture, and emotionally intelligent leadership.
- Practitioners' training priorities were: cultural competence training, access to training in regional areas, more availability of training for advanced skills, and leadership, career development and accredited training.

## How can the SHS L&D Framework and Capability Framework be strengthened?

The survey identified several ways in which the Learning and Development (L&D Framework) Framework and Workforce Capability Framework could be strengthened:

- provide a mix of face-to-face and online delivery modalities to increase accessibility of MTS training
- increase flexibility in how, how often and when training courses are provided
- increase access to advanced and specialist training, either through MTS or partnerships with other training organisations
- review and improve cultural competence training in relation to its content and relevance and the mode of delivery
- develop strategies to better utilise workforce skills (a high proportion of workers feel their skills are not being used well) and to create more supportive work environments.

## How sustainable are NSW homelessness service providers?

Overall, the data paints a picture of a sector that is heavily reliant on government funding. Issues of sustainability arise where organisations cease to receive government funding, which can imperil their ability to continue to deliver services and remain sustainable.

Aboriginal organisations struggle to access direct government funding to provide SHS services. Despite the high proportion of Aboriginal and Torres Strait Islander clients, only one Aboriginal controlled organisation receives funding from the NSW Government to provide homelessness services. Other Aboriginal organisations work together with mainstream organisations via joint working agreements (JWAs). Many non-Aboriginal organisations are contracted to provide Aboriginal-specific services.

The characteristics of the sector workforce (section 4) indicate that there may be future issues in terms of sustaining and refreshing the workforce. While the sector workforce is stable, it attracts few new entrants and has a low proportion of younger workers under 24 years of age. Lack of prospects for job progression and low pay impact the sector's ability to attract and retain staff; lack of applicants with the right skill set constrains organisations' ability to recruit suitable staff. This indicates that there is a need to develop strategies to improve the attractiveness of the sector for new and younger workers and to develop pathways for job progression.

Collaboration between agencies and services is key to the sustainability of the NSW homelessness sector. Collaboration enables pooling of resources, facilitates better services and better client outcomes and allows services to support each other.

All programs collaborate with other organisations, either via Memorandum of Understanding (MOUs) (outside a JWA) (85%), informal agreements (70%) and JWAs (35%). At the program level, collaboration is usually formalised, at the practitioner level, informal arrangements are the main form of collaboration. Barriers to collaboration included tendering practices and competition, different ways of working, referral practices, breakdown of communication, lack of capacity within the sector, and staff turnover.

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# 1. Introduction

Homelessness NSW is contracted by the NSW Department of Communities and Justice (DCJ) to deliver the Homelessness Industry and Workforce Development Strategy (Strategy), on the understanding that this is done under auspice and in partnership with Domestic Violence NSW and Yfoundations (Industry Partnership (IP)).

Homelessness NSW contracted the Australian Housing and Urban Research Institute (AHURI) to evaluate the Strategy 2017–20 and provide research to support the development of the Strategy 2020–24 (Evaluation). This report details the findings of the survey component of the Evaluation.

The Strategy has existed in various forms since 2014:

- Industry Partnership Sector Development Project 2014–17
- NSW Homelessness Industry and Workforce Development Strategy 2017–20
- NSW Homelessness Industry and Workforce Development Strategy 2020–24.

The goals of the Strategy 2017–20 were:

- Goal 1 – Service quality, sustainability, and good practice: To provide quality services to service users that are trauma informed, sustainable and demonstrate good practice
- Goal 2 – Service integration: To provide service users with integrated services coordinated at local, district and state levels, that are accessible from multiple points of entry (i.e., embodies a ‘no wrong door’ approach)
- Goal 3 – Outcomes indicators and measurement tools: To work towards standardised, measurable outcomes for service users to assess the effectiveness of the sector
- Goal 4 – Workforce Development: To ensure a highly skilled, motivated and stable homelessness workforce.

The goals of the Strategy 2020–24 are:

- NSW SHS are equipped to deliver quality supports and services, within a trauma informed framework
- NSW SHS are equipped to measure and demonstrate the outcomes and impact of their service
- NSW SHS workforce is skilled and capable at all levels, including leadership
- SHS within NSW are supported to network and collaborate
- SHS across NSW are sustainable
- across NSW, SHS provide culturally safe and competent services for Aboriginal clients and communities.

Although the goals have been reworded, operationally, the Strategy is being delivered as a continuation of projects under the previous strategy, with space to introduce new projects in later years. Since 2016, several initiatives have been introduced under the NSW Homelessness Industry and Workforce Development Strategy:

- support for service providers to achieve requirements of the Australian Service Excellence Standards (ASES)
- SHS L&D Framework.

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## 2. Method

The evaluation has four components, each with associated research questions.

### 1. Impact and process evaluation of the NSW Homelessness Industry and Workforce Development Strategy 2017–20

Evaluate how well the 2017–20 NSW Homelessness Industry and Workforce Development Strategy (2017–20 Strategy) was implemented and delivered and what its impact has been.

- What impact did the 2017–20 Strategy have on the NSW Homelessness Service Sector?
- How well were the *NSW Homelessness Industry and Workforce Development Strategy* and its projects implemented and delivered?
- How effective are communications?

### 2. Formation of the future NSW Homelessness Industry and Workforce Development Strategy

Establish the context and needs for the future NSW Homelessness Industry and Workforce Development Strategy (Future Strategy), including changes to the operating environment and priority areas for development and improvement.

- How has the SHS Program and the environment in which it operates changed?
- What are the priority areas for development or improvement across the NSW Homelessness Industry (especially for ensuring service providers meet the ASES and service providers moving to outcomes measurement)?
- What support does the SHS Program need to meet these priorities?

### 3. Formative evaluation and training needs assessment of the NSW homelessness services workforce

Establish the characteristics and training needs of the NSW homelessness services workforce to inform the development of the Future Strategy.

- What are the characteristics of workers in NSW homelessness services (such as gender, age group, Indigenous status, cultural and linguistic diversity, roles, type of service work in, size of service work in, client cohort work with, level of experience, and qualification)?
- How well do the existing SHS L&D Framework and Capability Framework meet the needs of the different segments of the NSW homelessness sector, in terms of level of uptake, appropriateness and comprehensiveness of courses offered, and facilitators and barriers to participating in training? Of particular interest is how effective the Framework is at improving cultural competency, staff wellbeing practices, and wellbeing leadership.
- What are the priority training areas across the NSW homelessness service workforce (noting that all services must achieve ASES accreditation within the next three years)?
- How can the SHS L&D Framework and Capability Framework be strengthened?

#### 4. Assess the organisational sustainability across the NSW Homelessness Industry

- What are the characteristics of NSW homelessness services (such as structure and size of organisation providing service, location of service, function and type of service, client groups, Aboriginal led)?
- How sustainable are NSW homelessness service providers?
  - Strategically: How well do providers understand, prepare for, and respond to changes in the broader external environment?
  - Financially: How reliant are providers on specific funding sources?
  - Organisationally: How sustainable are the staffing, systems, policies and procedures, contractual arrangements, and governance arrangements of service providers?
- What are the main risks to sustainability, and what would help overcome these risks (especially for Aboriginal-led organisations, and for organisations that are subcontracted to provide homelessness services)?

In order to answer these research questions, the evaluation adopts a mixed method approach. The key components of the research approach are as follows:

- online survey of NSW SHS provider organisations and staff
- focus groups with sector representatives and key stakeholders
- direct consultations with Aboriginal organisations
- analysis of existing datasets.

This Interim Report details the findings of the survey component of the Evaluation.

### 2.1 Survey design and distribution

The survey was developed and administered by AHURI using Qualtrics software. Homelessness NSW distributed the survey to the NSW homelessness sector through its networks.

The purpose of the online survey was to gather information from NSW homelessness sector organisations and workforce.

The survey had two components. One part collected data from CEOs and senior managers (for example, the state manager, human resources manager, or finance manager) in relation to the organisation and the SHS funding contract (program). The second part collected data from practitioners: senior officers, lead practitioners, managers and frontline staff. For ease of reference, the term 'manager' is used throughout the report to refer to responses gathered from CEOs and senior managers; 'practitioner' is used to denote data gathered from practitioners, managers and frontline staff.

The survey component for managers asked about:

- their views on the capacity, sustainability and workforce development needs of their organisation and the sector as a whole
- the structure of the NSW homelessness sector (such as function, size, location, client groups)
- the skills, training opportunities and workforce development needs of high-level management and leadership staff in NSW Homelessness sector organisations
- implementation, communication, and impact of the Strategy 2017–20
- priority areas for the Future Strategy (including ASES and L&D Framework).



The survey component for practitioners asked about:

- their skills, capacity, wellbeing, access to training and training needs
- SHS workforce sustainability and changes to client needs and industry environment
- Their views on the impact, implementation, and communication of the Strategy 2017–20
- priority areas for the Future Strategy 2020–24 (including ASES and L&D Framework).

Survey questions were based on those drafted by Homelessness NSW and were refined by AHURI in consultation with the IP through iterative processes and workshops. A final draft version of the survey was piloted with members of the project steering group, as a result of which minor changes were made before the survey was distributed to the sector by Homelessness NSW. Homelessness NSW maintains a contact list of NSW homelessness organisations, which formed the basis for distributing the survey electronically.

The NSW homelessness sector is diverse and comprises around 140 organisations of different sizes, and with different spheres of operation. These range from small organisations that have few staff and only one funding contract with DCJ, through to large organisations that provide SHS across the state and the nation and that hold multiple funding contracts for the provision of SHS in different locations across NSW. To account for this diversity, the survey asked responding organisations to provide information in relation to their program (where ‘program’ in this case refers to a funding contract).

In terms of sampling, this meant that for some organisations the CEO was the most appropriate contact for gathering information and distributing the survey to organisation staff. However, in larger organisations, state, division or area managers were more appropriate contact points. Where feasible and appropriate, the survey was also promoted through the Homelessness NSW membership database and at network meetings.

## 2.2 Survey responses received

The survey received 236 responses. Practitioners provided 210 responses about their services, work experiences, skills, training needs and clients. In addition, the 26 responses received from senior managers and CEOs provided information about the organisation as a whole in terms of staffing, funding, and leadership views on staff skills, capabilities and training. Overall, 43 different organisations provided responses (see Appendix 1).

Table 1: Survey responses

Completed responses received	%	Count
CEO/Senior manager	11%	26
Senior Officer/Practitioner/Frontline Staff	89%	210
<b>Total completed</b>	<b>100%</b>	<b>236</b>

Participation in the survey was optional and, although the response rate from the sector was very high, not all respondents answered every single question in the survey. This accounts for the slight variation in the overall number of responses for each of the survey questions and reported throughout this report (for example, the different totals listed in Table 2).

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## 3. Industry Partnership initiatives

The Industry Partnership (IP) arrangement outlined in the Strategy 2017–20 has delivered a range of initiatives to the NSW SHS sector. These include the following.

### **Redressing Aboriginal Homelessness Accord (ACCORD)**

The ACCORD<sup>1</sup> was developed by the NSW SHS Aboriginal Reference Group in November 2017. It is intended to be an active guiding document to assist organisations to close the gap between Aboriginal and non-Aboriginal peoples. It does this by taking a holistic and human rights approach to redressing Aboriginal homelessness.

### **Australian Service Excellence Standards (ASES)**

The ASES is a step-by-step program specifically designed to develop the capacity of community organisations to strive towards continuous improvement in quality service delivery. DCJ requires all NSW SHS to become accredited by 30 June 2024.

Homelessness NSW provides a range of resources to support SHS organisations to achieve ASES accreditation. This includes 'how to' guides, the ASES Help Centre, the BNG SPP Portal (an online tool that assists with self-assessment against ASES standards) and ASES support grants.

### **L&D Framework and MTS Training Calendar**

The L&D Framework is part of the IP's Strategy 2017–20 and aims to support systemic improvements in industry and workforce capability. It supports Goal 4 of the Strategy, which is Workforce Development.

The framework provides:

- a staged approach that builds towards qualifications
- flexible and accessible programs
- masterclass webinars and recordings
- just-in-time, online self-help tools
- access to other funding (such as Smart and Skilled) where possible
- training specific for meeting the needs of client groups at different levels, for example induction, intermediate and advanced.

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<sup>1</sup> Homelessness NSW (2017) *Redressing Aboriginal Homelessness Accord*, Sydney, Australia, <https://homelessnessnsw.org.au/wp-content/uploads/2021/03/Redressing-Aboriginal-Homelessness-Accord.pdf>.

Training is delivered through a combination of face-to-face training and online training. During the COVID-19 pandemic, the majority of training was delivered online.

DCJ funded workers and managers can enrol in subsidised courses. The training is delivered through the SHS MTS Training Calendar and online portal. Coursework and training are targeted to different skill levels:

- induction training for those new to SHS
- core skills for SHS
- specialist and advanced skills for client groups
- training for managers and emerging leaders
- qualifications and recognised prior learning.

## NSW SHS Workforce Capability Framework

The NSW SHS Workforce Capability Framework<sup>2</sup> (Capability Framework) describes the broad capabilities required for different levels of the NSW SHS workforce (frontline staff and practitioners, senior officers and practitioners, managers and lead practitioners, CEO, leadership and board members). The purpose of the Capability Framework is to assist the SHS workforce to:

- support client outcomes through targeted skill development
- understand the capabilities required to work at their current level / a different level
- identify opportunities for training and development or any gaps in skills, knowledge and behaviours that need addressing
- provide evidence of Recognition of Prior Learning when applying for entry into courses
- allow for cross sectoral career pathways
- allow for movement between types of service delivery and types of clients
- increase collaboration across different organisations.

The Capability Framework also contains a range of tools that can be used by organisations, managers and practitioners.

## Communities of Practice

The Industry Partnership supports Communities of Practice (CoPs) for specialised responses in key areas (Aboriginal, CALD, LGBTQI, Together Home, Assertive Outreach, DFV, Youth). CoPs promote sharing of best practice; collaboration to address issues across the sector; contribution to reports and advocacy opportunities; discussion of areas of interests; and connection with other SHS sector professionals.

## Client satisfaction survey

The SHS Sector Client Satisfaction Survey has been run by the Industry Partnership and the NSW Community Housing Industry Association (CHIA) since 2018. The survey measures satisfaction with services and client outcomes from accessing SHS.

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<sup>2</sup> Homelessness NSW (2018) *NSW Specialist Homelessness Services Workforce Capability Framework*, Sydney, Australia.

## JWA support

The IP manages a JWA support service for service packages that are being delivered through JWAs. This support is provided through Connect Consulting and includes support with:

- contract changes and managing disputes and breaches
- assistance with take-overs, wind downs, and changes to organisational structures
- opportunities to source financial advice, legal advice, strategic planning including advice related to service viability or issues or questions related to the future of service packages
- assisting Board members, management committees and/or staff with Fair Trading obligations
- identifying opportunities to partner with other organisations
- in some cases, negotiating with DCJ.

JWAs are structures for collaboration between organisations for the provision of services and can range from informal alliances, through to the joint delivery of a project. A JWA is the document that covers the roles and responsibilities of each party. Agreements may be non-financial and/or financial depending on their purpose. JWAs may also be formed for the purpose of contracting with government agencies. The three types of working arrangements most commonly seen with homelessness service providers are alliance, consortium and joint venture.<sup>3</sup>

## Sustainability coaching

The IP offers a range of tools and programs to assist NSW SHS organisations with business continuity and to ensure ongoing high quality provision of services for clients and communities. This includes planning for service sustainability, assistance with funding agreements and contracts (including JWAs and subcontracting).

## SHS Network meetings

The IP convenes the biannual NSW Homelessness Network Meeting for CEOs and other SHS staff of Service Support Fund organisations, and lead and sole agents. The meeting helps to facilitate greater cross sector communication, networking and feedback between staff across the sector.

## COVID-19 initiatives

The Homelessness NSW website provides a range of resources to support SHS while working through the COVID-19 pandemic. These include the latest public health advice, DCJ policies and announcements, resources for staff wellbeing, working from home templates, and resources for service providers. In addition, Homelessness NSW has e-learning resources, webinars and COVID-19 training.

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<sup>3</sup> NSW Department of Family and Community Services (2016) Joint Working Agreement Guide for Homelessness Services, Sydney, [https://www.housing.nsw.gov.au/\\_data/assets/pdf\\_file/0005/387131/Final-Joint-Working-Agreement-Guidelines-for-Homelessness-Services.pdf](https://www.housing.nsw.gov.au/_data/assets/pdf_file/0005/387131/Final-Joint-Working-Agreement-Guidelines-for-Homelessness-Services.pdf).

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## 4. What are the characteristics of workers in the NSW homelessness services sector?

- The NSW homelessness sector workforce is largely female (78%) and has few workers aged 24 years and younger; 17 per cent of workers speak a language other than English at home; and 8 per cent of workers identify as Aboriginal or Torres Strait Islander.
- The NSW homelessness sector workforce is highly educated, with 51 per cent holding a Bachelor Degree or higher, and one in four currently undertaking a formal course of study related to their work.
- Most are employed on a permanent ongoing basis (73%) and work full-time (77%).
- Sector staff usually work with a breadth of different client groups (seven on average), most commonly with Aboriginal and Torres Strait Islander people, people with mental health problems, CALD people, and people sleeping rough.
- The sector workforce is stable and attracts few new entrants; 60 per cent of workers have been in the sector for five years or longer. Only 15 per cent have been in the sector for 12 months or less.
- Lack of prospects for job progression and low pay may be impacting the sector's ability to attract new staff.
- Overall, the data has implications for the sustainability of the NSW Homelessness sector workforce. Even though most workers do not intend to retire in the next five years, the low proportion of young workers and new entrants to the sector workforce indicates that there may be a need to attract more and younger workers into the sector to ensure workforce sustainability in the longer term.

#### 4. What are the characteristics of workers in the NSW homelessness services sector?

This chapter addresses the evaluation question: What are the characteristics of workers in NSW homelessness services? Information is based on the responses received to the 2021 NSW homelessness sector Workforce Survey (the Survey).

### 4.1 Age, gender and cultural diversity

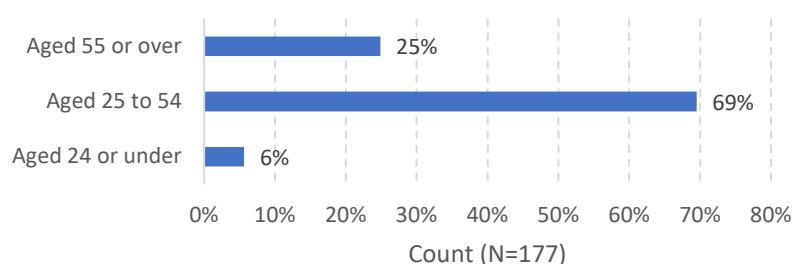
Most survey respondents (78%) were female, born in Australia (82%) and spoke only English at home (83%); 8 per cent identified as Aboriginal and Torres Strait Islander (Table 2).

Table 2: Survey respondent characteristics

	%	Count
<b>Gender</b>		
Man	21%	43
Woman	78%	159
Non-binary	1%	2
<b>Total</b>	<b>100%</b>	<b>205</b>
<b>Aboriginal and Torres Strait Islander identifying</b>		
Yes	8%	19
No	91%	212
I don't want to answer this	1%	3
<b>Total</b>	<b>100%</b>	<b>234</b>
<b>Language spoken at home</b>		
English only	83%	170
Language other than English	17%	34
<b>Total</b>	<b>100%</b>	<b>204</b>
<b>Country of birth</b>		
Australia	82%	165
UK	4%	8
New Zealand	2%	4
Other	12%	25
<b>Total</b>	<b>100%</b>	<b>202</b>

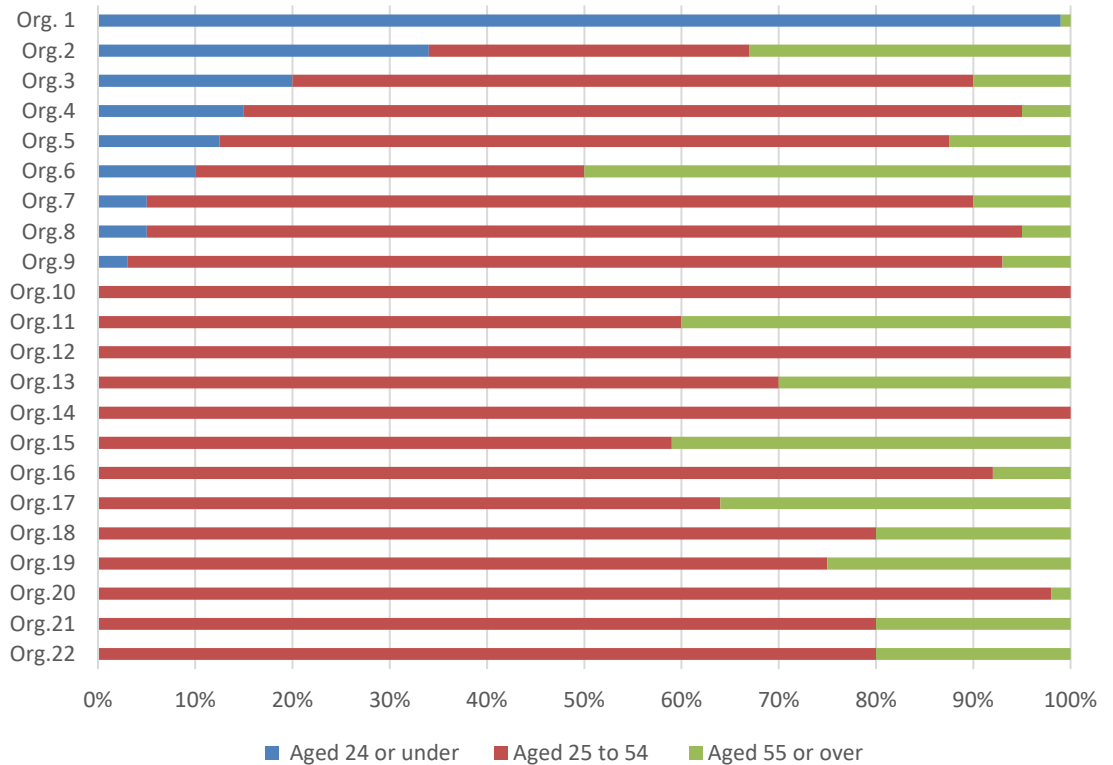
The survey asked respondents for their age (Figure 1), and also asked managers to provide information on the age profile of their program's workforce (Figure 2). Both sets of responses show that the NSW homelessness sector workforce is largely in the 25 to 54 year age group, followed by those aged 55 years and over. Only a small proportion of the work force is aged under 24 years.

Figure 1: What is your age group?



4. What are the characteristics of workers in the NSW homelessness services sector?

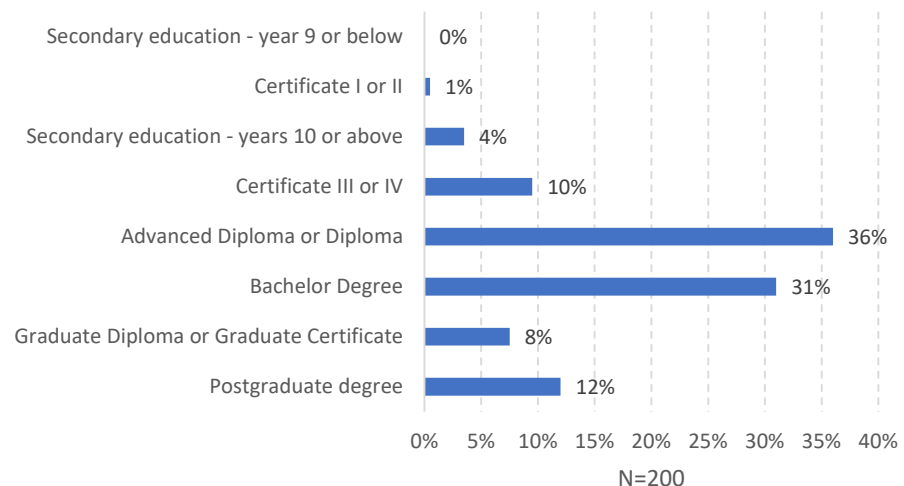
Figure 2: Approximately what percentage of employees in your program are in the following age groups?



### 4.2 Qualifications and level of experience

The sector has a highly educated workforce, with 36 per cent having an Advanced Diploma or Diploma, and a further 51 per cent a Bachelor Degree or higher (Figure 3). Most (69%) of the workforce had achieved their highest qualification in the past 10 years and 25 per cent were currently undertaking formal study related to their field of work. 59 per cent of respondents thought that their qualification had prepared them well or extremely well to work with people at risk of or experiencing homelessness (Table 3). A majority of respondents had qualifications in the fields of community services, youth work or counselling (46%), social science and social policy (13%) and social work (12%) (Figure 4).

Figure 3: What is the highest qualification you have completed?



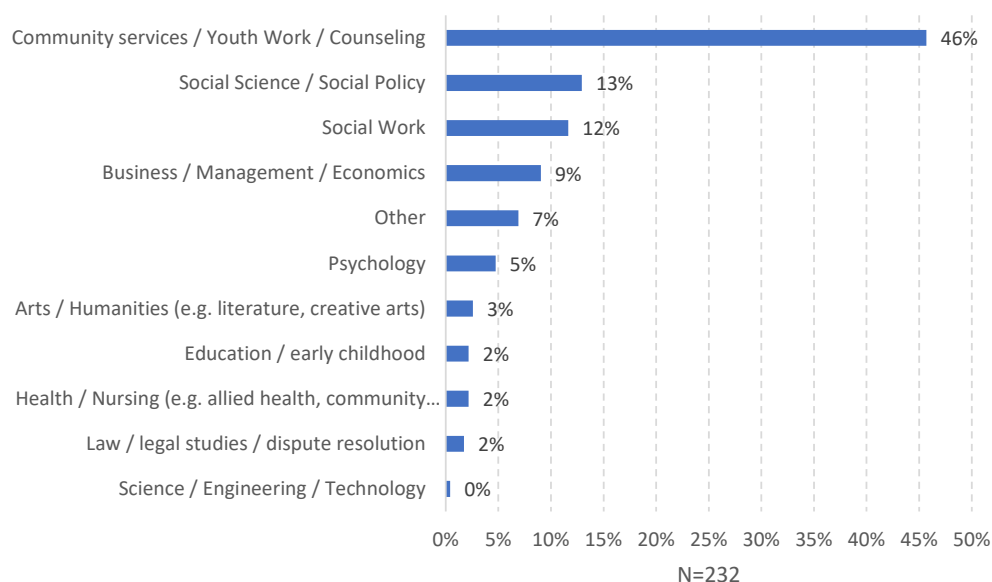


4. What are the characteristics of workers in the NSW homelessness services sector?

Table 3: Sector qualifications

Answer	%	Count
<b>How long ago did you complete your highest qualification?</b>		
In the last 10 years	69%	136
More than 10 years ago	31%	62
<b>Total</b>	<b>100%</b>	<b>198</b>
<b>Are you currently undertaking a formal course of study (study leading to a Certificate, Diploma or Degree)?</b>		
No	73%	146
Yes, I am undertaking studies related to the type of work I am doing	25%	50
Yes, but my studies are not related to the work I am currently doing	2%	3
<b>Total</b>	<b>100%</b>	<b>199</b>
<b>In your opinion, how well did your qualification prepare you to work with people at risk or experiencing homelessness?</b>		
Extremely well	19%	37
Very well	39%	78
Moderately well	35%	70
Not so well	6%	11
Not at all	2%	4
<b>Total</b>	<b>100%</b>	<b>200</b>

Figure 4: In which broad field of study was your highest qualification?



### 4.3 Employment and roles

Most workers (73%) in the NSW homelessness sector are employed on a permanent ongoing basis and most (77%) work full-time (Table 4).

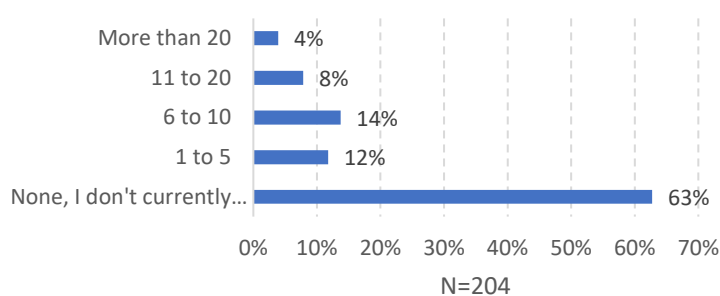
Table 4: Sector employment

Answer	%	Count
<b>On what basis are you employed?</b>		
Permanent or ongoing	73%	150
Fixed-term contract	25%	51
Casual	2%	4
Volunteer	0%	0
<b>Total</b>	<b>100%</b>	<b>205</b>
<b>On average, how many hours a week do you work in this job?</b>		
35 hours or more (full-time)	77%	158
Less than 35 hours (part-time)*	23%	47
<b>Total</b>	<b>100%</b>	<b>205</b>

\* Those employed for less than 35 hours per week worked on average 26 hours per week (median 30).

Most respondents (63%) did not supervise or manage SHS staff, 36 per cent managed between one to 20 staff, and 4 per cent managed more than 20 staff (Figure 5).<sup>4</sup>

Figure 5: How many SHS staff do you currently supervise or manage?



Most workers have been employed in the NSW homelessness sector for a long time. 29 per cent had been in the sector for 10 years or more, and a further 31 per cent for five to 10 years (Figure 6). Data on the time workers had been in their current role shows that there is a tendency for workers to move around within the sector. Approximately a quarter (27%) had been in their current role for less than 12 months, 32 per cent for two to less than five years, and 27 per cent for five to less than 10 years. Only 6 per cent of workers had been in their current role for 10 years or more (Figure 6). Nonetheless, most workers (72%) hope to remain in their current role for the next 12 months or be in a different role within the same organisation (18%) (Figure 7). The survey asked those who intended to leave the NSW homelessness sector in the next 12 months for their reasons. Lack of prospects for job progression was the main reason (30%), followed by low pay (15%), poor job security (11%) and COVID-19 related issues (11%) (Figure 8).

<sup>4</sup> These figures may reflect the break down of survey responses in terms of responses received from managers versus practitioners and are not suitable to generalise about the entire NSW SHS workforce.

4. What are the characteristics of workers in the NSW homelessness services sector?

Figure 6: Time in sector and time in current role

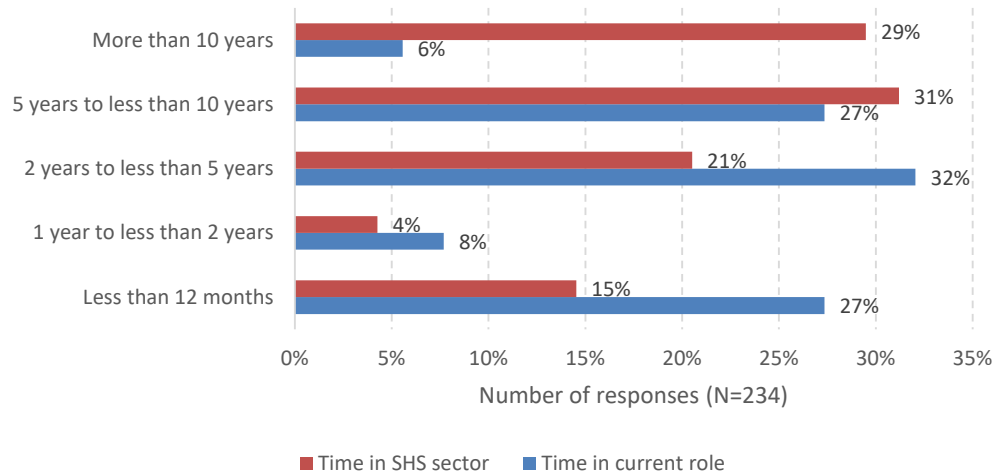


Figure 7: Where do you hope to be working this time next year?

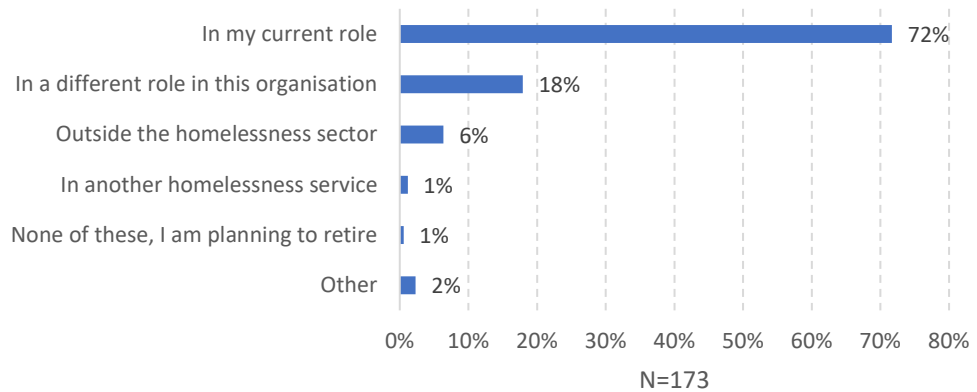
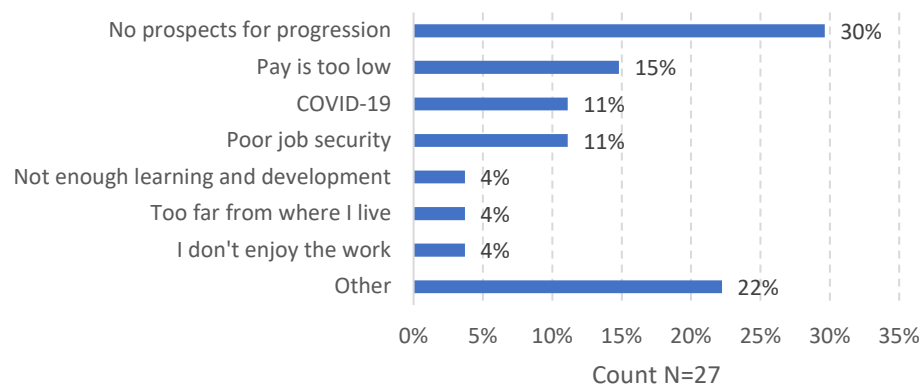


Figure 8: What are the main reasons you are hoping to leave the SHS\*



\* Note: respondents were asked this question if they answered, 'outside the homelessness sector' or 'other' to the question 'Where do you hope to be working this time next year?'

When asked whether they planned to retire in the next five years, 11 per cent of all respondents answered 'yes' (Table 5). The data is similar for those in leadership positions, with 16 per cent of managers indicating they intend to retire within the next five years.

4. What are the characteristics of workers in the NSW homelessness services sector?

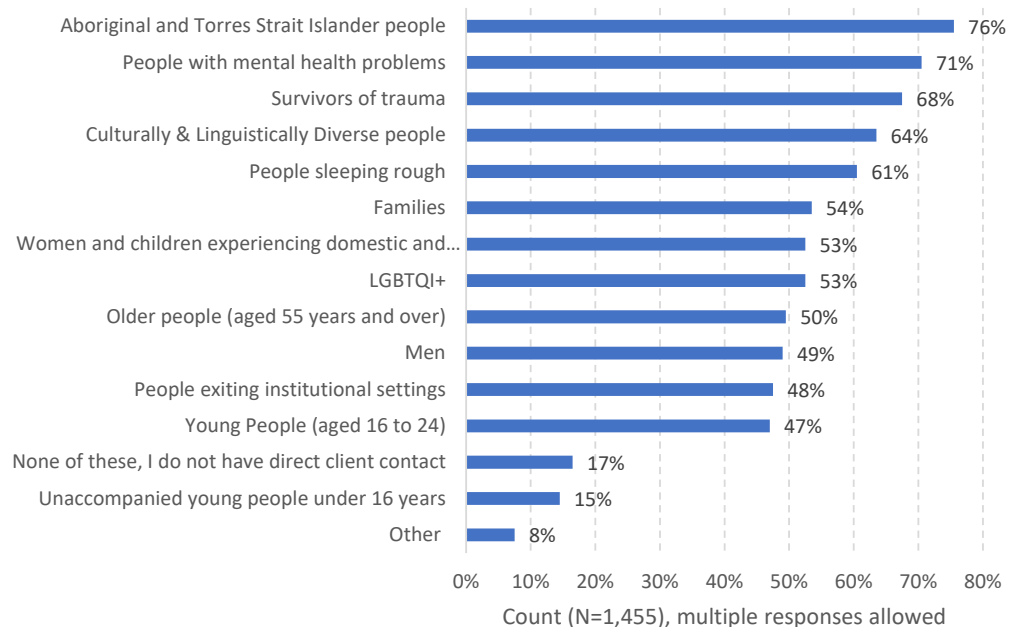
Table 5: Do you plan to retire in the next 5 years?

Answer	%	Count
<b>All respondents</b>		
Yes	11%	20
No	84%	147
Don't know	5%	9
<b>Total</b>	<b>100%</b>	<b>176</b>
<b>Managers</b>		
Yes	16%	3
No	68%	13
Don't know	11%	2
<b>Total</b>	<b>100%</b>	<b>19</b>

#### 4.4 Client cohorts NSW homeless sector staff work with

The survey asked respondents to identify what client groups they work with personally, and multiple responses were allowed. A very high proportion of respondents worked with Aboriginal and Torres Strait Islander people (76%), people with mental health problems (71%), CALD people (64%), and people sleeping rough (61%). What this data shows is that on average, each of the 200 individual respondents works with around seven different client groups.

Figure 9: What client groups to you personally work with?



#### 4. What are the characteristics of workers in the NSW homelessness services sector?

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Respondents identified several emerging client groups accessing services over the past 12 months. These include the following:

- people who are recently homeless due to employment loss from COVID-19
- young people at risk of or homeless; young people with more complex needs; and young people experiencing DFV and/or family conflict; young women

Young females (12-16 years) having family issues and family relationship breakdowns. In a majority of these situations one or both parents deny accepting any responsibility in the relationship breakdown. (practitioner)

Increased homelessness risk for young people living in family conflict/ DV from parents, particularly for those under 17 years of age. No access to alternative safe accommodation. (practitioner)

I have noticed on the Youth Team the clients accessing our service are younger than past years. We are seeing many 16 year old's requesting support.

- LGBTQI+ clients, including young and Aboriginal LGBTQI+ persons
- people experiencing complex mental health issues

Mental health issues seem to be more prevalent in recent years. (practitioner)

Yes, a lot of women are homeless and on the street due to mental health issues and are unable to get help for their mental health, due to no long term mental health units in the Far West, or find stable accommodation. (practitioner)

It has become evident that after the government initiative to accommodate rough sleepers into accommodation during COVID-19 lockdowns that many people who remain rough sleeping in Sydney/Inner West have significant mental health issues which are the main barrier to housing. They are untreated and getting the right type of assistance is very challenging due to having no address. Particularly difficult in the Inner West where we don't have a dedicated homeless health team with expertise and resources for this specialist work. (practitioner)

- older women (over 55)
- older men (over 55)
- people experiencing domestic violence that results in homelessness
- refugees and people without a visa.

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## 5. Sector profile and organisational sustainability across the NSW homelessness sector

- **Organisations in the NSW homelessness sector are diverse in terms of funding received, the number of staff employed, and geographic areas serviced.**
- **Services are concentrated in the greater Sydney area.**
- **Most organisations have an annual income of \$1 to \$5 million and most of that is NSW Government funding.**
- **Most staff are employed full-time, and most are on permanent contracts or fixed term contracts up to three years.**
- **Overall, the number of staff employed by organisations has stayed largely the same or increased slightly in the past year.**
- **An organisation's reputation, fringe benefits and flexible working hours are positives in terms of attracting new staff. However, a lack of applicants with the right qualifications or skills is an issue for many organisations.**
- **Many organisations have targets to employ people identifying as Aboriginal and Torres Strait Islander, people from CALD backgrounds, women, and people with lived experiences of homelessness.**
- **Most organisations provide a range of SHS services, most often a combination of case management, support to access housing and sustain tenancies, client advocacy, information, advice, and referral. Additionally, 43 per cent of responding organisations provided community housing.**

- **People sleeping rough, women and children experiencing DFV and Aboriginal and Torres Strait Islander people are specific client groups targeted by a high number of responding organisations.**
- **Respondents estimated that around 35 per cent of clients accessing services identify as Aboriginal or Torres Strait Islander.**
- **56 per cent of organisations are contracted to provide services to Aboriginal and Torres Strait Islander people.**
- **2 per cent of respondents are Aboriginal Community Controlled Organisations (ACCOs). 27 per cent of organisations provide Aboriginal specific services but are not contracted to do so, and the same proportion are contracted to provide Aboriginal specific services.**
- **Among the client groups practitioners work with, the most frequently identified are: Aboriginal and Torres Strait Islander people, people with mental health problems, survivors of trauma, culturally and linguistically diverse people (CALD) and people sleeping rough.**

This chapter answers the question: what are the characteristics of NSW homelessness services?

As at December 2021, there are 176 lead agencies in the NSW Homelessness sector that receive funding from DCJ. This increases to 241 agencies if subcontracted providers are added. Funding for each agency ranges between \$304,094 - \$126,658,386 per contract.<sup>5</sup>

## 5.1 Location of NSW homelessness services

The NSW homelessness sector provides services in metropolitan (42%), regional (40%) and rural (17%) areas (Figure 10). Many of these services are located in Sydney (16%) and south western Sydney (12%). Far fewer services are available in the Illawarra Shoalhaven (2%), far west NSW (3%), western NSW (4%) and Murrumbidgee (4%) areas (Figure 11).

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<sup>5</sup> This information was provided by DCJ via Homelessness NSW.



Figure 10: Does your program provide SHS services in metropolitan, regional or rural areas?

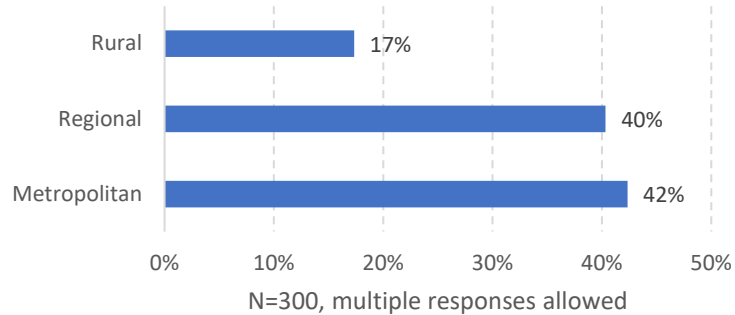
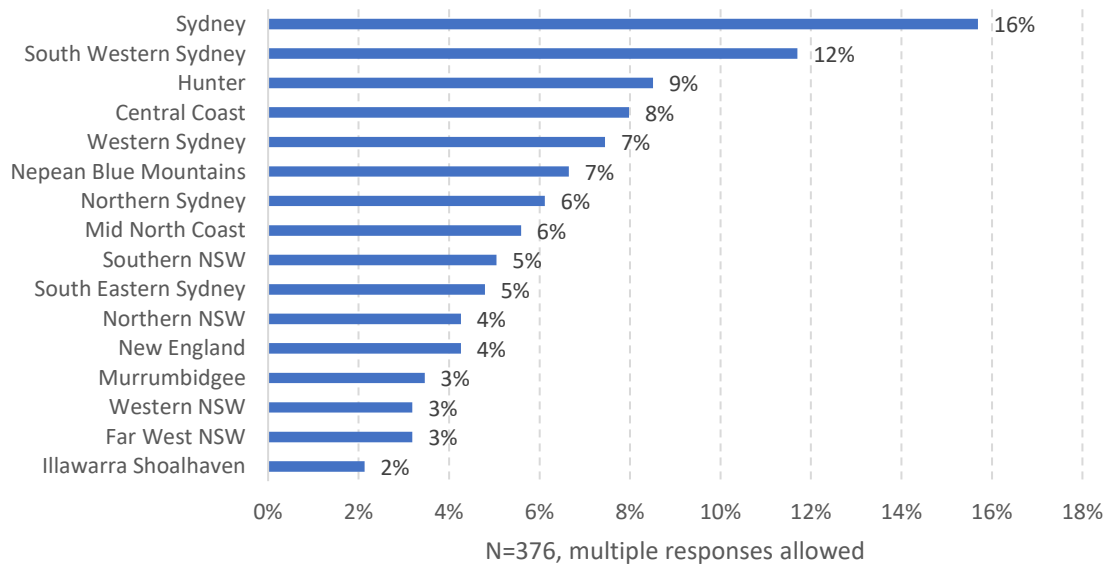


Figure 11: In which areas does your program provide SHS services?



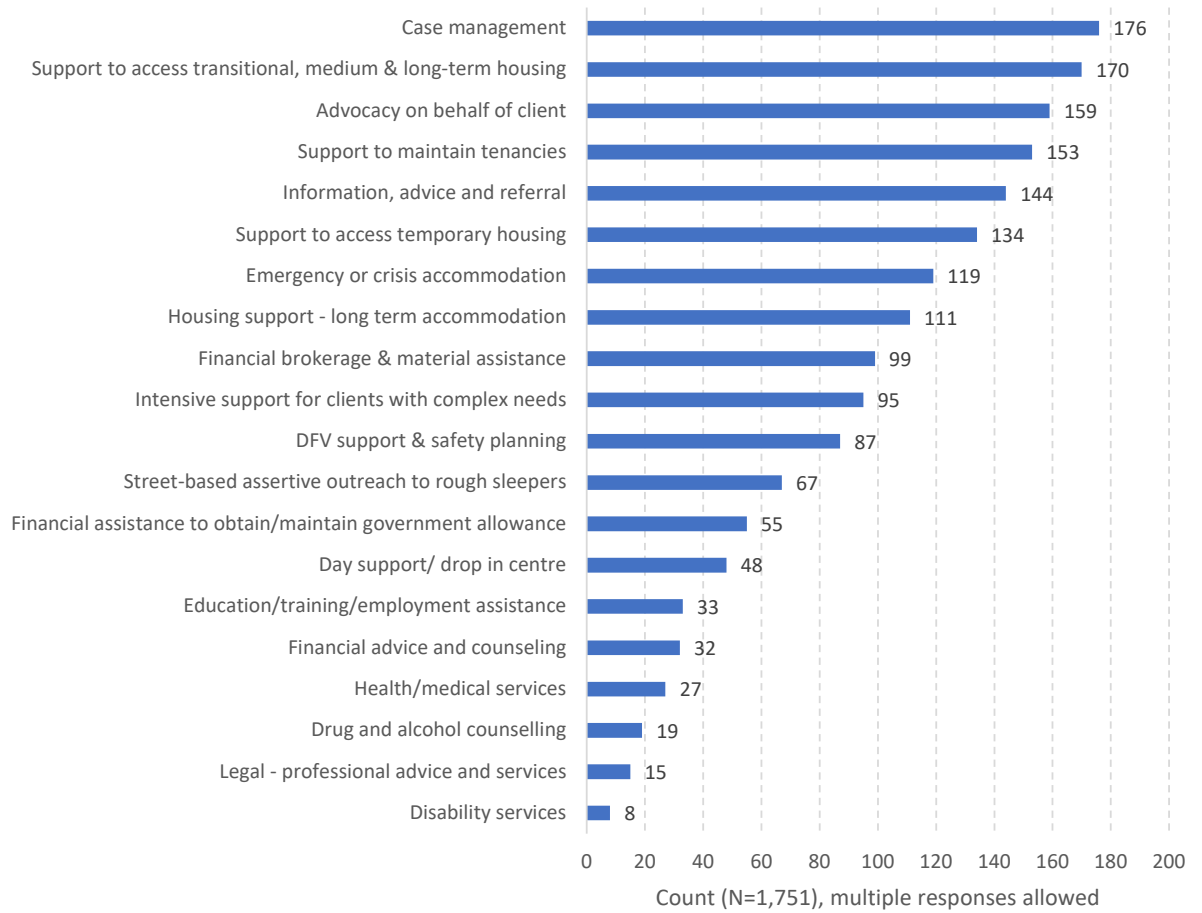
## 5.2 Types of services provided by NSW homelessness services

The survey question 'what is the main service or assistance your SHS provides?' received 1,751 responses from 203 individual respondents (Figure 12). This indicates that NSW Homelessness sector organisations see themselves as providing multiple 'main' services, which is around 8.6 services on average.

Most programs provide case management (87% of respondents), support to access transitional, medium- and long-term housing (84% of respondents), advocacy on behalf of the client (78% of respondents), support to maintain tenancies (75% of respondents) and information, advice and referral (71% of respondents).

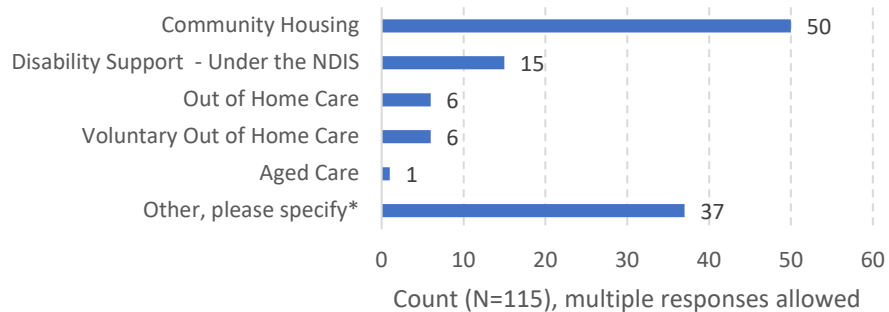
Far fewer organisations provide drug and alcohol counselling (9% of respondents), professional legal advice and services (7% of respondents) and disability services (4% of respondents) (Figure 12).

Figure 12: What is the main service or assistance your SHS provides?



In addition, 50 responding organisations also provided community housing, 15 provided disability support under the NDIS, six each provided out of home care and voluntary out of home care (Figure 13).

Figure 13: Additional services provided by NSW homelessness organisations



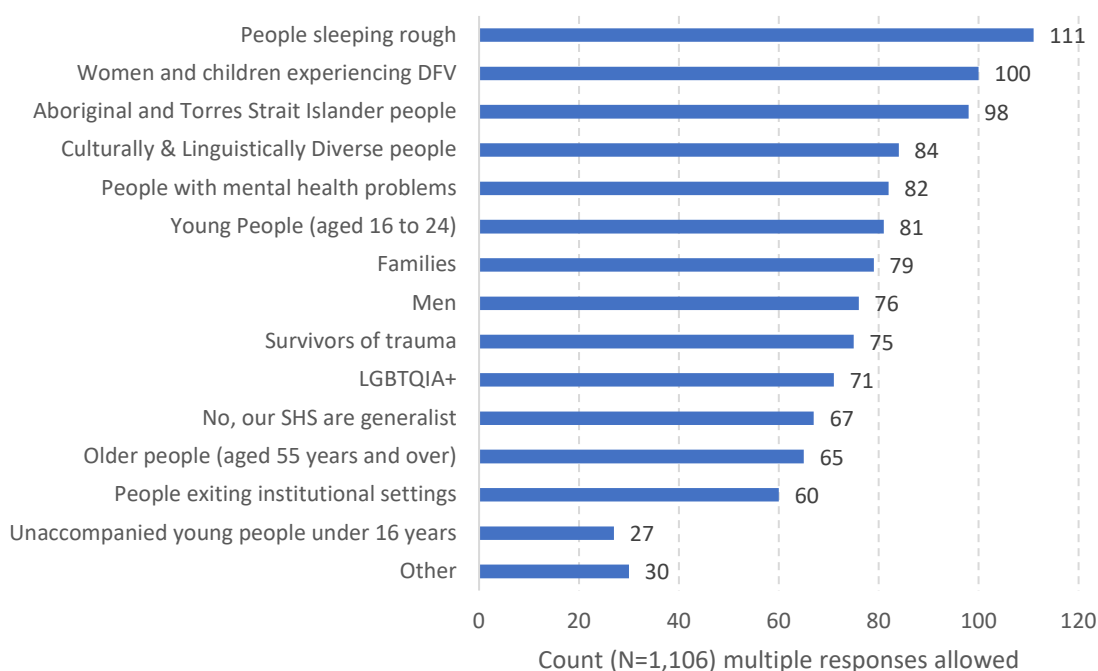
\* 'Other, please specify' responses included transitional housing, crisis accommodation and subsidised housing through the private market.

### 5.3 Client groups

The survey question ‘is your service targeted to one or more specific client groups?’ received 1,106 responses from 227 individual respondents (Figure 14). Of these, 67 organisations (30% of respondents) provided generalist homelessness services. Many organisations also provided services that were targeted to particular client groups. On average, organisations provided services to around five different client groups.

The most prominent target groups were people sleeping rough (49% of respondents), women and children experiencing DFV (44% of respondents), and Aboriginal and Torres Strait Islander people (43% of respondents). Few organisations targeted unaccompanied young people under 16 years of age (12% of respondents) (Figure 14).

Figure 14: Is your service targeted to one or more specific client groups?

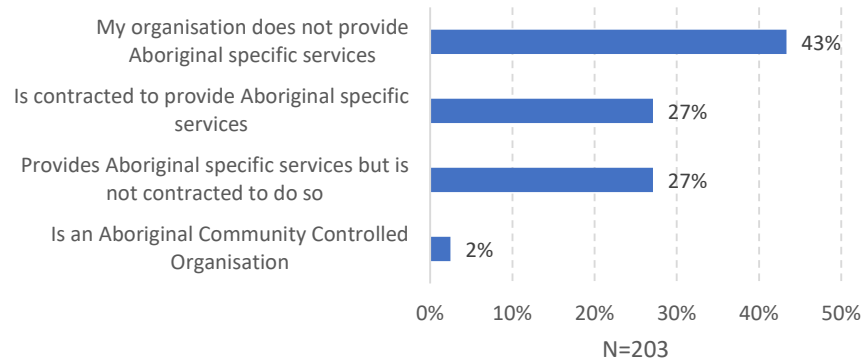


Respondents identified that around 35 per cent of clients accessing their services identified as Aboriginal and Torres Strait Islander, making this a primary client group. This is higher than the proportion of Aboriginal and Torres Strait Islander people accessing NSW SHS recorded by the AIHW for 2019–20, which is 30 per cent.<sup>6</sup>

All respondents were asked whether their organisation provides services to Aboriginal and Torres Strait Islander people. 43 per cent answered they do not provide Aboriginal specific services (43%); 27 per cent provide Aboriginal specific services but are not contracted to do so; and a further 27 per cent are contracted to provide Aboriginal specific services (Figure 15). ACCOs made up only 2 per cent of respondents.

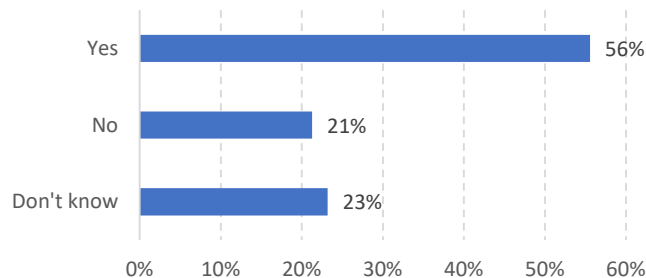
<sup>6</sup> Source: AIHW Specialist Homelessness Collection: Data Tables: Specialist homelessness services 2019-20, Table Indigenous.2: Client and support periods by Indigenous status and state and territory, 2019-20, AIHW, Canberra, <https://www.aihw.gov.au/reports/homelessness-services/specialist-homelessness-services-annual-report/data>.

Figure 15: Does your organisation provide services to Aboriginal and Torres Strait Islander people?



We asked all respondents whether their program is contracted to provide SHS services to Aboriginal and Torres Strait Islander people; 56 per cent responded yes, 21 responded no, and 23 per cent did not know (Figure 16). The discrepancy with data from Figure 15, where only 27 per cent of respondents answered that their program was contracted to provide Aboriginal specific services may be due to the wording of the question. Figure 16 shows respondents whose programs are contracted to provide services to Aboriginal and Torres Strait Islander people, though not all of these programs are *specific* to Aboriginal and Torres Strait Islanders.

Figure 16: Is your program contracted to provide SHS services to Aboriginal and Torres Strait Islander people?



## 5.4 Funding

The Survey asked managers about the amount of revenue their organisation received in the last financial year. Most responding organisations received between \$1 to \$5 million, and five organisations received over \$10 million in funding (Figure 17). Primarily, the main source of income was NSW Government funding (22 organisations), while four organisations had Federal Government funding as their main income source, and three rely on philanthropic funding (Figure 18).

Figure 17: Last financial year, what was the annual revenue of your entire organisation?

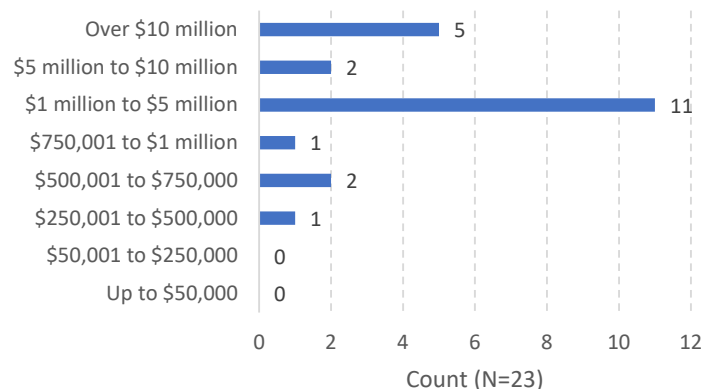
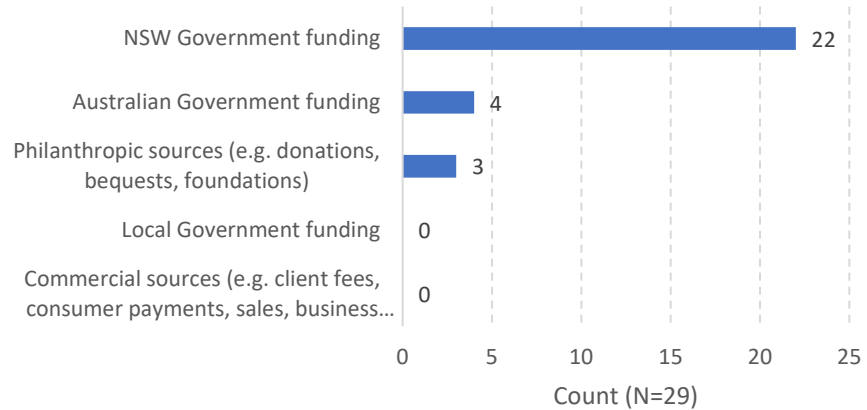


Figure 18: In the last financial year, what was the main source of income for your organisation in NSW?

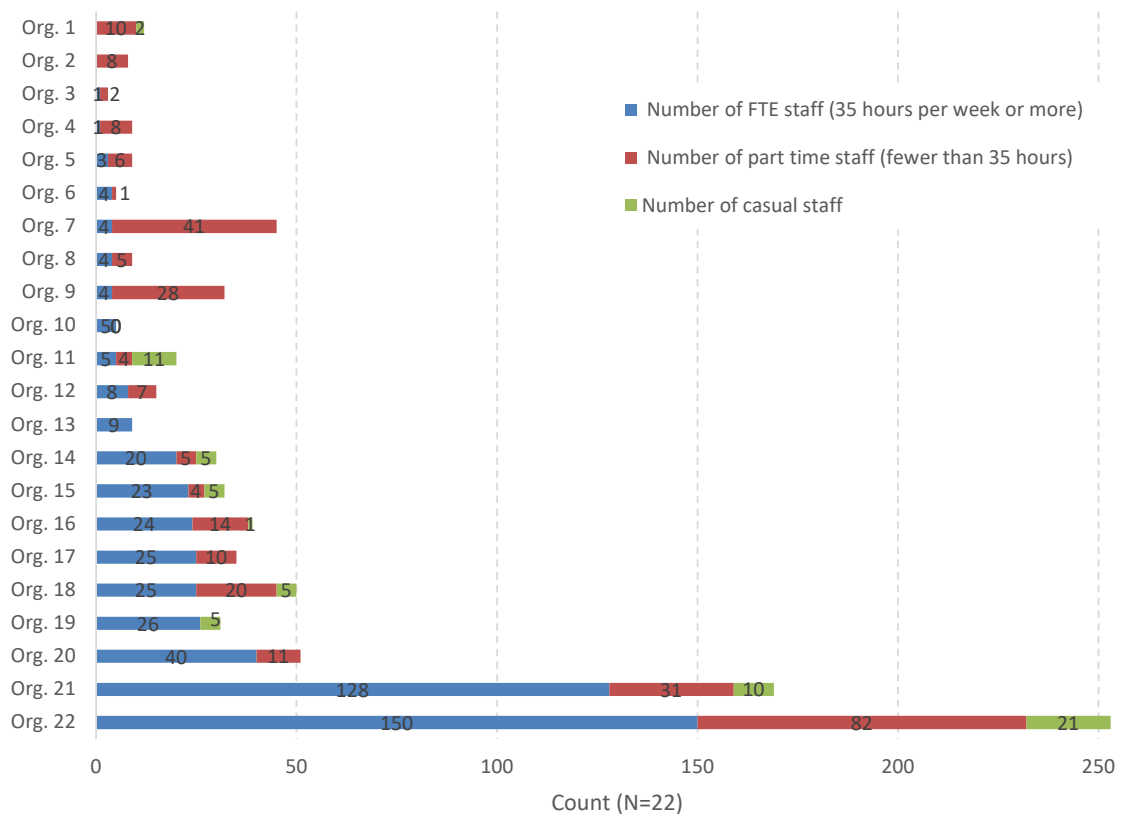


Note: Respondents could select more than one option if two funding sources were equally important.

## 5.5 Staffing

NSW homelessness sector organisations vary greatly in size, with staff numbers ranging from three staff to 253 staff (Figure 19). Because of the great variation in size, and because organisations 21 and 22 are outliers on this measure, median numbers are a better indicator of 'typical' size. The median number of staff was 25, and comprised of 6.5 full-time and 7.5 part-time staff (Table 6).

Figure 19: During the last pay period, how many paid staff did you program employ in NSW on a full- or part-time basis?



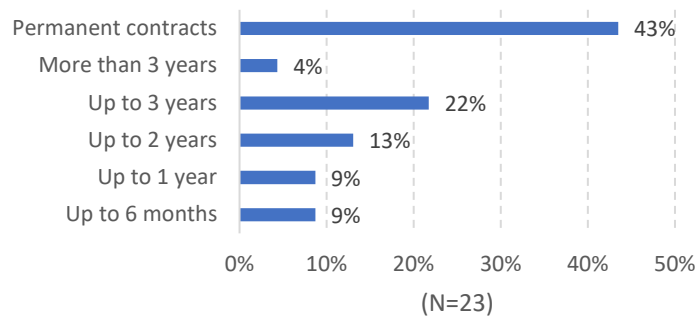
Note: Figures are by head count for paid staff, casuals and fixed term staff directly employed by the program in NSW (not contractors, labour hire or volunteers).

Table 6: Number of staff employed

	Minimum	Maximum	Mean	Median
Number of full-time staff (35+ hours)	0	150	20.36	6.5
Number of part-time staff	0	82	12.38	7.5
Number of casual staff	0	21	2.6	0
<b>Total staff</b>	<b>3</b>	<b>253</b>	<b>40</b>	<b>25</b>

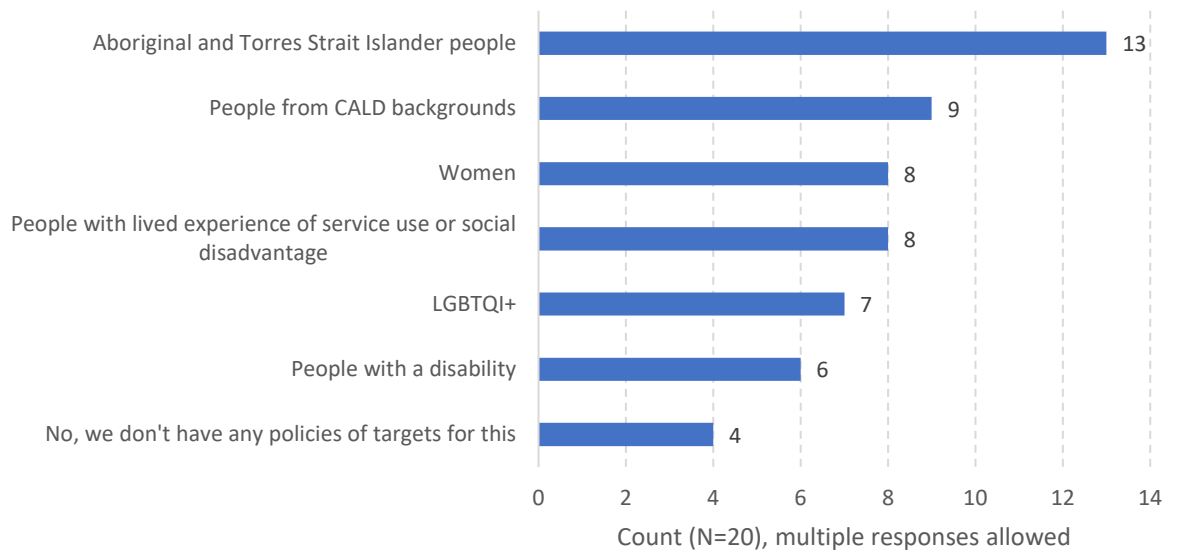
Most programs employ staff on permanent contracts (43%) or fixed term contracts up to three years (22%) (Figure 20).

Figure 20: What is the usual length of fixed term contracts on offer?



Many organisations have policies or targets relating to the employment of particular groups. 13 out of the 20 responding organisations had targets for Aboriginal and Torres Strait Islander peoples, nine for people from CALD backgrounds, eight for women, and eight for people with lived experience of service use of social disadvantage (Figure 21).

Figure 21: Does your program have policies or targets relating to employment of any of these groups?



Survey data indicates that the size of the NSW homelessness sector workforce remained relatively stable in 2020–21. 38 per cent of programs answered their workforce had stayed roughly the same and another 38 per cent answered that their total number of staff had increased a little (Figure 22). Where there had been staff increases, this often was due to additional funding (for new or existing programs) or the expansion of existing services (Figure 23).

Figure 22: Compared to this time last year, has the total number of staff in your program increased, decreased, or stayed the same?

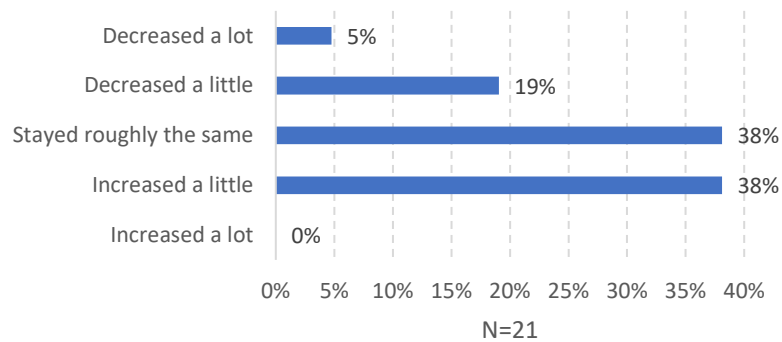
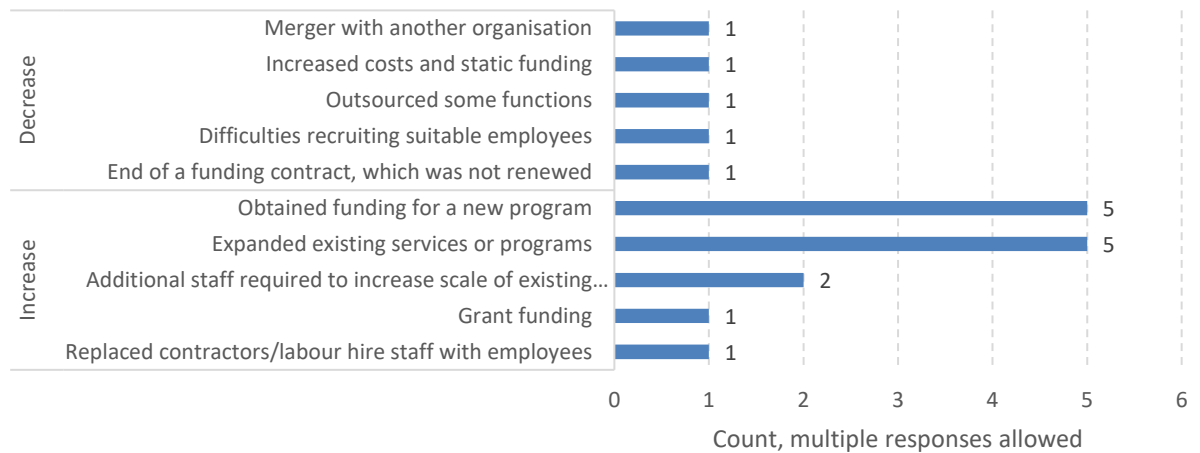
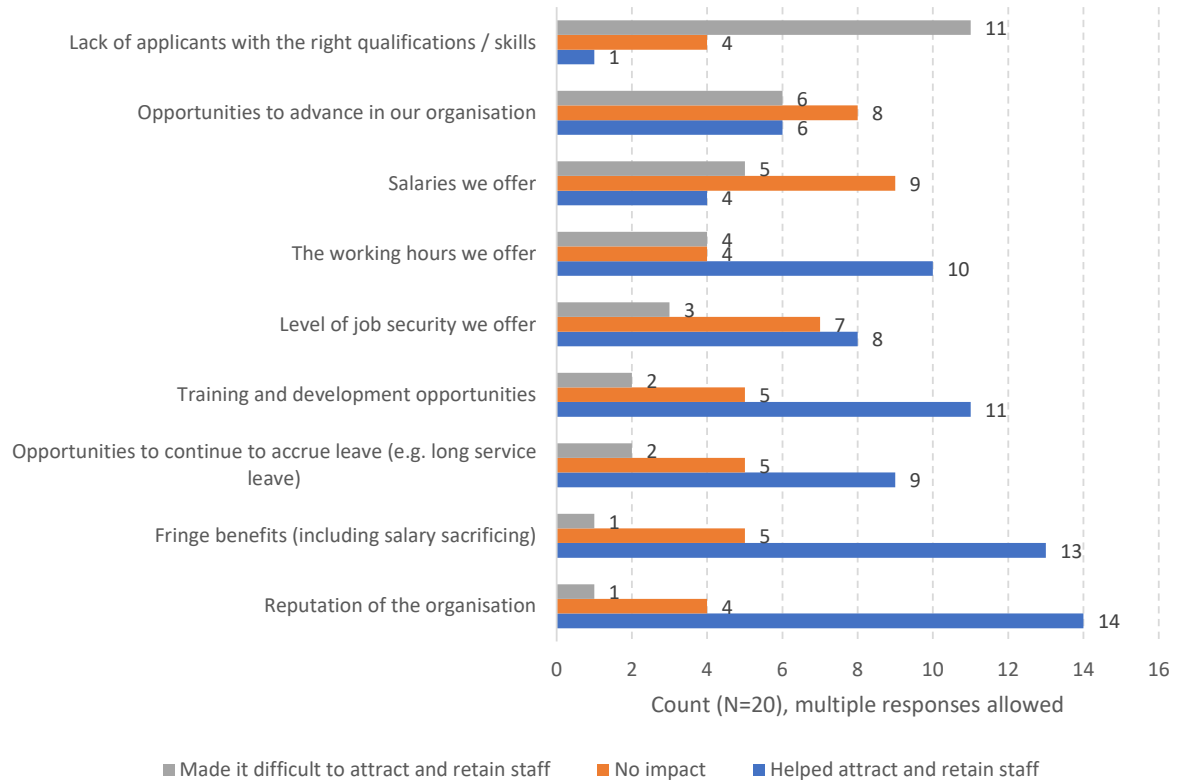


Figure 23: What were the main reasons for the increase/decrease in the number of staff?



Interestingly, the lack of applicants with the right qualifications or skills was the most commonly cited reason that programs struggled to recruit and retain staff. This was followed by a lack of opportunities to advance in the organisation, and the salaries offered (Figure 24). Factors that helped to attract and retain staff were the reputation of the organisation, fringe benefits, and the training and development opportunities offered.

Figure 24: Over the last 12 months, how have the following factors affected your program’s capacity to recruit and retain staff?



The answers to the question ‘what would help improve the capacity of your program to attract and retain staff?’ further illuminate the factors that attract people to or prevent them from working in the NSW homelessness sector. Responses included the following:

The need for more funding to pay higher wages that better reflect the workload, or better enable organisations to manage their staff’s workload, was the issue most commonly raised by respondents.

Greater funding to navigate the extensive and increasing workload due to exponential growth in demand without appropriate funding increases to meet this demand. Recognition by the health/mental health department to recognise the unpaid amount of mental health frontline support the service offers without the funding or recognition of the work undertaken in order for social workers in the team to have greater professional development and recognition. (manager)

Funding certainty. Increased wages. (manager)

Appropriate funding to pay better wages. (manager)

Increased funding to attract excellent, qualified staff with increased salaries, reduce caseloads with more staff, and better training opportunities. (manager)

Funding - had to draw on other funding sources outside of SHS funding to continue a newly introduced position initiated through philanthropic funds, and continuation of this role is precarious. Also, more flexibility / open mindedness re: use of core funds e.g., it would be great to feel well supported by funding bodies to invest in things that are used as incentives within the private sector to retain, invest in, celebrate and thank staff, and to be creative in how we do this - but it all feels far more murky, unclear and not well endorsed. (manager)



More funding, so that staff can have time out to attend conferences, hold events and do community engagement. So busy with general participant work there is not time for innovation or research or engagement. (manager)

Ability to provide full time work. (manager)

Several respondents commented on the importance of good processes for recruitment and training and providing options for staff to progress their careers.

We generally don't struggle to find and retain staff - most go on to other opportunities in the organisation such as leadership roles [or the] Together Home program, which we see as positive, of the new recruitment we have done we have a healthy panel of new recruits and our team is well regarded with a good reputation. (manager)

Recruitment is really the key of attracting staff. Good support from induction to the time staff are working also impact, as well as the ongoing support to them via regular supervision, debriefing and access to external supervision and support. (manager)

The survey also asked managers whether staff with particular skills, capabilities or qualifications were difficult to recruit or retain? Salaries and wages were a factor in recruitment, which is consistent with the previous section that showed 15 per cent of workers intended to leave the sector due to low pay (Figure 8). Programs sometimes struggle to attract well qualified, experienced staff, with specialist skills, particularly as there is competition from other fields (e.g., government and health sectors), which offer higher salaries.

Specific skills and roles that were sometimes difficult to recruit for included mental health and counselling, alcohol and other drug counselling, treatment related skills, assertive outreach, senior case workers and those with managerial and supervision skills, case coordination, Out of Home Care, managing clients with complex needs, specific skills and qualifications related to DFV, and fundraising. Answers included:

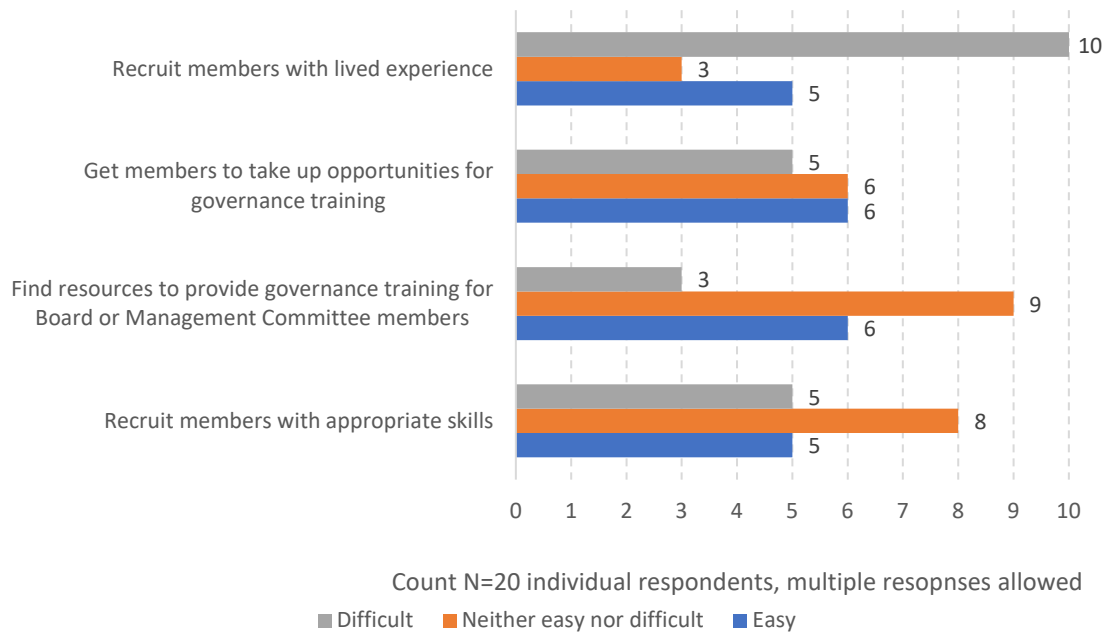
[It] can be challenging to find well qualified and experienced staff and in those instances we sometimes need to look at sponsoring a migrant applicant who can bring skill and expertise to the position. (manager)

Overall, our SHS has 5 CALD staff, which is a higher clientele demographic in Northern Sydney SHS and this works well. We have recently had an Aboriginal staff member move on to another role within the organisation - but when we do try to recruit, experience (and qualifications) usually makes it difficult to justify the appointment over someone more suitably experienced. With Aboriginal staff we usually recruit at Diploma level as we find this is easier to obtain - with relevant experience - but our program manages extremely complex clients - many whom pose risk after leaving prison etc - we need really well-trained staff to deal with this and the sector does not pay that well. When we do lose staff, it is usually to Government and Health roles which pay more to do less. As an organisation if we hired less staff in order to increase salary, we would be at risk of not being able to meet community need and KPIs - ultimately though our service works with a higher volume than we are funded for. (manager)

We were seeking a Child and Youth therapist part time last financial year when we had some extra COVID funding but found it difficult. Still wish to come to an arrangement so our children in the refuges have direct and immediate access to specialists as well as some extra support for staff. More appropriately qualified (social sciences degrees preferred) Aboriginal identifying Case Managers are required but we have been challenged to recruit particularly for Western Sydney and Wilcannia. (manager)

Half of the responding organisations found it difficult to recruit members with lived experience to their Board or Management Committee. A quarter of responding organisations found it difficult to get members to take up opportunities for governance training or to recruit members with appropriate skills (Figure 25).

Figure 25: How difficult is it to recruit for the Board or Management Committee?



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## 6. What are the priority training areas across the NSW homelessness sector workforce?

- **Staff skills and capabilities largely meet the needs of the sector, though there is room for improvement, particularly in relation to cultural competence.**
- **Managers' training priorities for staff are to equip them for working with: people with mental health needs, Aboriginal and Torres Strait Islander people, LGBTQI+ people, victim survivors of DFV, and people vulnerable to AoD misuse. Training priorities for specialist skills are advanced mental health and cultural competence.**
- **Managers identified strategic planning and governance management for the community sector as the key priority for skills development for their leadership team. Training and mentoring for emerging leaders are a priority.**
- **Managers indicated that needed additional training is often not available through the MTS Training Calendar (29%).**
- **Practitioners' priorities for management and leadership training were professional and clinical supervision for managers, building workplace culture, and emotionally intelligent leadership.**
- **Practitioners' training priorities were cultural competence training, access to training in regional areas, more availability of training for advanced skills, and leadership, career development and accredited training.**

This chapter answers the questions ‘what are the priority training areas across the NSW homelessness sector workforce?’ and ‘how can the L&D and Workforce Capability Frameworks be strengthened?’

## 6.1 Staff skills and capabilities

Managers thought that the skill level of staff meets their program’s needs to a great extent (65%) or mostly meets the needs of the program (35%).

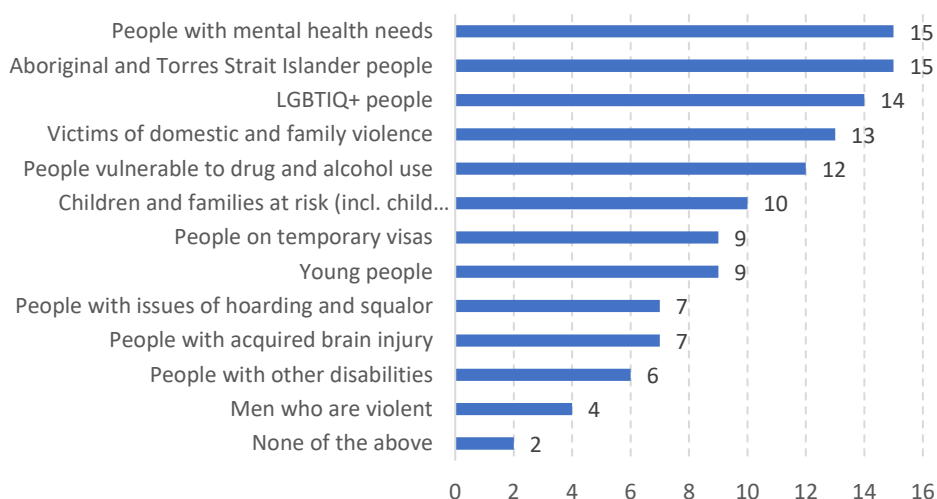
Table 7: To what extent do you think the skill level of your staff meet the needs of the program?

Answer	%	Count
To a great extent	65%	13
Mostly	35%	7
Somewhat	0%	0
Not at all	0%	0
<b>Total</b>	<b>100%</b>	<b>20</b>

## 6.2 Manager priorities for skills development

In terms of working with particular client groups, managers identified the following as top priorities for skills development for their staff: people with mental health needs (15 responses), Aboriginal and Torres Strait Islander people (15), and LGBTQI+ people (14). Specialist and core skills in working with victims of DFV (13) and people vulnerable to AoD use (12) were also prioritised (Figure 26). The top two priorities for specialist skills were working with specialist and advanced mental health (16) and cultural competency (14). Workforce development and identifying emerging leaders, establishing a culturally safe environment for Aboriginal staff, and trauma informed practice were each identified as priorities by 13 respondents.

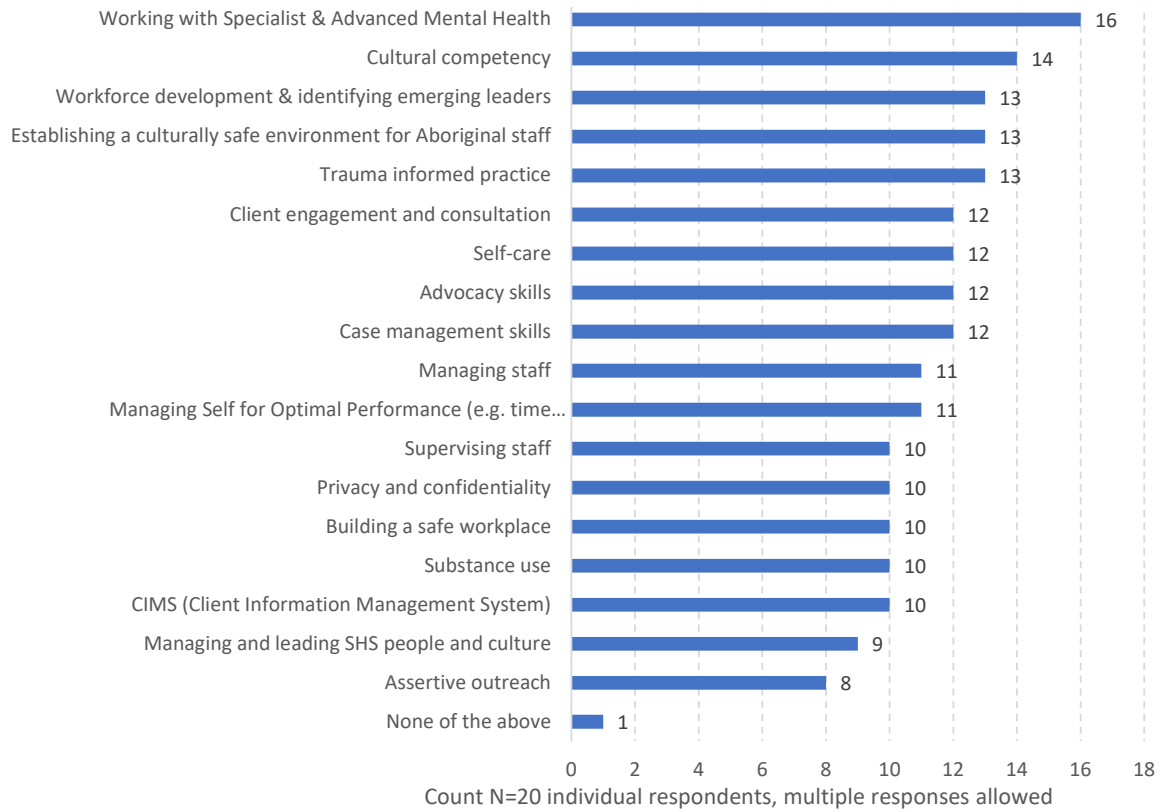
Figure 26: Is it a priority for your SHS staff to develop skills to work with any of these client groups?



Count N=20 individual respondents, multiple responses allowed

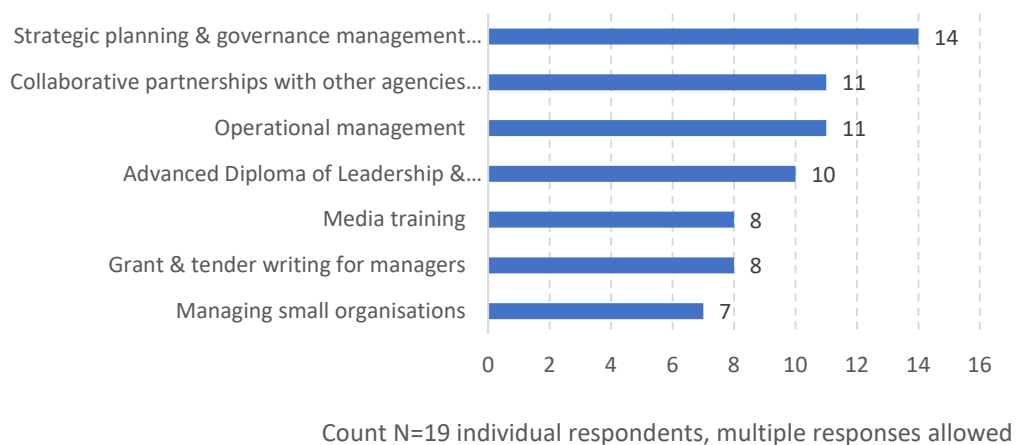
6. What are the priority training areas across the NSW homelessness sector workforce?

Figure 27: Is it a priority for your SHS staff to develop skills in any of these core and specialist areas?



Managers identified strategic planning and governance management for the community sector as the key priority for skills development for their leadership team (14 responses). This was followed by collaborative partnerships with other agencies, and operational management (11 responses each) (Figure 28).

Figure 28: Is it a priority for your leadership team to develop skills in any of the following areas?



6. What are the priority training areas across the NSW homelessness sector workforce?

Managers thought program staff could benefit from additional training in the following areas:

- leadership training and mentoring
  - Training for emerging leaders in the sector. (manager)
  - Leadership training, moving from case worker to management. (manager)
- financial literacy and data analysis
  - I believe data and analytics training would be key for our organisation and the broader sector. (manager)
- advanced mental health skills
  - Working therapeutically with dual diagnoses. (manager)
  - Dialectical behavioural therapy (DBT), motivational interviewing, complex trauma. (manager)
- working across complex service systems
- understanding the NDIS
  - ... understanding the NDIS as many clients have need or NDIS approval with inadequate supports to sustain tenancies.
- advanced case management skills.
  - Aboriginal cultural communication/competence, trauma and impacts on the brain and on behaviour in young people, difficult conversations, team building and time management (when there is not time!) for case workers. (manager)

Managers indicated that this additional training often was not available (29%). Where it was available, additional training was sourced through the MTS Training Calendar (18%) or from sources external to the MTS Training Calendar (24%), and sometimes through a mix of the two (Table 8).

Table 8: Is the needed additional training available through the MTS Training Calendar?

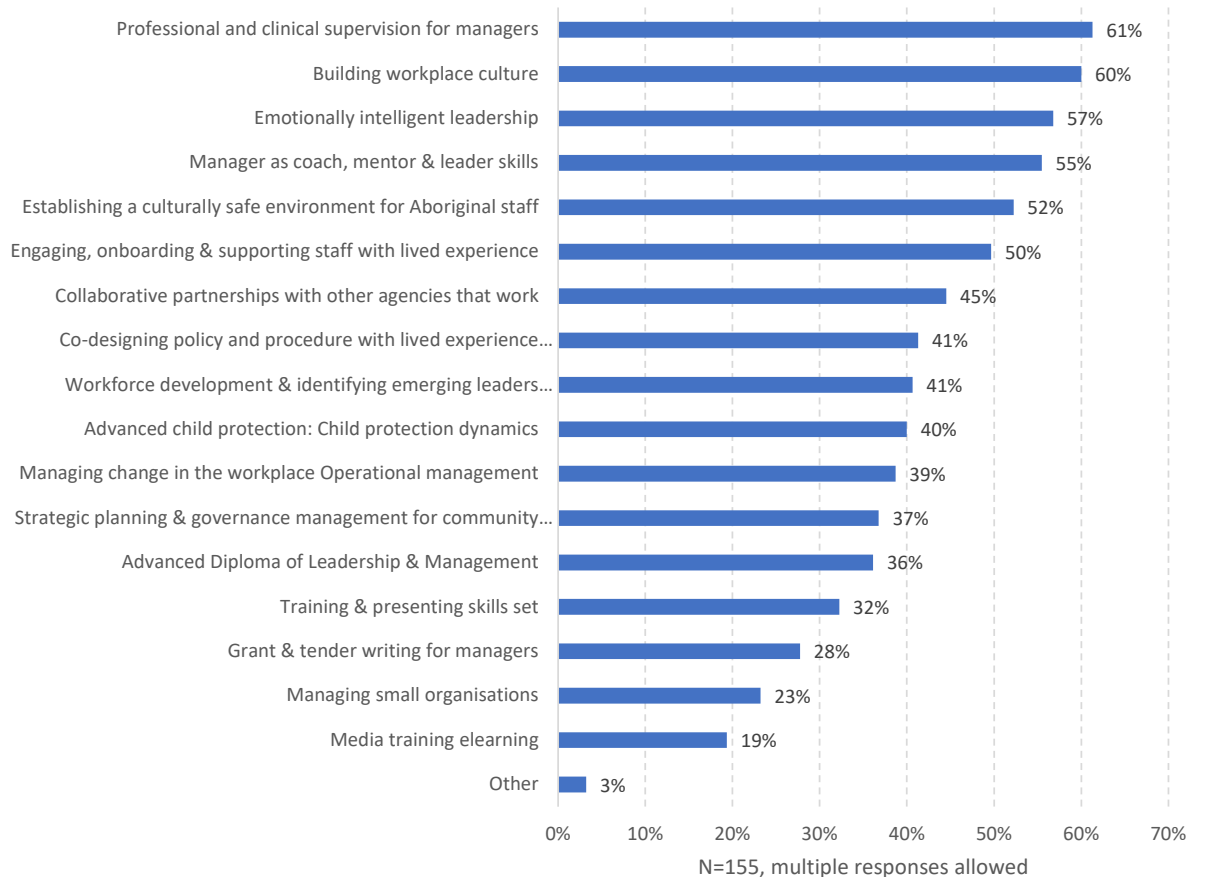
	Answer	%	Count
Yes, through the MTS Training Calendar		18%	3
Yes, through sources external to the MTS Training Calendar		24%	4
No		29%	5
Other, please specify*		29%	5
<b>Total</b>		<b>100%</b>	<b>17</b>

\* 'Other' responses included: We have engaged some further comms training and have commenced a Reconciliation Action Plan so doing more Aboriginal cultural knowledge; current organisational partnership with NDIA who have offered staff development to the team; mix of MTS and external sources.

### 6.3 Practitioner priorities for skills development

Practitioners identified professional and clinical supervision for managers (61%), building workplace culture (60%), and emotionally intelligent leadership (57%) as priorities for leadership training (Figure 29).

Figure 29: In your view, which areas of management or leadership should be a priority for training?



The survey asked practitioners 'what additional skill development opportunities would you undertake if they were available through the MTS Training Calendar?'. The answers show that there is appetite for more advanced training, leadership training and accredited training. Practitioners, especially those in regional areas, appreciated the increased availability of training via Zoom, but also highlighted that regional and rural areas still tend to miss out on training.

Responses included:

- Cultural awareness training and cultural skills

Cert IV social housing course for Aboriginal people I missed out on this last time. (practitioner)

Aboriginal cultural awareness training. (practitioner)

Dealing with unconscious bias. (practitioner)

Working in two worlds / cultures. (practitioner)

Diverse communities and young people. (practitioner)

6. What are the priority training areas across the NSW homelessness sector workforce?

More cultural awareness for other cultural groups that have not been touched on. Including but not limited to African peoples and migrants. (practitioner)

Working in partnership with Aboriginal communities. (practitioner)

- **Access to training in regional areas**

Access to any training that is available in regional areas that you see advertised but not for rural regions. Options are lacking, limited or not available to rural/remote locations. (practitioner)

Any that were accessible via Teams and or Zoom as there is nil opportunity for staff to attend anything locally. (practitioner)

I believe most of our staff would be happy to do more training if offered but due to being rural and covid conditions/restriction we haven't had the opportunity to do a lot of face-to-face training. We have been supplied with online training regularly. (practitioner)

More zoom training would be ideal for regional areas so there is no need for work to pay for travel or living away. The only obstacle is that if you are doing the zoom course and you are at the office you may get pulled out of the training due to urgent matters taking priority. And you can get more numbers of people being trained via zoom as I have found in the past that the spots fill too fast and you always seem to miss out on training. (practitioner)

- **Advanced skills**

I would like to see more advanced training courses for workers with 8+ years of experience. (practitioner)

Delving into theory, preparation courses for social work degrees. (practitioner)

More specialised training for those who have been in the sector for long time i.e.: domestic violence, complex client work. (practitioner)

AICD [Australian Institute of Company Directors] / ICDA [International Data Center Authority] type governance training; clinical skills training e.g., DBT ; evidence based practice oriented training; research share oriented training; marketing and communications type training (e.g., fundraising); legislative compliance related training ... (practitioner)

Brain injury knowledge and skills. (practitioner)

Clinical supervision skills to support case workers working with people with complex trauma. (practitioner)

Motivational interviewing. (practitioner)

- **Leadership, career development and accredited training**

Diploma of Leadership and Management. (practitioner)

Culturally specific development into management - training only offered to existing incumbents. (practitioner)

Management and supervision. (practitioner)



6. What are the priority training areas across the NSW homelessness sector workforce?

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Management specific courses e.g., higher level finance, legal, governance training. (practitioner)

More accredited leadership training. (practitioner)

More leadership training -similar to that offered by CCWT [Centre for Community Welfare Training]. (practitioner)

With the movement towards hold tertiary qualification, would like to see more accredited units available. (practitioner)

- NDIS

Completing a successful NDIS application. (practitioner)

- Child protection

- Mental health

Complex mental health disorders. (practitioner)

Overview of diagnoses disabilities. (practitioner)

Counselling. (practitioner)

- Safety planning

- Building collaborative partnerships

- Wellness training.

Avoiding desensitization and addressing burn out if you are exposed to ongoing negative situations. (practitioner)

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## 7. How well do the existing L&D Framework and Workforce Capability Framework meet the needs of the NSW homelessness sector?

- **Most managers (85%) are aware of the SHS Workforce Capability Statement and most (75%) think it meets their program's needs.**
- **Managers indicated that 67 per cent of program staff had attended MTS training in the 12 months prior to the survey, with a median of four days training attended.**
- **Most managers thought staff received the right amount (47%) or almost enough training (29%). 84 per cent thought the training was effective or very effective in helping staff to do their jobs better. At 94 per cent, a very high percentage assessed the training offered through the MTS Training Calendar as relevant to their program's needs.**
- **Almost all managers (94%) indicated that new staff received training for CIMS client records and case management, and training for working with SHS clients (76%).**
- **Most practitioners (86%) thought that adequate skill development opportunities were available to them, and that MTS training they received better prepared them for their job (74%). Although, 29 per cent of respondents did not access MTS training at all during the past 12 months.**
- **Time management issues (22%), lack of training opportunities in regional centres (18%), and lack of suitable courses (18%) negatively affected practitioners' access to training.**
- **Around half of managers thought staff absences due to training affected services.**

- **Working with people with mental health issues was the MTS training most accessed by practitioners. This was followed by working with Aboriginal and Torres Strait Islander people and victims of DFV. Most of this training was accessed within the past five years.**
- **The most common training accessed for core and specialist skills was for trauma informed practice, CIMS and case management.**
- **Managers and practitioners alike were appreciative of the increased availability of training on Zoom, which increased accessibility.**
- **Practitioners' views on the quality and accessibility of MTS training balanced those who felt training was of high quality and met their needs, and those who wanted more diverse courses, advanced and specialist skills.**

This chapter answers the question 'how well do the existing SHS L&D Framework and Capability Framework meet the needs of the different segments of the NSW homelessness sector?'

## 7.1 Workforce Capability Framework

The survey showed that 85 per cent of responding managers were aware of the Workforce Capability Framework and 75 per cent stated it met their needs (Table 9).

Table 9: Are you aware of the SHS Workforce Capability Framework?

Answer	%	Count
<b>Are you aware of the SHS Workforce Capability Framework?</b>		
Yes	85%	17
No	15%	3
<b>Total</b>	<b>100%</b>	<b>20</b>
<b>Does the SHS Workforce Capability Framework meet your program's needs?</b>		
Yes	75%	12
No	25%	4
<b>Total</b>	<b>100%</b>	<b>16</b>

Respondents identified the following factors that would help the SHS Workforce Capability Framework to meet their needs better:

Clearer information about progressing within a pay point, e.g. most case management staff are at the level 4. What does someone need to demonstrate to move to 4.2; 4.3 etc. Same at each of the levels. (manager)

Access to CIMS training. (manager)

More user friendly format. (manager)

More availability of certain training and online training. (manager)

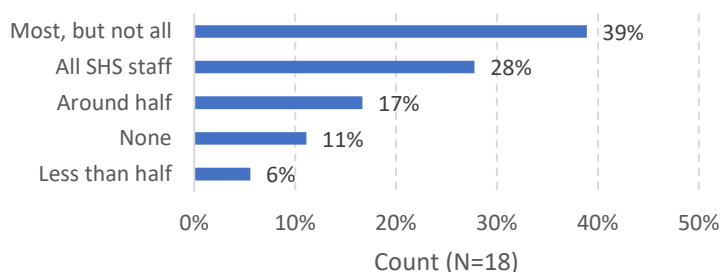
Provide additional support and funding to small organisations undergoing ASES plus meeting the requirements of the SHS Workforce Capability Framework. For example, funding to help staff afford courses to upskill with qualifications at a minimum, Certificate IV or Diploma, for staff who have extensive years of sector experience. Provide realistic funding to meet the demands placed upon small organisations. (manager)

## 7.2 Do program staff receive the right training and the right amount of training? – manager view

The survey asked managers a series of questions about the amount, type and quality of training received by program staff.

In the 12 months prior to the survey, 67 per cent of organisations had all or most of their staff attend MTS training; 11 per cent of organisations did not use this training (Figure 30). On average, employees received 5.6 days of MTS training. However, this figure is distorted by some organisations that indicated a disproportionately high number of training days received per employee (20 and 10); the median number of training days received was four.

Figure 30: In the last 12 months, how many SHS staff in your program have attended training through the MTS Training Calendar?



Most managers thought staff received the right amount of training (47%) or almost enough training (29%). However, 18 per cent thought staff received nowhere near enough training (Figure 31). 84 per cent of managers thought the training was effective or very effective in helping staff to do their jobs better (Table 10). A high 94 per cent assessed the training offered through the MTS Training Calendar as relevant to their program's needs (Table 10).

Figure 31: In the pasts 12 months, did program staff receive enough training through the MTS Calendar?

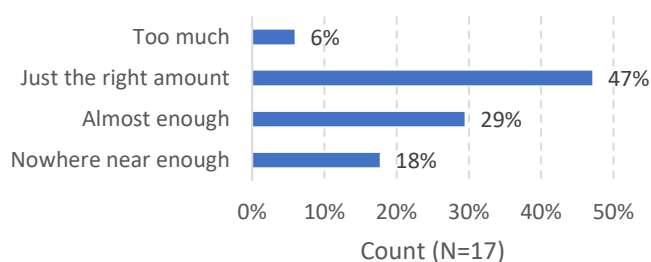


Table 10: How effective was MTS training in helping staff do their job better?

Answer	%	Count
Very effective	6	1
Effective	78	14
A little bit effective	11	2
Not effective	6	1
<b>Total</b>	<b>100</b>	<b>18</b>

Nearly half of the respondents (47%) indicated that staff absences due to training affected their services, with a further 16 per cent answering that this was sometimes the case (Table 10). Comments indicate that whether training affects services or not depends on the program and the planning:

Yes, very much, two of our contracts have refuge attached as well as short-, medium- and long-term case management. We also have a 24-hour co-case management model and an inner-city case management model. All teams are very lean, and every absence is noticed. (manager)

Yes, as we are so thinly resourced. (manager)

No, we plan this into our resource model. (manager)

We offer two programs. One program= yes. One program = no. (manager)

Table 11: Does staff absence to attend training affect your service?

Answer	Count	%
Yes	9	47%
No	7	37%
Sometimes	3	16%
<b>Total</b>	<b>19</b>	<b>100%</b>

### Training for new staff

The MTS Training Calendar provides a range of induction programs for those new to the sector. Managers answered that staff who newly join their program receive MTS training. Training for CIMS client records and case management was used by almost all (94%), followed by working with SHS clients (76%) (Figure 32). Survey results indicate that on average, new staff received four units of induction training.

63 per cent of respondents thought the MTS Induction training met the needs of new staff. However, 26 per cent thought it did not, and 11 per cent did not know.

Responses from practitioners who are new to the sector show that CIMS client case records and case management was the most commonly accessed induction training (14 respondents), followed by induction to the housing and homelessness program (10 respondents) (Figure 33). Induction training is less commonly accessed by practitioners who are new to their role, but not new to the sector.

7. How well do the existing L&D Framework and Workforce Capability Framework meet the needs of the NSW homelessness sector?

Figure 32: Staff who newly join my program receive the following training from the MTS Calendar

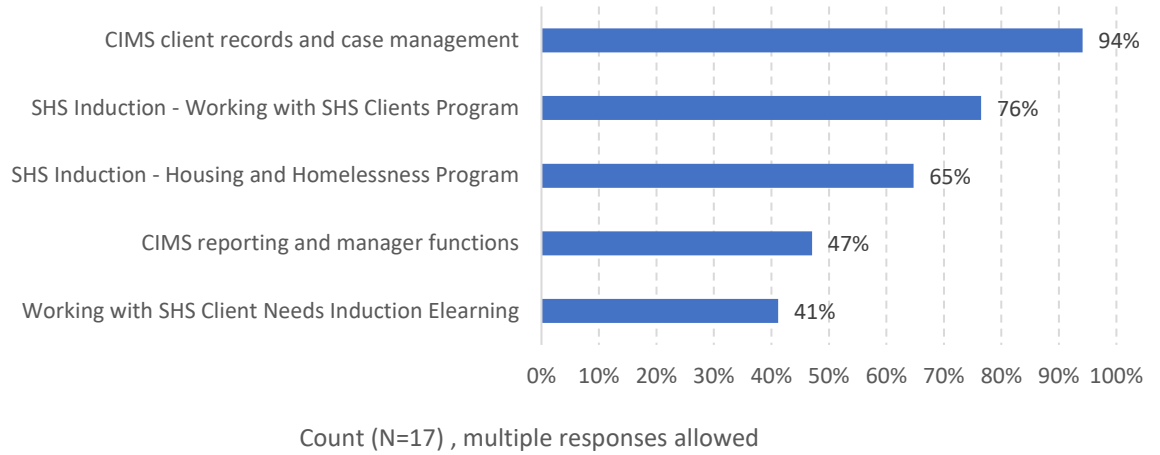
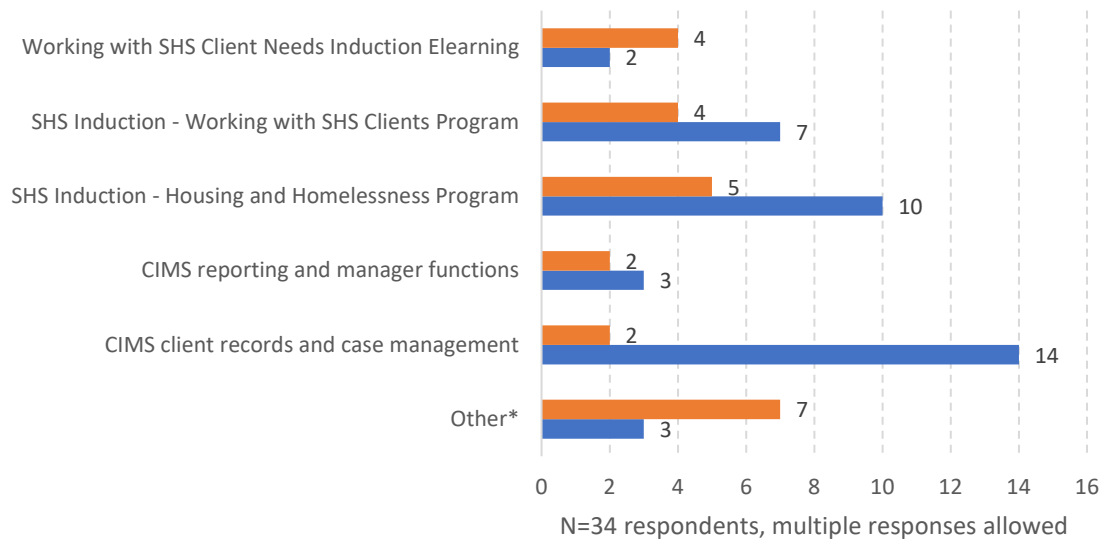


Figure 33: In the past 12 months, have you received the following induction training through the MTS Training Calendar?



\* *Understanding young persons' development; assertive outreach, advanced case management.*

Respondents made the following suggestions as to what would assist staff to attend training.

- Virtual delivery makes training more accessible.

Zoom training has been very helpful as more staff find it easier to log in remotely. Please continue this post COVID! and 'continued access to virtual training when Covid restrictions cease'; funding for staff to participate; more staff/ better funding so others can support their cases if/when necessary when they attend training; online flexible training (2 responses); self-paced learning - especially for staff who work beyond traditional office hours. (manager)

Lack of time is as a key barrier to training attendance.

Feedback from staff mention that some training content could be delivered in one day instead of two, staff are very pushed for time! The issue of staff struggling to make time for training was consistent across all levels of staff (practitioners, senior practitioners, managers and executives). (manager)

Several respondents identified that the course content was not matched with staff training needs in the sense that the content covered was too basic for staff with advanced skills.

Most of our practitioners are more experienced now so need more advanced training' and 'staff feedback from courses was that the content was basic and not skill enhancing as targeted at entry level: masters qualified social workers identify resistance to the training based upon their experiences of the courses as identified'. This included 'logins for board and more board specific training options; surveying this level to identify specific training needs. (manager)

Several respondents identified that MTS training could be difficult to access because courses were often full or not adequately available in terms of frequency or accessibility (e.g. provided only face-to-face). Managers and CEOs suggested the following additional training that could be included the MTS calendar:

- working with persons leaving prison
- working with people with dual diagnosis
- working therapeutically

I would welcome more formal training opportunities such as Diploma in counselling and therapy for example, can help workers feel more motivated to continue professional development and learning. (manager)

- Leadership training, including governance and workforce training

Additional leadership training opportunities - most seem to be wait listed and not actively delivered (e.g., Dip leadership) (manager)

I enjoy the format of the sector/industry partnership briefings but would welcome some further formal options too around specialist housing models and responses, governance, workforce planning etc. (manager)

Needs more leadership training, good practitioner but gaps at leadership level. (manager)

- Safety and security (old SAAP training), including responding to aggressive and violent behaviours and safe home visiting for frontline workers
- Child protection half day refresh (new legislation)
- Case management half day refresh (new best practice)
- Dialectical Behaviour Therapy (DBT) skill building for frontline workers
- Cognitive Behavioural Therapy (CBT) skill building for frontline workers
- Governance and legislative compliance training for senior managers and board members.

### **7.3 Do program staff receive the right training and the right amount of training? – practitioner views**

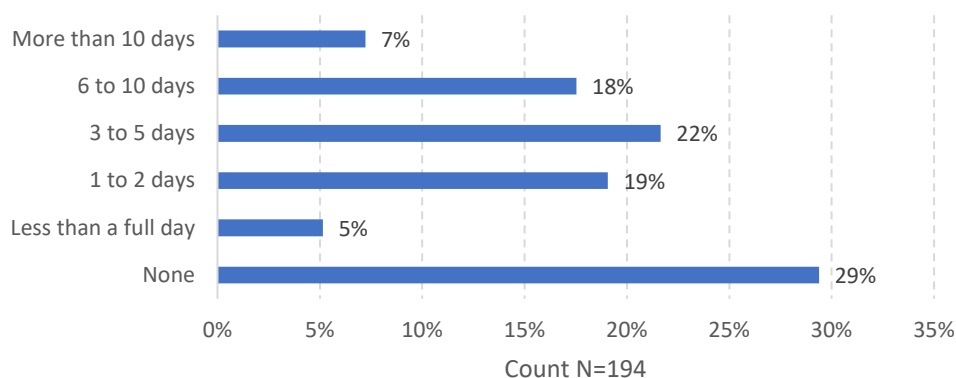
Most practitioners (86%) thought that adequate skill development opportunities were available to them (Table 11). Most commonly, practitioners (22%) accessed between three to five days of training through the MTS calendar in the past 12 months, though 29 per cent of respondents did not access MTS training at all during this time (Figure 34).

7. How well do the existing L&D Framework and Workforce Capability Framework meet the needs of the NSW homelessness sector?

Table 12: Overall, do you think there are adequate skill development opportunities available to you?

Answer	%	Count
Yes	86%	158
No	14%	26
<b>Total</b>	<b>100%</b>	<b>184</b>

Figure 34: In the past 12 months, how many days of SHS relevant training did you receive through the MTS Training Calendar?



Most practitioners thought they had received the right amount or almost enough training through the MTS Training Calendar in the past 12 months (76%) (Figure 35) and 74 per cent thought the training met their needs (Table 12).

Figure 35: In the past 12 months, did you receive enough training?

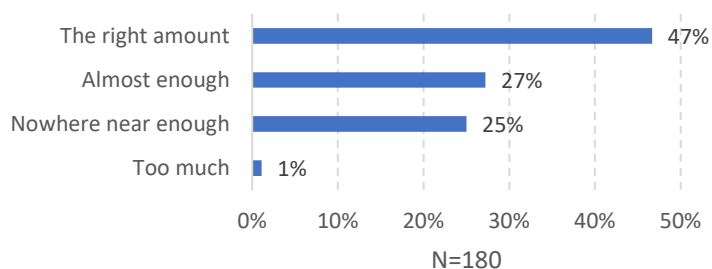


Table 13: The quality and content of the MTS training I received met my needs / better prepared me for my job

Answer	%	Count
Yes	74%	139
No	9%	17
Don't know	17%	32
<b>Total</b>	<b>100%</b>	<b>188</b>

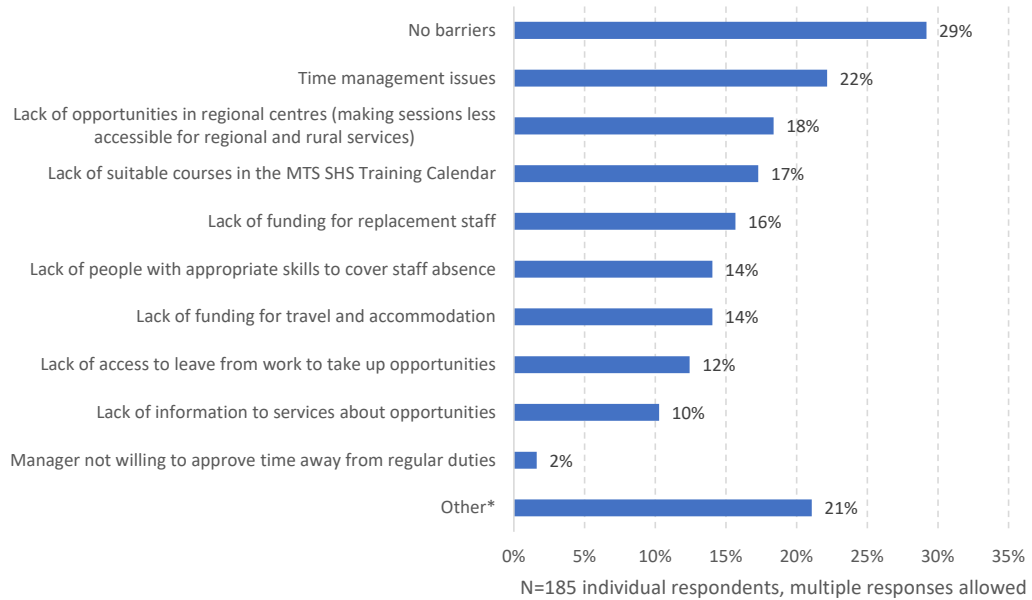
### Barriers to accessing training

The barriers that prevent practitioners from accessing MTS training are time management issues (22%), lack of training opportunities in regional centres (18%), and lack of suitable courses (18%) (Figure 36). These findings are consistent with the responses from managers, who also identified time management issues and staff absences as a key barrier to training and highlighted that course content was not matched by staff training need for advanced skills.



7. How well do the existing L&D Framework and Workforce Capability Framework meet the needs of the NSW homelessness sector?

Figure 36: What are the barriers to you undertaking MTS training?

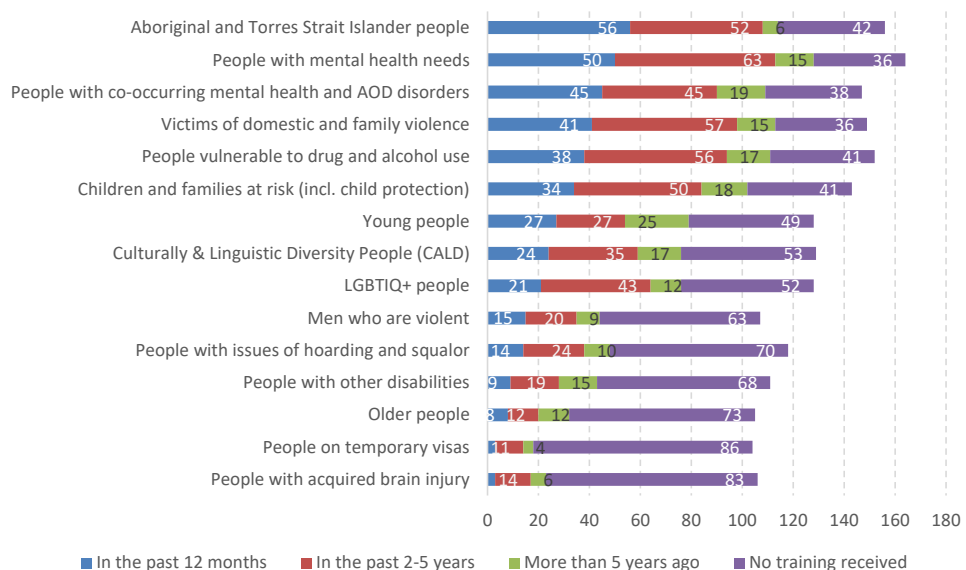


\* Courses are full/not available; issues registering; COVID-19; not eligible; lack of face-to-face training/ online training format very difficult to engage with; training not relevant/most MTS training is entry level training

### Training accessed by practitioners

The survey asked practitioners whether they had accessed MTS training for working with particular client groups and how recently this training was accessed. Working with people with mental health issues was the MTS training most accessed by practitioners (128 respondents), followed by Aboriginal and Torres Strait Islander people (114), and victims of DFV (113) (Figure 37). Few practitioners had accessed training to work with people on temporary visas (18) and people with acquired brain injury (23). Where training was accessed, this was mostly within the past five years (79%). Notably, working with people with disabilities (63%), people with hoarding and squalor issues (64%) and children and families at risk (68%) had lower proportions of practitioners with recent training. There was a very high incidence of recent training for working with Aboriginal and Torres Strait Islander people (95%).

Figure 37: Have you received training in working with any of these client groups through the MTS Training Calendar?



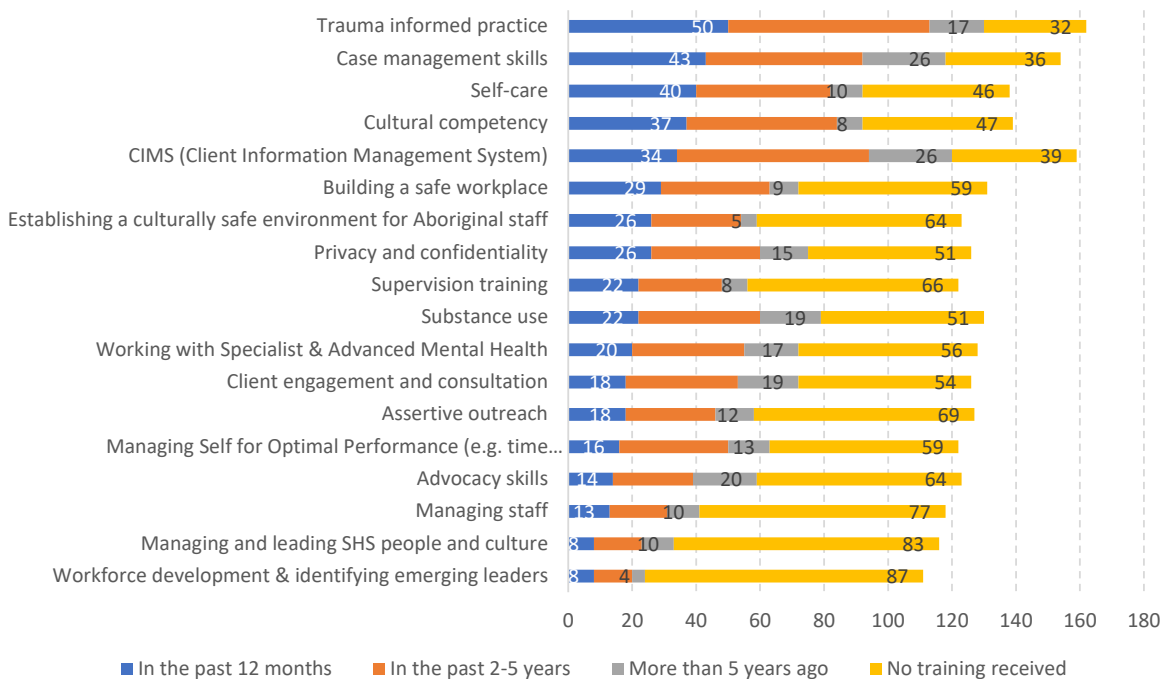
7. How well do the existing L&D Framework and Workforce Capability Framework meet the needs of the NSW homelessness sector?

The survey also asked practitioners whether they had accessed training for core and specialist skills through the MTS Training Calendar and how recently this training was accessed.

Trauma informed practice (130 responses), CIMS (120) and case management (118) was the training most commonly accessed by practitioners (Figure 37). Few practitioners had accessed leadership related training, such as workforce development and identifying emerging leaders (24), and managing and leading SHS people and culture (33).

Training in specialist skills tended to be less current than training for working with particular client groups, with on average, only 44 per cent of respondents having accessed this training in the past five years. The highest proportion of recent training accessed was for trauma informed practice (70%), case management skills (60%) and cultural competency (60%).

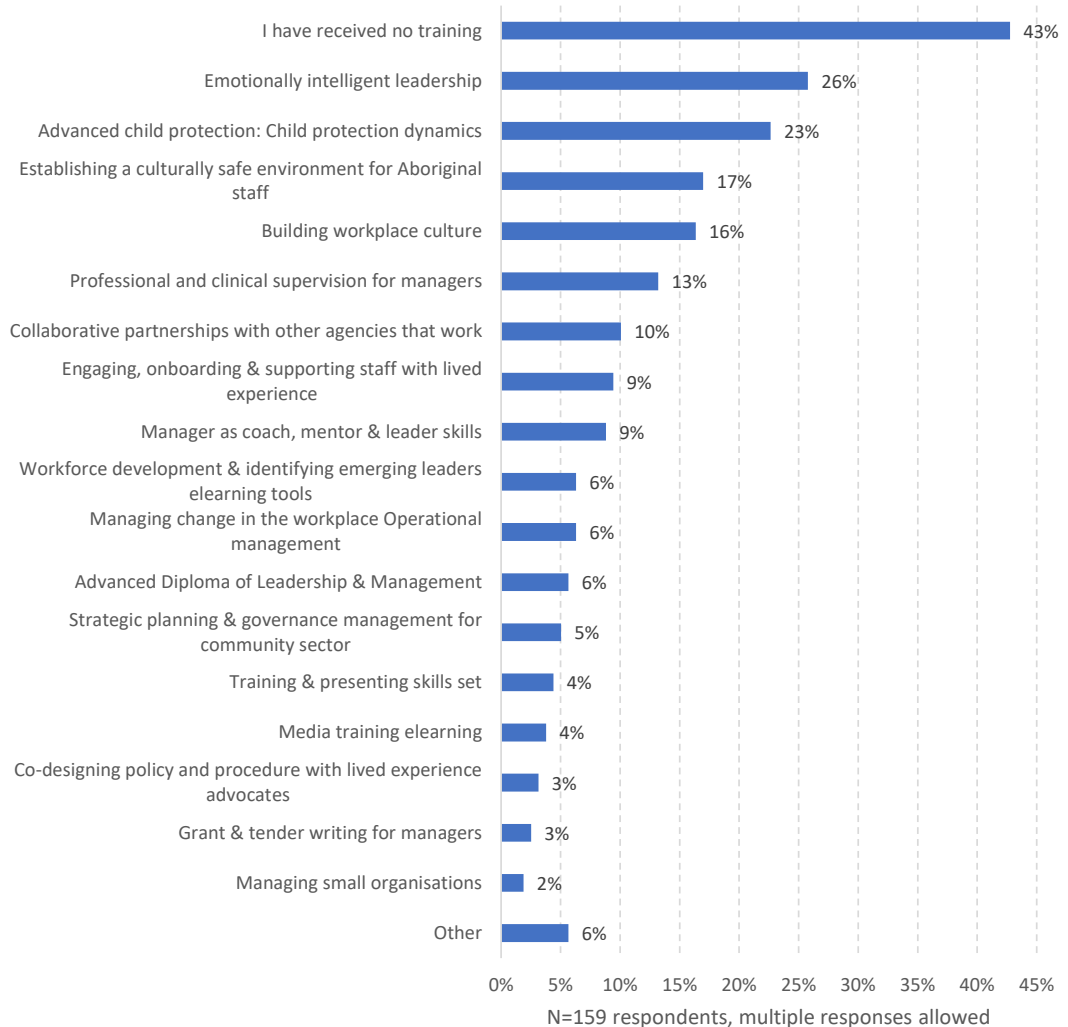
Figure 38: Have you received training in any of these core and specialist skills through the MTS Training Calendar?



Most practitioners who answered the survey had not received any training for managers and emerging leaders (43%) (Figure 39). For those who had, the most common training was for emotionally intelligent leadership (26%), advanced child protection (23%), and establishing a culturally safe environment for Aboriginal staff (17%).

7. How well do the existing L&D Framework and Workforce Capability Framework meet the needs of the NSW homelessness sector?

Figure 39: Have you received training for managers and emerging leaders through the MTS Training Calendar?



The survey invited practitioners to comment on the amount or quality of content of training they had received through the MTS Training Calendar. There was a balance between those who felt the training was of high quality and met their needs, and those who felt it did not meet their needs. Inability to access training was a common theme. Responses included the following:

A lot more since Covid and virtual training which has been a great help. (practitioner)

All good; regular updates on what training is actually available is periodic / sporadic so I tend to miss things as compared to my team member who regularly actively checks for updates. (practitioner)

Excellent presentation; highly skilled facilitators; content of training sufficient. (practitioner)

Facilitators are not always up to date with collaborative training functions, don't manage well time and spend most mornings talking about general information that is known, and then rush through the most important components. I've attended trainings that offer an interesting curriculum, but on the day it's more of a 101 course. Now that everything is online, trainings have lost the collaborative component and sharing practices and experiences with other people. It would be useful if trainings were organised more like workshops and separated in two mornings, rather than doing full day. (practitioner)

7. How well do the existing L&D Framework and Workforce Capability Framework meet the needs of the NSW homelessness sector?

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For workers long time in the field, not a lot of variety, new training. (practitioner)

Generally, quality is good. My suggestion would be that high management employees also take the same courses as frontline workers so they can better support frontline workers. There seems to be a gap in some organizations, where managers fail to understand SHS principles in the frontline level - they focus is on numbers not on practice/outcomes. (practitioner)

I feel that there should be more dates for the training that keeps getting booked out. (practitioner)

I find the training to be excellent, relevant and am grateful for the training opportunity. A lot of the training reinforces subjects that I learnt doing my social work degree. (practitioner)

I have completed more training since Covid 19 now that it has been online. I enjoy that I can attend training without having to travel. My team has also taken the opportunity to attend more online training. I would like more training that provides accreditation towards a qualification. (practitioner)

I love doing training as it also gives us time to network and hear how other humans deal with the ongoing crisis situation in their job roles. It's good to bounce of others so you don't feel so isolated in Covid times. The teachers are really switched on to our challenges with rough sleepers in all the services that train with MTS calendar. (practitioner)

I'd like to see more of a variety, plus I would like to see longer courses available possibly diploma level. I'd like to see online training continue. (practitioner)

Some courses become less relevant due to skill level increasing, this limits the amount of training which is applicable to me unless I want to do 'refreshers'. (practitioner)

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## 8. How well was the NSW Homelessness Industry and Workforce Development Strategy implemented and delivered?

- **85 per cent of managers thought that the IP had been effective or very effective in responding to sector needs in the past 12 months.**
- **ASES supports met the needs of most programs and practitioners.**
- **The impact of COVID-19 on the sector was widely acknowledged.**
- **Managers thought COVID-19 initiatives met their program's needs, especially webinars (86%) and accommodation guidelines (76%).**
- **COVID-19 initiatives met the needs of practitioners, with accommodation and housing (84%) and SHS workforce matters (81%) rating highly. However, initiatives in relation to rough sleepers did not meet the needs of 44 per cent of practitioners.**
- **Managers and practitioners thought CoPs met their needs and helped sector staff to do their job better, with the DFV CoP seen to be particularly effective (77%).**
- **Network meetings are effective in communicating up-to-date sector information. However, around a third of respondents were unaware of Network meetings.**
- **Nearly all practitioners thought that the Client Satisfaction Survey either met their needs (61%) or partially met their needs (34%).**

The Industry Partnership (IP) provides a range of initiatives to support the NSW Homelessness sector to provide service users with quality services and to ensure a highly skilled, motivated, and stable workforce. These initiatives include ASES support, CoPs, good practice guidelines, client satisfaction survey, JWA support, sustainability coaching, network meetings, By-Name Group Portal and COVID-19 initiatives.

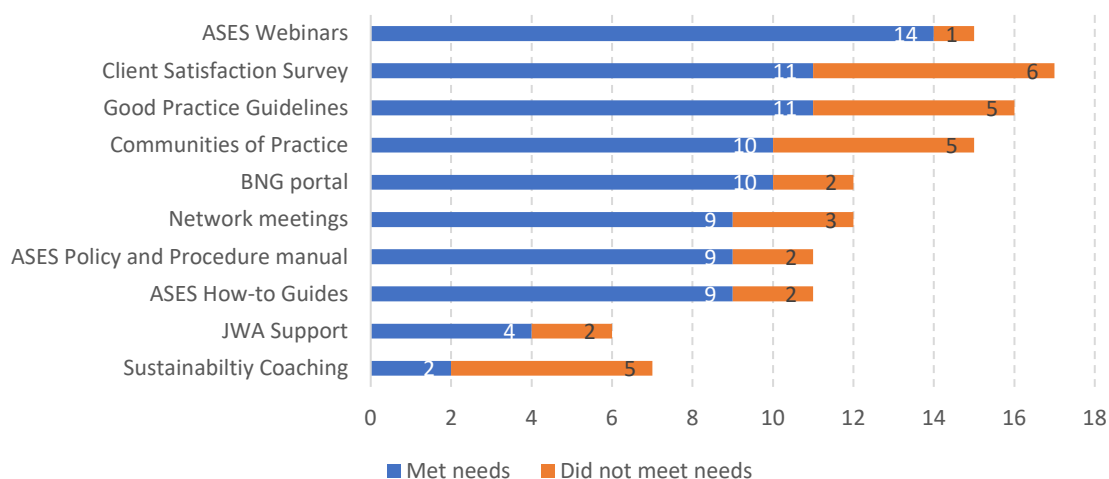
## 8.1 Overall effectiveness of the IP

Overall, 85 per cent of managers thought that the IP had been effective or very effective in responding to sector needs in the past 12 months, with the remainder thought it had been somewhat effective (Table 13). ASES support (ASES webinars, ASES policy and procedure manual, ASES how-to guides) stood out, as it met the needs of most programs. The Portal and Network meetings also rated highly. Conversely, Sustainability Coaching was the only initiative that did not meet the needs of most programs (Figure 40).

Table 14: Overall, how effective do you think the IP has been in responding to sector needs in the past 12 months?

Answer	%	Count
Not at all effective	0%	0
Not effective	0%	0
Somewhat effective	15%	2
Effective	54%	7
Very effective	31%	4
<b>Total</b>	<b>100%</b>	<b>13</b>

Figure 40: Did the IP initiatives meet your program's needs?



Managers noted the impact of COVID-19 on the sector and commented that IP supports had been helpful to them. Comments about how IP initiatives could better meet their program's needs included:

IP does a great job in keeping the sector together, promoting new ideas, advocacy and overall supporting sector - I am very happy with this support. (manager)

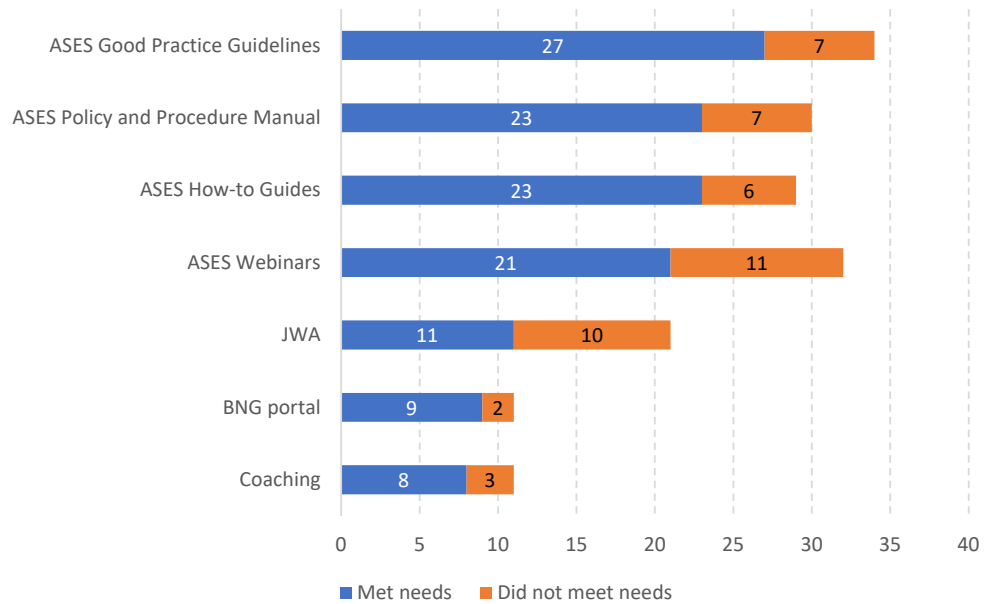
COVID has disturbed the CoPs, all else has been great. (manager)

Overall, these are great. I don't think we utilise them enough, as we don't have enough spare time. (manager)

Getting information out to staff plays a big role - Sector newsletters and invitations to join CoPs, network meetings online has helped. (manager)

The survey asked practitioners to indicate whether they used any of the IP initiatives to support the quality of service delivery, and whether these met their needs. Responses show that ASES initiatives were the most frequently accessed supports and largely met practitioners' needs. Around half of JWA users thought these met their needs, but half thought JWAs did not meet their needs (Figure 41).

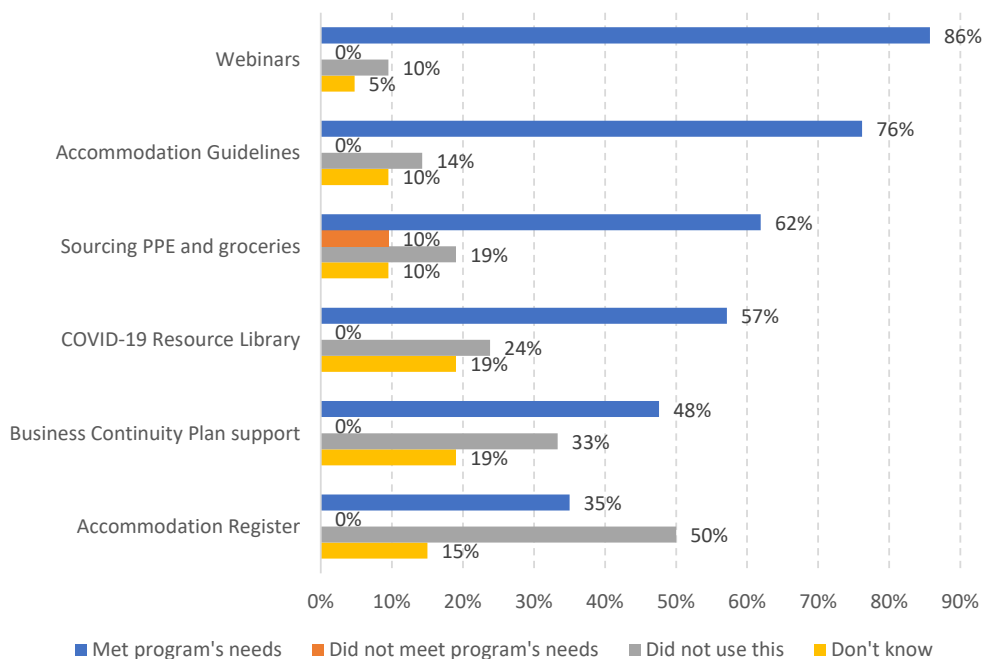
Figure 41: Did you use any supports relating to the quality of service delivery in the SHS sector and did these meet your needs?



## 8.2 COVID-19 Initiatives

Overall, managers thought that COVID-19 initiatives met their program's needs. Especially useful were the webinars (86%) and accommodation guidelines (76%). While sourcing of PPE and groceries met the needs of 62 per cent of respondents, it did not meet needs of 10 per cent of respondents. Only half of respondents used the accommodation register, and 35 per cent stated it met their program's needs (Figure 42).

Figure 42: How well did COVID-19 initiatives meet program needs?



Comments from managers as to how well the IP's COVID-19 response have met their program's needs included the following:

I am only just learning about two of the above projects for the first time. As a result, I will go to website and have a look (e.g., COVID 19 resource library). It's possible that with COVID there were so many emails at a crucial time that some information was lost. Services have been working hard to respond to urgent community need and I expect some information was lost in the process. (manager)

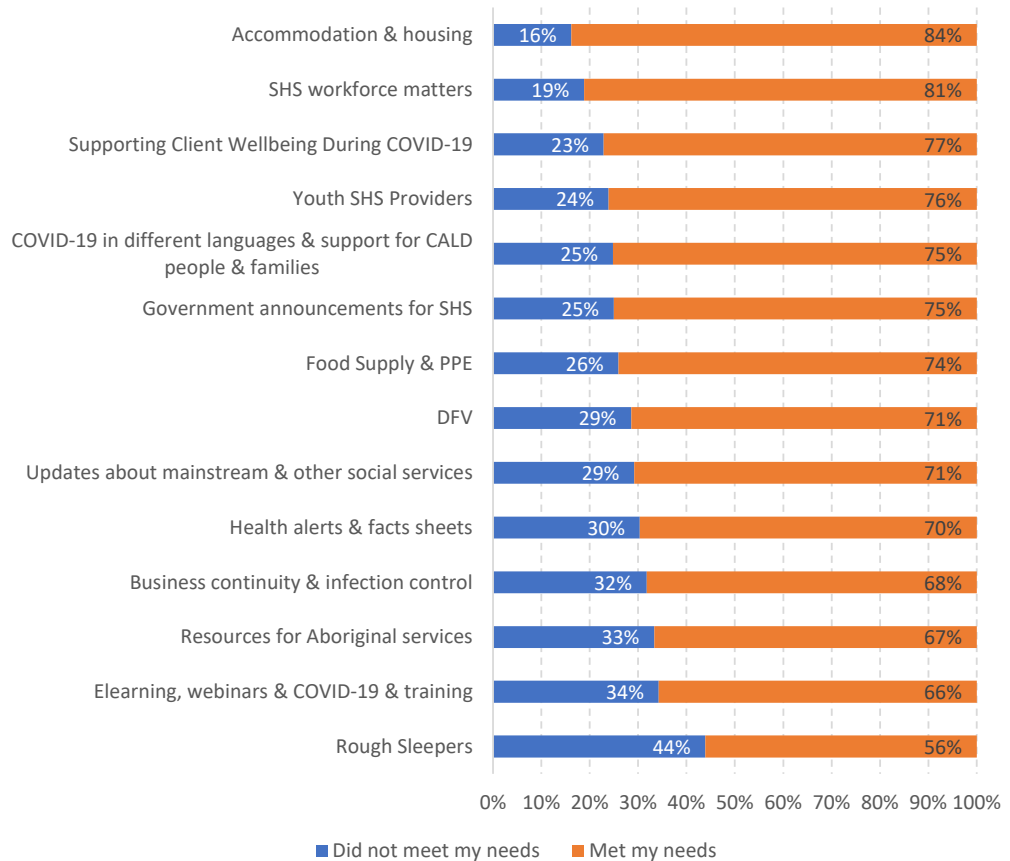
We used what we needed - which was flexible for us. (manager)

Can't think of anything else at this time. Thank you for your support, the webinars and discussions and the tailored support for women on temporary visas etc.

Timing - I think we had completed BCP activity already and spent a lot of time creating COVID-19 risk management responses. I recall the IP sending out some useful resources that helped shape this before the DCJ document was produced (not sure if this is what is being referenced with the library and developed in conjunction with DCJ). Certainly the DCJ COVID-19 guides would have been amazing early on but what it did for us was simply validate the measures we had in place - and identify one or two additional risk mitigation strategies that we hadn't already identified and implemented ourselves. (manager)

The data shows that most COVID-19 initiatives met the needs of practitioners, with accommodation and housing (84%) and SHS workforce matters (81%) rating highly. However, initiatives in relation to rough sleepers did not meet the needs of 44 per cent of practitioners (Figure 43).

Figure 43: How well did COVID-19 initiatives meet practitioner needs?





Practitioners' comments about how the IP's COVID-19 response could have been improved included the following:

All services have been amazing around the Covid time. (practitioner)

The cleaning and PPE were excellent. (practitioner)

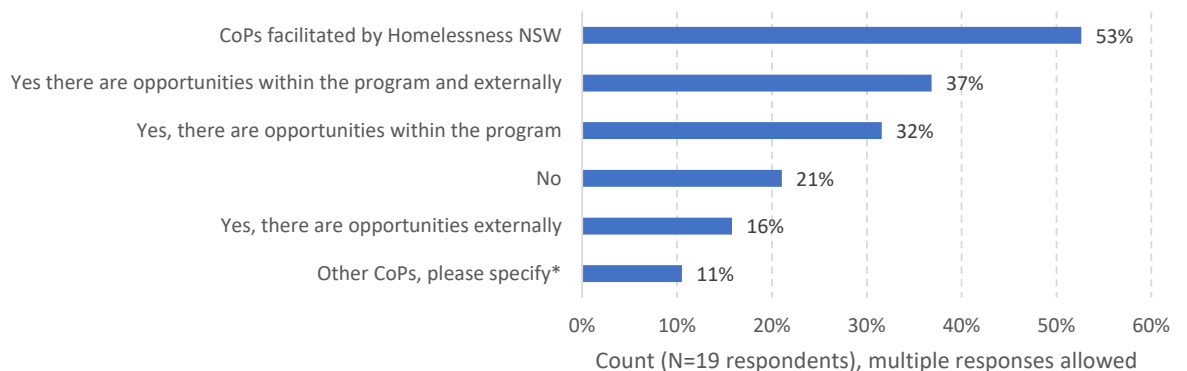
Yes, Housing were very good at supporting rough sleepers in the beginning, however NOW obviously funding has run dry and it is a constant battle with DCJ to get clients approved for TA and I believe some of the staff have no training in crisis/ homelessness and expectations are unrealistic. (practitioner)

Housing NSW offices having phone appointments not good for clients and case workers to work together. Housing NSW office have been inconsistent with information and procedures. (practitioner)

### 8.3 Communities of Practice

CoPs provide opportunities to share information and discuss practice. 53 per cent of managers who responded to the survey indicated that staff have access to CoPs facilitated by Homelessness NSW, but one in five did not have access to CoPs (Figure 44).

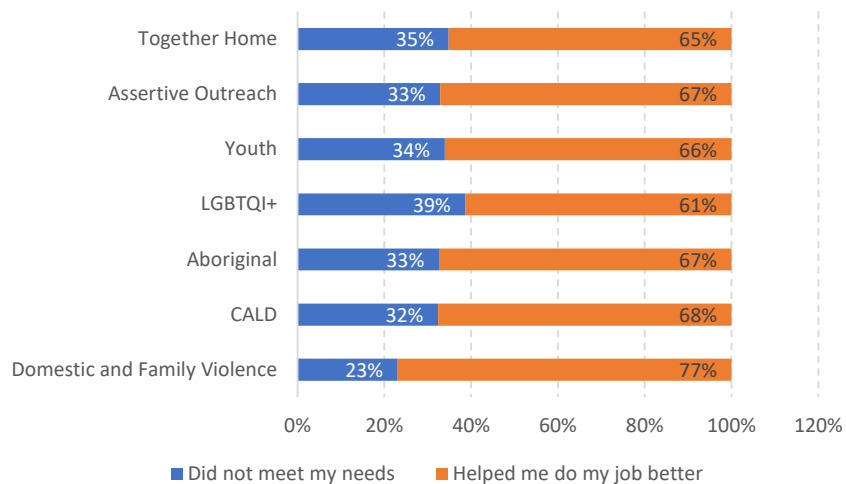
Figure 44: Do frontline staff have access to CoPs?



\* Other = advocacy for women with no visa status; and local DV committee.

All survey respondents (managers and practitioners) were asked how effective CoPs were in meeting their needs. Answers show that all of the CoPs run through the IP help sector staff to do their job better, with the DFV CoP seen to be particularly effective (77%) (Figure 45).

Figure 45: How effective are the following CoPs in meeting your needs?



Comments about CoPs highlighted that several responding managers were not familiar with CoPs or did not receive regular updates about them.

Do not receive updates from CoP. (practitioner)

Have not attended specific SHS CoP, have attended local forums when available. (practitioner)

I'm not familiar with Communities of Practice. (practitioner)

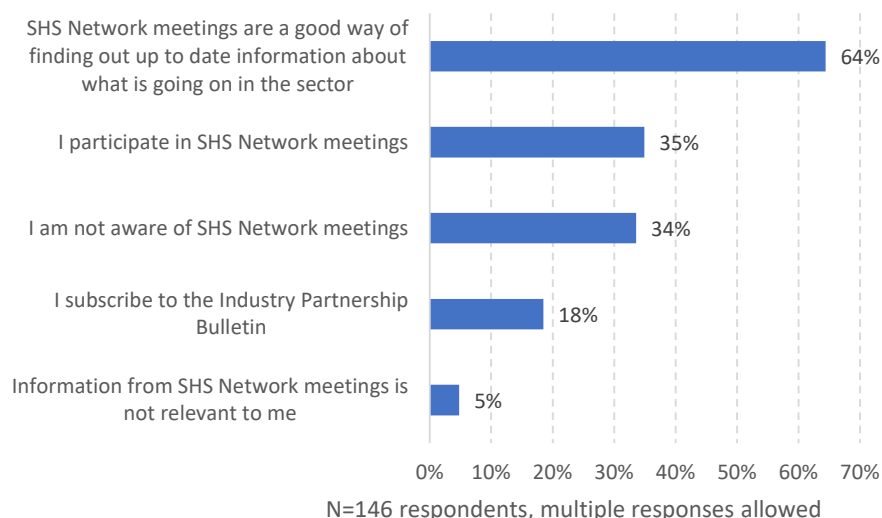
Would benefit [from] emails to the sector advising of these COPs. (practitioner)

Have only been to 1 meeting but found it amazing and very informative. (practitioner)

## 8.4 Network meetings

The survey asked all respondents (managers and practitioners) whether SHS Network meetings are effective in communicating up-to-date sector information. Most respondents (64%) thought Network meetings were a good way of finding out up-to-date information about what is going on in the sector and 35 per cent participated in SHS network meetings (Figure 46). However, another 35 per cent were unaware of Network meetings.

Figure 46: Are SHS Network meetings effective in communicating up to date sector information?



## 8.5 Client satisfaction survey

The survey asked practitioners whether the client satisfaction survey provides them with useful information that meets their needs. Nearly all practitioners thought that the Client Satisfaction Survey either met their needs (61%) or partially met their needs (34%) (Table 14).

Table 15: Does the Client Satisfaction Survey provide you with useful information to meet your needs?

	Count	%
Yes	50	61%
Somewhat	28	34%
No	4	5%
<b>Total</b>	<b>82</b>	<b>100%</b>

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## 9. How effective is the Framework at improving cultural competency?

- **NSW SHS organisations employ relatively few Aboriginal staff members, and even fewer are in managerial, leadership or executive positions.**
- **Many organisations report difficulties attracting and retaining Aboriginal staff.**
- **There is a notable divergence in the awareness of the ACCORD between senior managers and CEOs (who have greater awareness) and practitioners, many of whom do not know about the ACCORD.**
- **Organisations need to communicate their approach to Aboriginal stakeholder consultation, and the outcomes of this, more clearly across the organisation. In addition, organisations need to put a mechanism in place to facilitate genuine engagement with the issue of providing culturally appropriate services.**
- **Most respondents did not think that their program struggled to provide Aboriginal clients with culturally appropriate services. Comments made demonstrate that referral to culturally specific services, having an Aboriginal case worker or staff member, providing cultural competence training, and having policies in place were the main mechanisms to ensure that services were culturally appropriate. At the same time there was acknowledgement that these mechanisms may not be enough, especially considering the limited number of Aboriginal led and Aboriginal specific services to which clients can be referred, and that most organisations employ only few Aboriginal workers.**
- **Several programs have put in place specific mechanisms to facilitate genuine engagement with local Aboriginal communities.**

- **The data demonstrates that there is a gap in understanding between managers and practitioners about whether, and what kinds of, mechanisms are in place to support Aboriginal clients and staff to resolve issues in a culturally appropriate way. Comments provided demonstrate that while a range of different mechanisms is used, there is scope for leadership by the IP to assist organisations to further develop and refine this aspect of providing culturally safe and competent workplaces in the NSW Homelessness sector.**
- **Most NSW homelessness sector organisations require their staff to undertake cultural competence training. Most practitioners feel that they have the skills to engage with Aboriginal clients in a culturally sensitive way. However, the MTS training does not fully meet organisations' needs; two thirds of practitioners have accessed cultural competence training in other ways. This highlights that there is scope to review how cultural competence training is delivered through the MTS Training Calendar, including making training more culturally relevant to specific communities and providing better access to training.**

Survey data shows that over a third (34–41%) of clients accessing NSW homelessness services identify as Aboriginal and Torres Strait Islander people, making this a major client group. Nevertheless, the survey data shows that there is considerable room for improvement in increasing organisations' cultural competence and safety. This includes:

- Increasing the number of Aboriginal staff members, especially in senior management and executive positions.
- There is a need for the IP to engage in further promotion, education and training about the ACCORD to increase knowledge across all levels of the sector, and especially among practitioners, and to assist organisations to implement the ACCORD in meaningful ways. In addition, practical strategies are needed to ensure that the ACCORD is implemented in ways that increase the cultural competency of SHS organisations and their staff. (See section 9.2 for information about the ACCORD.)
- There is scope for the IP to provide leadership, education and training to assist NSW homelessness sector organisations to further develop and strengthen their capacity to provide culturally appropriate services.
- The IP has considerable scope to offer support and training to leaders in NSW homelessness sector organisations to develop and strengthen their capacity for meaningful engagement with Aboriginal communities, and to strengthen the provision of culturally appropriate services for Aboriginal clients.

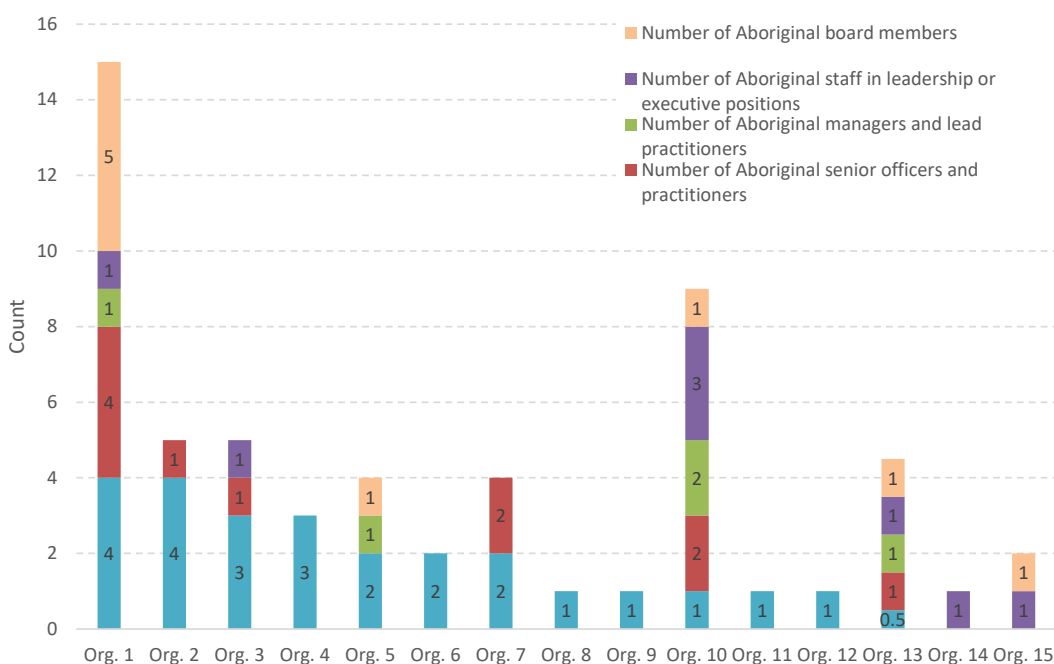
Crucially, the survey highlighted that Aboriginal organisations and Aboriginal workers face unique challenges, which were further explored using a series of tailored qualitative consultations. The findings from these consultations are detailed in the final report.

## **9.1 Attracting and retaining Aboriginal staff**

Survey data shows that NSW SHS organisations employ relatively few Aboriginal staff members, and even fewer are in managerial, leadership or executive positions.

Of the 24 responding organisations, 15 (63%) had Aboriginal staff. Organisation One is an ACCO and stands out for the high number of Aboriginal and Torres Strait Islander people on the board and in senior positions. Notably, there is a very low number (5) of Aboriginal managers and lead practitioners across all the other organisations surveyed.

Figure 47: Staff who identify as Aboriginal and Torres Strait Islander



Many organisations had difficulties attracting and retaining Aboriginal staff and did not know how to address this, while others identified approaches and strategies to attract and grow the Aboriginal workforce in the sector.

We work hard to target employment opportunities to Aboriginal staff and encourage them to apply, however over the last three years we have not had a single application. (manager)

Respondents identified that the following are needed: internship opportunities, improved training, experience with complex case management, more resources, funding for identified positions, better pay, and opportunities for on-the-job training.

Reconciliation and culturally appropriate practices and approaches were identified as strategies to attract and retain Aboriginal staff:

Continuing to implement our second Reconciliation Action Plan (RAP). (manager)

Continuing to work on our Aboriginal retention strategy and working with local elders to ensure our practices and policies are culturally appropriate and supportive. (manager)

Perhaps Aboriginal and Torres Strait Islander inclusion training for leadership (i.e., targeted at shaping organisational level practices/policies/procedures) for inclusivity and cultural capability in supporting both staff and clients. (manager)

Other comments included: the need for a large enough workforce, industry-wide; referrals from our own staff; flexibility; other Aboriginal staff; and recruitment of more Aboriginal representatives to the board of management.

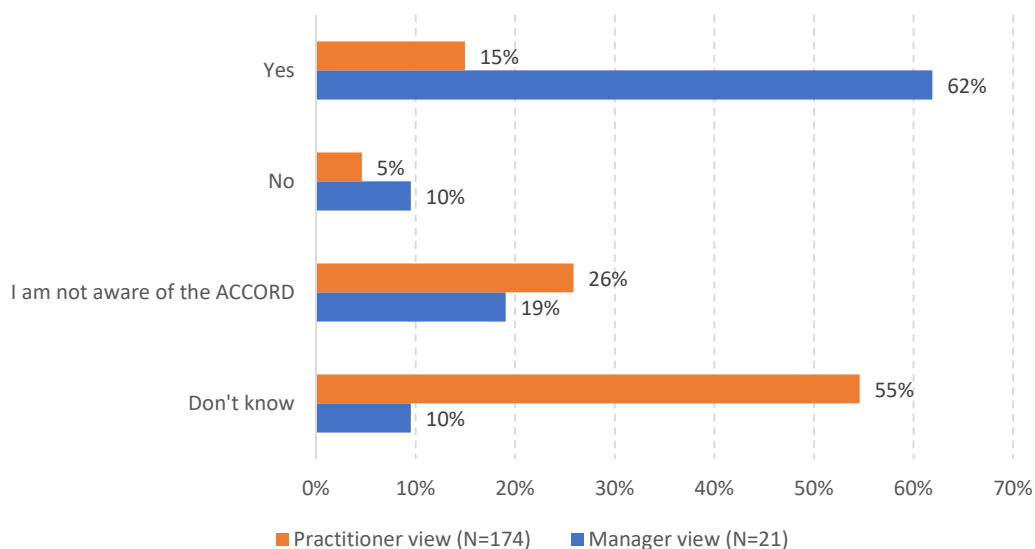
## 9.2 Aboriginal Homelessness Accord

The ACCORD was developed by the NSW SHS Aboriginal Reference Group in November 2017. It is intended to be an active guiding document. SHS providers are strongly encouraged to sign up to the ACCORD, display it in their organisations and report on its implementation to the SHS Aboriginal Reference Group.

The survey asked managers and practitioners whether their program had signed up to the ACCORD. Responses demonstrate discrepancies in knowledge about the ACCORD between managers and practitioners. For example, while 62 per cent of managers thought their program had signed up to the ACCORD, only 15 per cent of practitioners thought this was the case. Over half (55%) were unsure (Figure 48). High proportions of both managers and practitioners were unaware of the ACCORD.

Respondents were also asked what steps their organisation had taken to operationalise the ACCORD and increase its impact. Again, responses highlighted that many were unaware of the ACCORD or wanted further information and training about it. While some programs had taken steps to ensure the ACCORD was integrated with their Reconciliation Action Plan (RAP) and their organisation's overall strategy, other organisations were only beginning to operationalise the ACCORD in meaningful ways.

Figure 48: Has your program signed up to the Redressing Aboriginal Homelessness Accord?



Several managers and practitioners noted that their organisation had a RAP in place.

Started to develop a reconciliation action plan, acknowledge the traditional owners of the land at all meetings & in our email signatures, participate in Sorry Day and NAIDOC events, work in partnership with Aboriginal specific services, employ Aboriginal staff and support them to link with other Aboriginal workers. (practitioner)

Managers identified the following steps that their program had taken to operationalise the ACCORD:

- advocacy on behalf of the Aboriginal community
- training (e.g. annual training of every staff member on the significant trauma experienced by Aboriginal community, and cultural competence training)
- prioritising partnerships and specific engagements with Aboriginal services
- having targets for Aboriginal clients, staff members and board members
- a focus on recruiting and retaining Aboriginal staff

- providing training and sharing information internally and externally regarding the ACCORD
- prioritising developing responsive practice within the organisation.
- One organisation included feedback from Aboriginal service users to improve operations and how they respond to Aboriginal clients.

Among practitioners, some were not sure what steps their organisation had taken to operationalise the ACCORD. Others identified several steps, including:

- having an Aboriginal staff member on the committee that reports back to the service
- taking steps towards increasing service involvement with the local Aboriginal community
- increasing the number of Aboriginal identified positions
- specific cultural support for Aboriginal staff
- ensuring non-Aboriginal staff receive appropriate cultural training
- establishing a culturally safe office/space where clients receive service
- ongoing consultation and feedback from Aboriginal communities, leaders and individuals
- linking with other Aboriginal services in the local area.

Reflection within the team around each aspect of the accord, equitable distribution of available resources towards ATSI clients, promotion of ALO (Aboriginal Liaison Officer) role throughout the sector, allocation of existing funds towards more ALO positions where possible. (practitioner)

We have established a working group and started developing a RAP. We have been building relationships with ATSI organisations and community members. We are sharing information, resources and collaborating where possible to meet the needs of LGBTIQ+ Aboriginal and Torres Strait Islander People at risk of homelessness. (practitioner)

The survey asked both managers and practitioners what steps could be taken to increase the impact of the ACCORD. As noted, not all respondents were aware of the ACCORD, including some managers and many practitioners. This fact was echoed in several comments that called for more information and resources in relation to the ACCORD to be made available:

Awareness. First, I've heard of the term. More information on the subject. (practitioner)

I am not aware of [the ACCORD] so even a reach out to services it exists and its importance. We are preparing to implement a RAP in our service but can see this is an SHS services commitment to Homelessness so complement each other. I've only been working in this space just on two years but have not heard of it in this time...(manager)

Responses related to how to increase the impact of the ACCORD included the following:

We need to find better ways to support the sector to connect with Aboriginal people. The leadership and employment opportunities are there and we are very committed to provide the opportunities, however we have had real challenges finding Aboriginal people to apply for roles. Our Board is now focused on engagement in a leadership position as a start. (manager)

For Northern Sydney we struggle with strong Aboriginal leadership - there are no Aboriginal controlled organisations for example other than some health specific services. (manager)

Have open conversation to why there is a need for the accord in the first place - what previous policies have done to First Nation people and communities and why they need to be addressed. (practitioner)

Some responses highlighted the importance of adopting the ACCORD as a way of working, and linking it with meaningful outcomes.

[The Accord should] Be included up front and not considered as an afterthought. Closer scrutiny of the preferred providers / having a closer look at practices and real outcomes for Aboriginal people and not just look at the numbers? If you ask the agencies they all say the same “We have many Aboriginal clients” “we get good outcomes for our clients” Is this really true? Providing a roof is only part of the service provision and not a good measurement given the amount of tenancies not sustained or in jeopardy / at risk? (practitioner)

Many responses by practitioners highlighted that the lack of affordable housing, particularly the lack of properties specifically for Aboriginal people, was a major constraint on doing their job well.

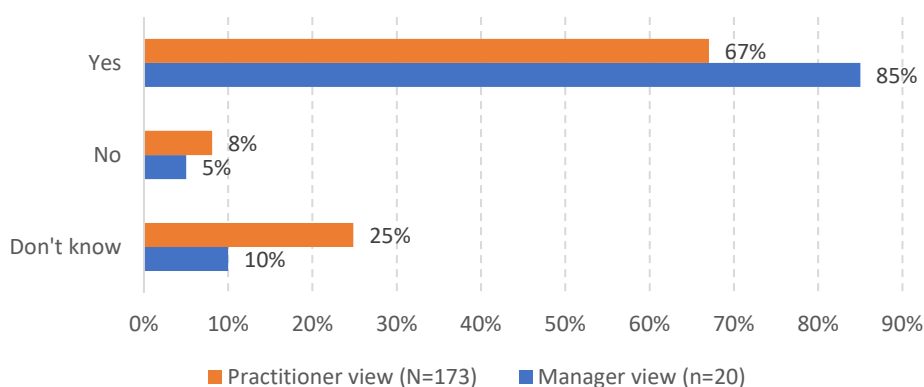
One respondent highlighted the impact of tendering and funding on organisations’ abilities to share ideas and collaborate effectively.

... more collaboration across services. Sharing of information and not being afraid that ideas will be taken to strength another agency’s tender application. It appears while the industry relies heavily on collaboration, many agencies are reluctant to share or engage in collaboration for fear of looking bad, losing their funding. (practitioner)

### 9.3 Culturally appropriate services

The survey asked both managers and practitioners whether their program consulted with Aboriginal stakeholders to ensure services were culturally safe and appropriate. Survey data shows that practitioner and manager views differed, with 85 per cent of managers indicating that their program consulted, but only 67 per cent of practitioners thinking this was the case. One in four practitioners did not know whether their program consulted with Aboriginal stakeholders (Figure 49).

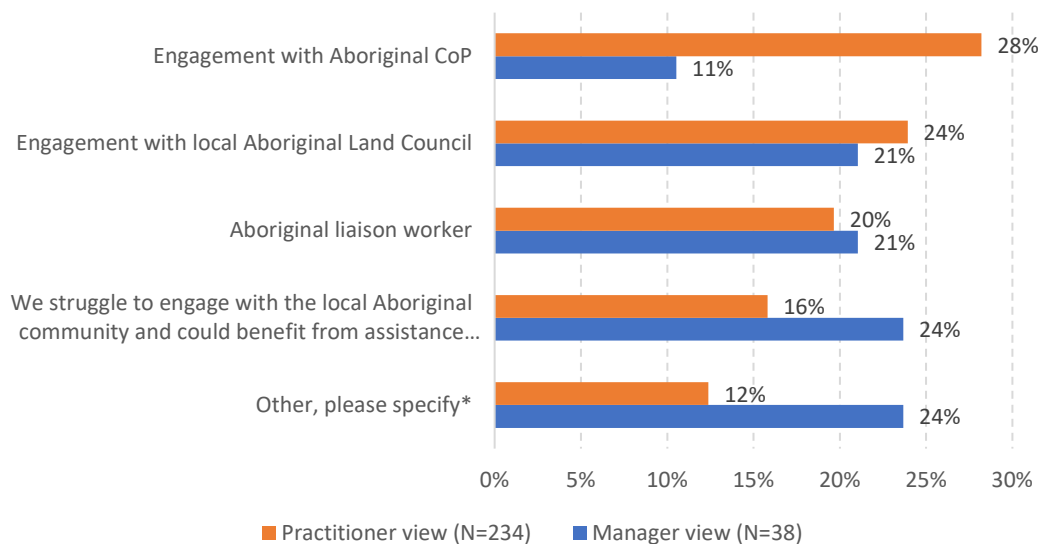
Figure 49: My program consults with Aboriginal stakeholders to ensure our service approaches are culturally safe and appropriate



Managers and practitioners were also asked how their program connects with Aboriginal communities to ensure they understand the needs of Aboriginal clients. A higher proportion of practitioners (28%) than managers (11%) were engaged with an Aboriginal CoP. Interestingly, a higher proportion of managers (24%) than practitioners (16%) felt they struggled to engage with the local Aboriginal community and could benefit from assistance with this (Figure 50).



Figure 50: How does your program connect with local Aboriginal communities to ensure they understand the needs of Aboriginal clients?



Multiple responses were allowed.

Comments revealed the many ways in which programs connect with local Aboriginal communities. These include engagement with local Aboriginal specific services and engagement with Aboriginal workers in other organisations. Connections depended on individual relationships (formal and informal) with local Aboriginal communities and organisations. When staff left, these connections were not always maintained and needed to be rebuilt (which does not always occur). One respondent observed that:

Networking has been significantly harder in these 18 months because of COVID. (manager)

Practitioners added to this that their organisation had identified workers to establish connections with the local Aboriginal community, participated in shared case management and inter-agency networks, that they consulted with services when support was needed, and used feedback from clients and their families. Several respondents pointed to specific mechanisms of engagement, including:

We have a decolonising working group that is currently planning engagement with local Aboriginal organisations. (practitioner)

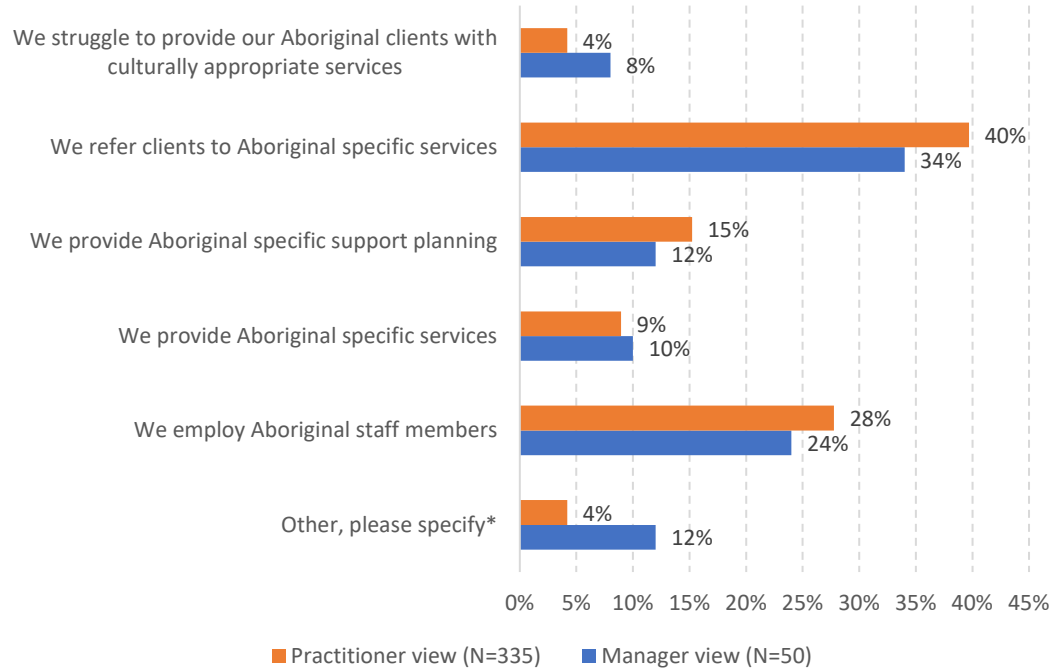
Having monthly Elder get togethers. (practitioner)

Outreach to the Aboriginal communities in our remote areas. (practitioner)

We have a steering committee that have community representation and [the organisation] provide updates with Aboriginal young people and services, and the community can share their grievances and concerns. (practitioner)

The survey asked managers and practitioners to identify how their program ensures that Aboriginal clients are supported in culturally appropriate ways. Only 4 per cent of practitioners and 8 per cent of managers thought that their program struggled to provide Aboriginal clients with culturally appropriate support. Referral to Aboriginal specific services was the main mechanism by which programs sought to achieve culturally appropriate support (40% practitioners, 34% managers), followed by employment of Aboriginal staff members (28% practitioners, 24% managers) (Figure 51).

Figure 51: How does your program ensure Aboriginal clients are supported in culturally appropriate ways?



Multiple responses were allowed.

The comments identified the following:

Assistance with engagement would be a HUGE benefit! (manager)

We have Aboriginal staff in other programs and we work together to meet client needs - but overall not a lot of services to refer to. (manager)

We invite each Aboriginal client to discuss what their specific cultural needs are in relation to their case plan and supports, recognising that each Aboriginal Nation is unique and has its own values, practices and experience. (manager)

Client feedback. (manager)

We are all Aboriginal predominantly from the local area. We are inherently culturally appropriate. This is a main strength of our Aboriginal Corporations service provision.

We work with individual clients needs and support based on what the client has requested. (practitioner)

Providing the option of an Aboriginal case worker. (practitioner)

We collaborate with Aboriginal services and community members. (practitioner)

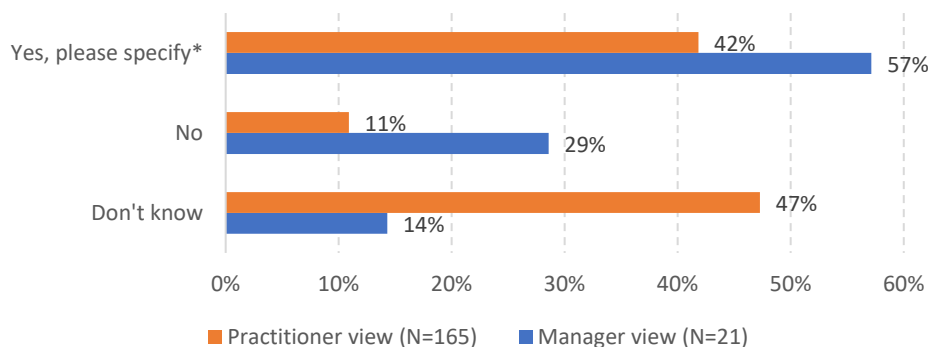
We are client led and ask our clients to tell us how they want their case planning to look and what they feel is culturally appropriate and necessary when looking for solutions for their case goal outcomes to be achieved. (practitioner)

On-going training/ taking part into Aboriginal specific events such as NAIDOC, reconciliation week, etc. (practitioner)

## 9.4 Resolving issues in culturally appropriate ways

The survey asked managers and practitioners whether their program had put in place mechanisms to support Aboriginal staff and clients to resolve issues in a culturally appropriate way.

Figure 52: My program has put in place mechanisms to support Aboriginal staff to resolve issues in a culturally appropriate way



More managers (57%) than practitioners (42%) thought that this was the case. Notably, 47 per cent of practitioners did not know whether there were mechanisms to support Aboriginal staff members to resolve issues in cultural appropriate ways.

Managers identified the following mechanisms to support clients to resolve issues in a culturally appropriate way:

- RAP planning and worksite policies and procedures
- Sanctuary model
- access to an external mentor
- staff have access to culturally appropriate clinical supervision and appropriate meetings
- Aboriginal retention strategy
- cultural supervision for Aboriginal staff
- cultural competency handbook that specifies the supports and systems for Aboriginal employees.

Several respondents noted that their organisation could do better in this respect.

In addition, practitioners provided the following comments:

- yarning groups

We have a yarn group in our region led by the regional leader. (practitioner)

Staff Yarn up quarterly. (practitioner)

Aboriginal service Delivery Unit within the organisation host yarn ups for staff. (practitioner)

- organisation policies

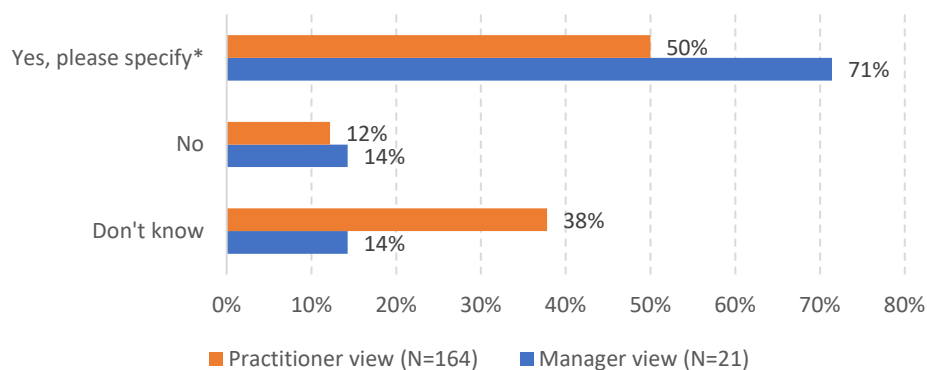
[Our organisation] supports Aboriginal workers around culture needs and welcome personal input towards working goals and providing cultural support in the workplace along with cultural celebrations that may be shared within the workplace. (practitioner)

- RAP group monthly
- support through the organisation's Aboriginal development unit and Aboriginal specific staff network
- Aboriginal Engagement Officer positions
- e-learning plus other Aboriginal and Torres Strait Islander support training
- culturally appropriate support provided through TSA counselling support
- introduction of Aboriginal Service Delivery Unit within the organisation
- encouraged and provided opportunity for Aboriginal staff to link with and receive supervision from local Aboriginal services.

If a worker so chooses, they are provided with an Aboriginal mentor, someone in a higher role within the company then themselves. We have Aboriginal Senior manager, and Aboriginal managers that advise and support Aboriginal staff on all levels in the organisation. (practitioner)

When asked whether the program had mechanisms to support Aboriginal clients to resolve issues in a culturally appropriate way, more managers (71%) answered 'yes' than practitioners (50%) (Figure 53). Worryingly, 38 per cent of practitioners and 14 per cent of managers did not know whether this was the case. 12 per cent of practitioners and 14 per cent of managers answered that their program did not have mechanisms to support Aboriginal clients to resolve issues in a culturally appropriate way (Figure 53).

Figure 53: My program has put in place mechanisms to support Aboriginal clients to resolve issues in a culturally appropriate way



Managers identified the following mechanisms to support clients to resolve issues in a culturally appropriate way:

- cultural awareness training, through MTS Training Calendar or externally

Our organisation engages private facilitator to train our staff each year. (manager)

- RAP planning and worksite policies and procedures
- Sanctuary model
- having Aboriginal staff to support clients and giving clients the choice to have an Aboriginal worker
- having an Aboriginal Strategy
- ensuring staff attend cultural awareness training within three months of starting at the organisation
- our welcome booklet, pamphlets and information is all in plain English and pictures are used a lot.

In addition, practitioners identified the following:

- working in partnership/collaboration with Aboriginal services
- being respectful of past traumas
- clients have access to identified staff and ease of access to management who have all participated in cultural training
- Aboriginal clients have the option of working with someone from their community
- statement of principles for working with Aboriginal and Torres Strait Islander clients
- a decolonising working group to make our organisation culturally safe
- links to Indigenous services, training and development
- support via Cultural Safety officer
- internal training, case coordination with other Aboriginal services
- Aboriginal history education in house group run for clients in refuge.

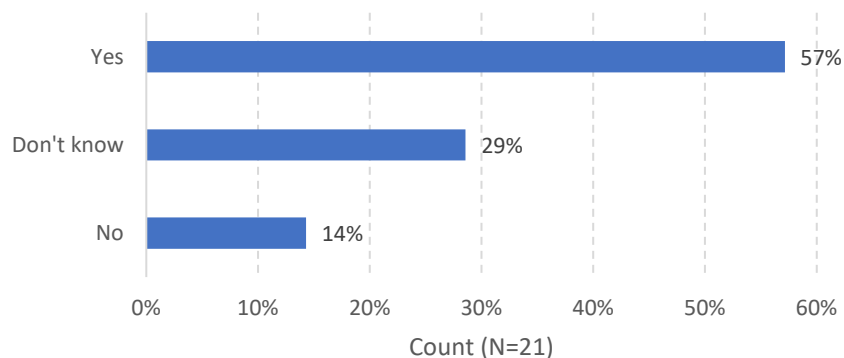
We have an Aboriginal refuge, that is staffed by Aboriginal youth workers, and managed by [an] Aboriginal residential coordinator. The young people do yarning circles every Tuesday night, and if there is a complaint the residential manager will address that with the Aboriginal young people. (practitioner)

## 9.5 Culturally competent leadership

The survey asked managers whether they felt they had the leadership skills to provide a safe workplace for Aboriginal staff and develop services that met the needs of Aboriginal clients.

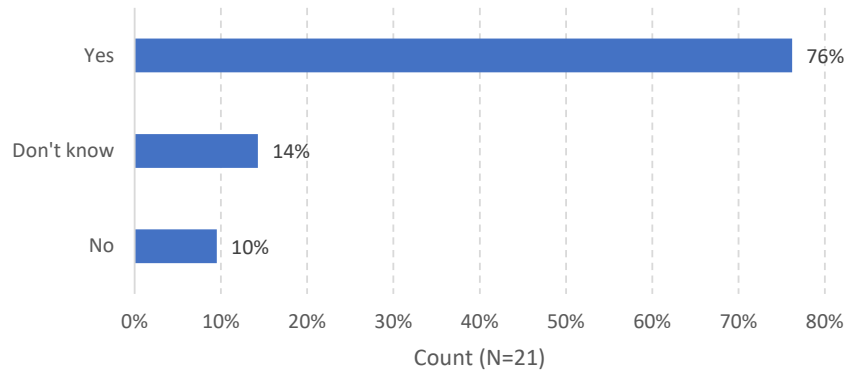
43 per cent of respondents did not know or did not feel confident that they have the skills to lead their program to effectively engage with the Aboriginal community to develop services that meet their needs (Figure 54).

Figure 54: I feel confident that I have the skills to lead my program to effectively engage with the Aboriginal community to develop services that meet their needs



More than three quarters of managers felt confident that they had the skills to lead their program to provide a culturally safe workplace for Aboriginal staff members (Figure 55).

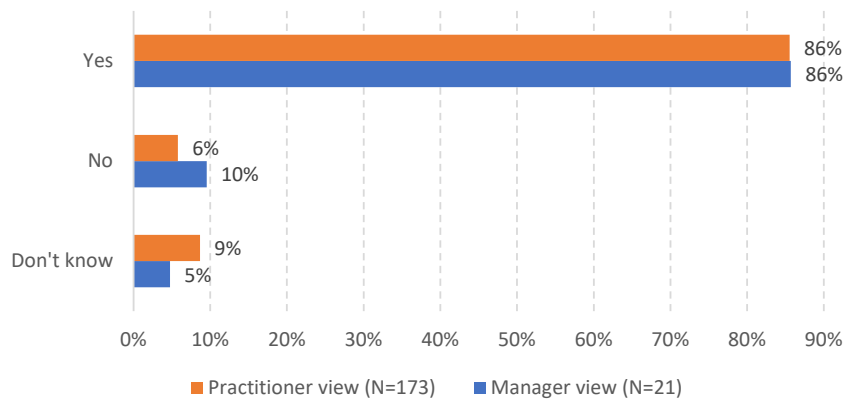
Figure 55: I feel confident that I have the skills to lead my program to provide a culturally safe workplace for Aboriginal staff members



## 9.6 Cultural competence training

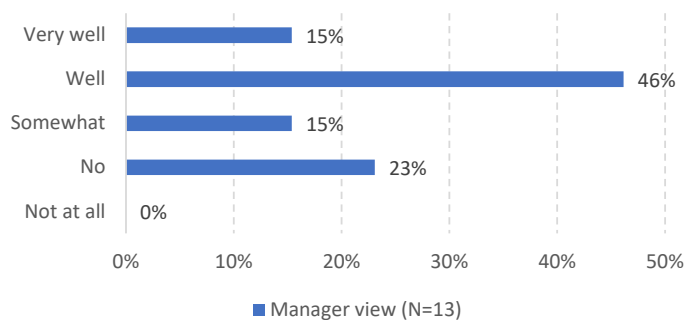
Most NSW Homelessness sector organisations require their staff to undertake cultural competence training (86%) (Figure 56).

Figure 56: My program requires staff to undertake cultural competence training



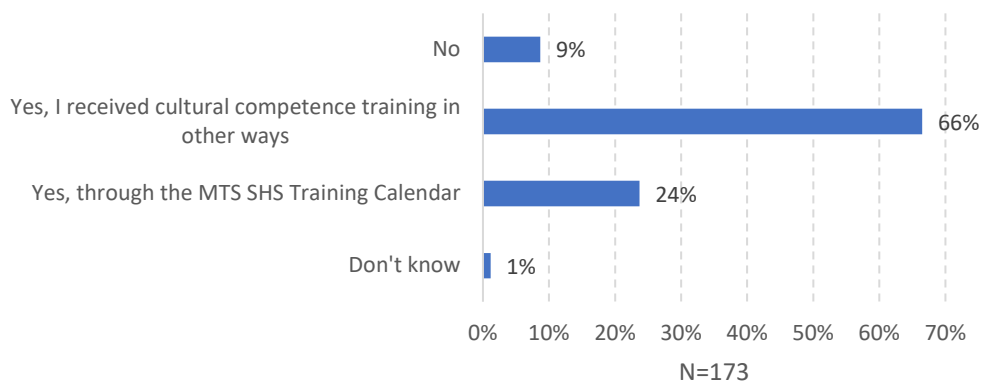
Most managers (61%) thought that the cultural competence training provided through the MTS Training Calendar met their program's needs (Figure 57). However, nearly a quarter of respondents (23%) thought the MTS cultural competence training did not meet their program's needs and a further 15 per cent thought it only 'somewhat' met their program's needs.

Figure 57: Does the cultural competence training provided through the MTS Training Calendar meet your program's needs?



A very high proportion of practitioners (90%) had undertaken cultural competence training in the past three years. However, only 24 per cent had accessed this through the MTS Training Calendar and 66 per cent had accessed cultural competence training in other ways (Figure 58).

Figure 58: I have undertaken cultural competence training in the past three years



Most (90%) of those who had accessed cultural competence training through the MTS Training Calendar in the past three years thought that it had helped them to do their job better (Table 15).

Table 16: Did the cultural competence training provided through the MTS Training Calendar help you do to your job better?

Answer	%	Count
Yes	90%	36
No	10%	4
<b>Total</b>	<b>100%</b>	<b>40</b>

Almost all practitioners (96%) felt that they have the skills to engage with Aboriginal clients in a culturally sensitive way (Table 16).

Table 17: I feel confident that I have the skills to engage with Aboriginal clients in a culturally sensitive way

Answer	%	Count
Yes	96%	159
No	4%	6
<b>Total</b>	<b>100%</b>	<b>165</b>

The survey asked how the MTS cultural competence training could be improved. The two key themes that arose were the need for more culturally relevant training that is specific to local communities, and better access to training.

Suggestions to make training more culturally relevant included:

- more Aboriginal teachers and more culturally appropriate context
- more involvement with local community leaders/workers in training
- training should be delivered by local Aboriginal people in the relevant communities to develop local knowledge and investment in local Aboriginal communities
- lunches with local elders.

... be mindful with bringing up past trauma (e.g., Massacres) as an Indigenous co-worker was present in my session and this was a trigger and upset her. Also consider having a local approach when presenting cultural training as each community is different.

Training that deepens understanding on cultural competence, rather than always revisiting the basics of understanding Aboriginal culture.

Several respondents indicated that their organisation provided their own cultural competency training or that they had accessed cultural competency training but not through the MTS Training Calendar.

The MTS training I have done for cultural competence was not as useful as the training I completed with the Carly and Keenan from Deadly Connections for example.

Others found the MTS training to be excellent.

The MTS cultural competence training I received was great! keep employing first nations people to provide the training, offer advanced courses for people that are interested in doing more and learning more.

Better access to training was needed in some locations (e.g., Liverpool, Campbelltown). Respondents also highlighted the need for more frequent and more flexible training, with availability of both online and face-to-face training to cater for people's preferences.

Wider variety of dates/locations so it is more accessible for all staff, we often cannot send several staff as it will leave us short staffed for the day when we are already managing a busy program.



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## 10. How effective is the Framework at improving staff wellbeing?

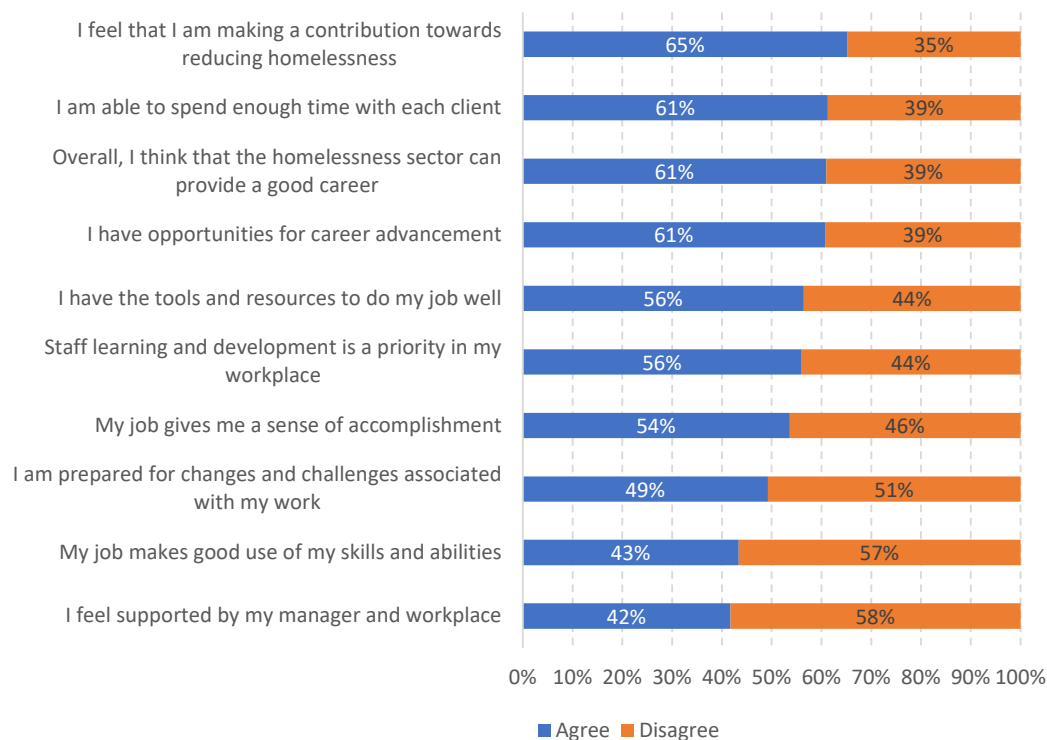
- **Sector staff feel they are contributing to reducing homelessness (65%) and can spend enough time with each client (61%).**
- **58 per cent of sector staff do not feel supported by their manager and workplace, and 57 per cent do not think their job makes good use of their skills and abilities.**
- **51 per cent do not feel prepared for changes and challenges associated with their work.**
- **Workers are motivated by a desire to create positive change and enjoy working as part of a team.**

This chapter captures manager and practitioner views on working in the NSW homelessness sector and how this affects their wellbeing.

Nearly two thirds (65%) of respondents feel they are contributing towards reducing homelessness. 61 per cent feel they can spend enough time with each client, think the homelessness sector provides a good career, and have opportunities for career advancement (Figure 59).

Concerningly, 58 per cent do not feel supported by their manager and workplace, 57 per cent do not feel their job makes good use of their skills and abilities, and 51 per cent do not feel prepared for the changes and challenges associated with their work.

Figure 59: How do you feel about working in the homelessness sector?



The question ‘what do you value about working in the SHS sector?’ elicited many responses, which included:

- helping others and creating positive change

Working together with client and a part of a team to achieve a positive outcome. (practitioner)

Ability to be able to contribute to community and assist people from my cultural background. (practitioner)

Being able to see the difference our work makes in women’s lives and the opportunity for women to have a positive future. (practitioner)

I truly value being able to walk alongside people who have spent most of their lives without a support network. I value empowering my clients and supporting them to find safe and stable accommodation. (practitioner)

I value that I can help to empower people who are at one of the worst points in their life and assist them to set goals and help them work towards achieving these Goals it is very rewarding when you get to see successful outcomes of your clients and to also be flexible enough to work with the clients ever changing situation. I value working towards overcoming the challenges the client faces. (practitioner)

I value the opportunity to support young people learn and grow, achieve their goals; develop their self-identity; self-esteem and confidence. I value the opportunity to support young people to be restored, maintain connection with family. I value the opportunity to work with a dedicated team who share the same vision. I value the knowledge young people can share, this assists organisations to grow and adapt to the needs of the young person. (practitioner)

Working with people from all walks of life and all with varied life experiences. I learn so much from people on a daily basis. (practitioner)

- working as part of a team.

Great team and work environment. (practitioner)

I love the diversity of skills that I can use and also improve on. My role is more about supporting staff than supporting clients, but I love seeing my team grown in their skills and strengths as it provides better outcomes for clients. (manager)

I value that I work in a caring team that strongly advocates for their clients and their needs. (practitioner)

I value the ability to walk alongside my team and clients to support change and help to make positive changes in people's lives. (practitioner)

I value the staff I work with, their ability to do what they do with limited resources, with time constraints and still deliver meaningful and sustainable outcomes with young people. I value the young people we work with. I am always amazed at the resilience of young people, and their determination to make changes in their life because they can see their life differently. (manager)

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## 11. How effective is the IP at supporting collaboration?

- **All programs collaborate with other organisations, either via MOUs (outside a JWA) (85%), informal agreements (70%) or JWAs (35%).**
- **At the program level, collaboration is usually formalised. Meanwhile, at the practitioner level, informal arrangements are the main form of collaboration.**
- **Collaboration facilitates better services and better client outcomes and allows services to support one another.**
- **Barriers to collaboration included tendering practices and competition, different ways of working, referral practices, breakdown of communication, lack of capacity within the sector, and staff turnover.**

All programs collaborate with other organisations in some way. Most use MOUs (outside a JWA) (85%), many use informal agreements (70%), and 35% have a JWA in place (Figure 60).<sup>7</sup> Programs most commonly collaborate with housing services (95%), counselling services (90%), homelessness services (85%) and allied health services (85%) (Figure 61).

Practitioners most commonly collaborate via informal agreements (outside a JWA) (69%) or with MOUs (57%), 29 per cent of practitioners collaborate via JWAs and 7 per cent do not collaborate. Practitioners most commonly collaborate with homelessness services (93%), housing services (89%) and community mental health services (88%) (Figure 61).

Overall, there are very high levels of collaboration in the sector at the program level, where collaboration tends to be formalised (MOUs), and at the practitioner level, where collaboration is mostly via informal agreements.

All programs and most practitioners collaborate with other services in the sector, with collaborations between homelessness and housing and health, mental health and allied health services being particularly prevalent.

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<sup>7</sup> A Joint Working Arrangement is a broad concept used to describe two or more organisations working together for a variety of reasons, including to deliver services. JWAs are essentially structures for collaboration between organisations for the provision of services and can range from informal alliances, through to the joint delivery of a project. A JWA is the document that covers the roles and responsibilities of each party in a JWA arrangement. JWAs are frequently used to govern the relationships between Aboriginal led and mainstream SHS providers in the NSW Homelessness sector.

Figure 60: Does your program collaborate/interact with other services?

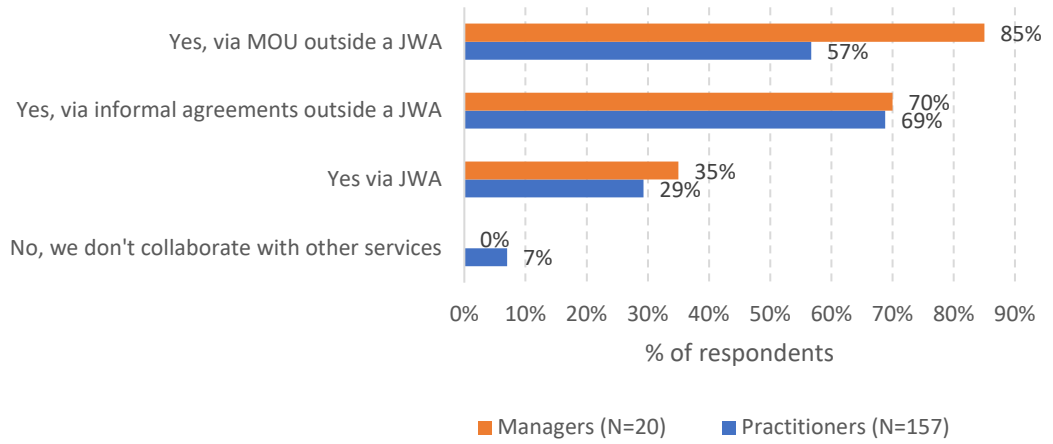
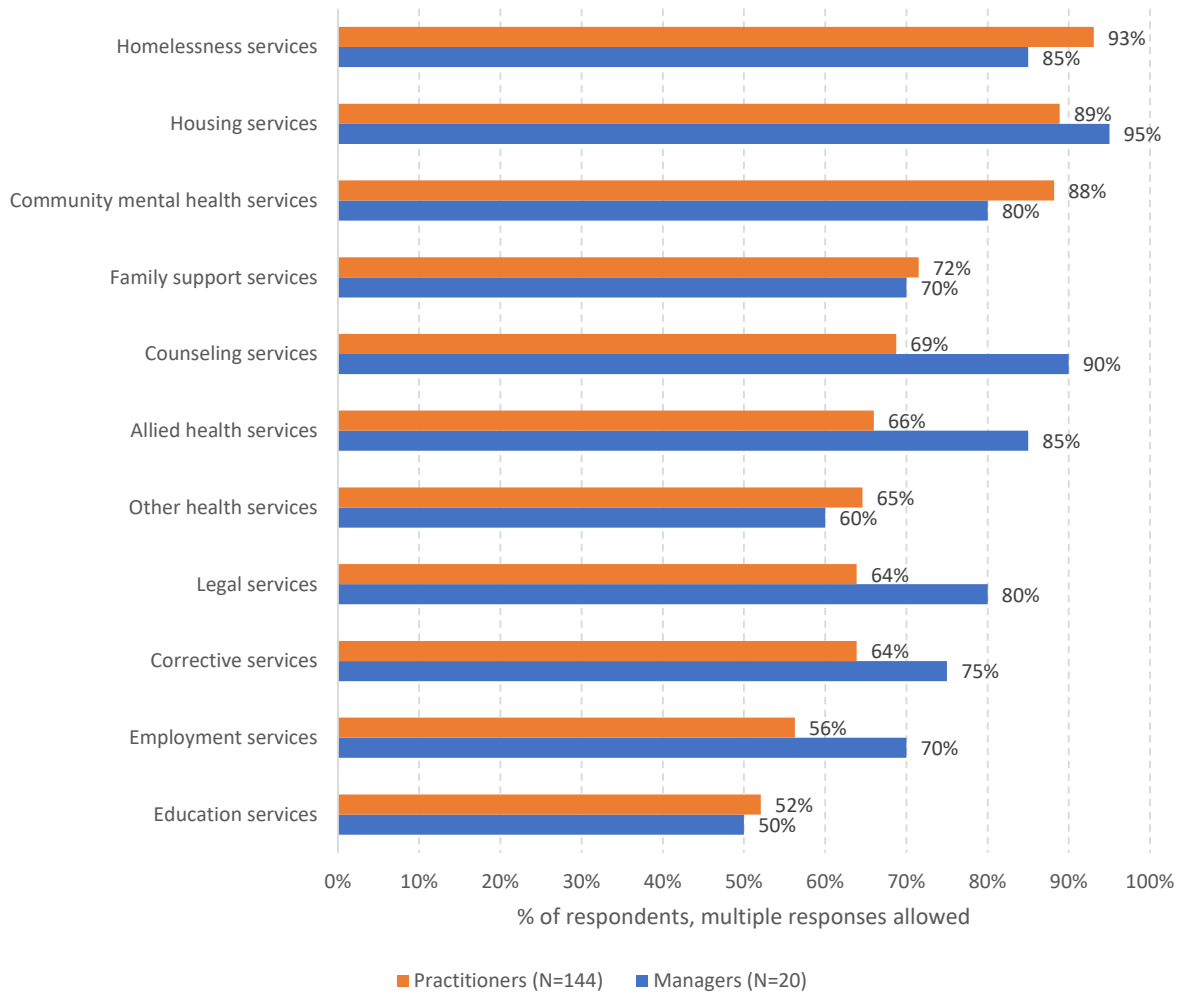


Figure 61: If your program does collaborate with others, please indicate with which type of services



Barriers to collaboration included:

- COVID-19 (restrictions, workload, difficulties in providing services, constraints on face-to-face meetings)
- different ways of working
- Different expectations of each other that have not been clearly identified. (practitioner)

Sometimes services do not want same outcome for [the] client. (practitioner)

Inflexibility of some services to provide support to vulnerable people. (practitioner)

- lack of understanding about what services do

A lack of understanding of the [role of our service] from other services and an expectation [our service] provides property, houses and brokerage, along with mental health and AOD support. (practitioner)

Other services not being aware of the services [we] provide - often expecting more than we can deliver, e.g., endless brokerage. (practitioner)

- referral practices

Improper use of referrals by some people. Receiving several referrals from organisations with incomplete and/or incorrect information ... ; organizations closing support period straight away once referral is accepted - for example DCJ Housing referring clients to us, and then stopping their support immediately instead of working collaboratively with us to support client. (practitioner)

Clients being verbally referred to [our service] that don't fit target client group, when referring service is contacted, nobody takes responsibility for referral, can be frustrating for both client ... and service staff as client is usually in a vulnerable situation, do a formal referral for client so they are supported to appropriate service. (practitioner)

No consent or contact details. (practitioner)

- tendering practices and competition

A tender system which promotes partnership and consultation, then pits services against each other for funding. (practitioner)

Competing for funding. (practitioner)

- lack of capacity

All services being at capacity. (practitioner)

All the other work I need to do. (practitioner)

Waiting period to access and/or receive support for clients. (practitioner)

Caseloads/ waiting lists/ lack of services/ gaps in services. (practitioner)

- not understanding client needs

A lack of understanding in supporting LGBTIQ+ people. (practitioner)

Expectations to accepted referrals based on DV when the main presenting issue is Mental Health or Drug & Alcohol abuse. (practitioner)

Having a shared understanding of working with clients with complex trauma, complex mental health issues and problematic drug and alcohol use. (practitioner)

Staff who are judgmental and not trained in trauma-informed practices or strength approach - Staff that don't understand addiction or mental health and often label clients as "lazy" or "not engaging". Staff that don't understand Homelessness as a consequence of a number of factors, rather than someone who "doesn't help himself". (practitioner)

Some services not being able to work appropriately with complex clients and understand their needs - more advocacy needed, progress to outcomes can take longer in these circumstances. (practitioner)

- coordination and communication

Managing difficult decisions and outcomes with other organisations when they let clients down. (manager)

Ensuring there is minimal 'doubling up' and a client is not being 'over serviced'. (manager)

Definitely communication, it is very difficult to work openly with some other services. Even though the outcome for the client is better when communication and handovers are thorough. (practitioner)

Getting all stakeholders together at the same time. (practitioner)

Not knowing who to speak with. E.g., call Housing and speak with a different CSO every time. This process could be streamlined if we had specific people we could access and build professional relationships with. (practitioner)

Not knowing who to go to for support. (practitioner)

People not getting back, miscommunication. (practitioner)

- lack of housing and other services, especially in regional and rural areas

Lack of housing and accommodation providers. (practitioner)

Not enough service in our local area and long waiting periods for clients being referred to other services e.g.: mental health, doctors (Gunnedah has no Doctors available to service the township). (practitioner)

Not enough services to assist homelessness crisis. (practitioner)

Other agencies understanding the housing crisis - often they are not educated around the barriers that many of our clients face to access housing or the high demand of housing in our area so they believe that once they are simply linked with our service we can 'just give them a house' which is unfortunately not the case.

- cultural competence

Racism and paternalism, non-Aboriginal people thinking they know better than you about Aboriginal issues and how to overcome them. Services not seeing that they are inherently racist by their structure and nature? Some don't think they need to collaborate because they have 1 or 2 Aboriginal workers? (practitioner)

- **staff turnover.**

Staff turnover and losing contact with one or two familiar workers. (practitioner)

Staff turnover and new staff not being aware of MOU. (practitioner)

Respondents described the positive outcomes of collaboration as better services, better outcomes for clients, and services supporting each other.

- **better services and better client outcomes**

Scope of service delivery and specialisation in service delivery - often at no additional cost except for time in coordination, to our service. Good coordination of supports for our service users. Inflow and outflow of referrals. Problem solving / information share. (manager)

Clients don't need to re-tell their story which reduces trauma, also more accurate information as clients can become overwhelming by their story and missing important details. (practitioner)

Better outcomes for clients and service production when we collaborate and less traumatic experience due to not repeating the story. (practitioner)

Clients building trust with different people so they don't rely on one person alone. (practitioner)

Able to provide client with cultural and safe practice and interaction. (practitioner)

Good networking assists in gathering services related to a particular client to make positive change or increase opportunities for client. (practitioner)

- **services supporting each other**

Communicating with another service to work together to have a positive outcome to support each other. (practitioner)

Being a small town, the services know each other and work collaboratively to achieve an outcome for clients and community. (practitioner)

Clients changing phone numbers, disengaging, or being admitted to hospital, if they have a community mental health worker on board, they usually let us know what is going on for that client. (practitioner)

Increased specialised support, broader net of supports, increased skill for staff and development through collaboration. (practitioner)

Pooling resources to meet the needs of clients, co-case management and providing a support network, shared training and information. (practitioner)

I have been able to maintain very good relationships with corrective services with the consent of the client, which has been incredibly helpful to both sides. (practitioner)

Increased awareness to the Real Estate Agencies. (practitioner)



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## 12. Conclusion

This chapter assesses the evidence presented in relation to the evaluation questions. Some evaluation questions will be addressed in the final report, including the questions relating to the formation of the future NSW Homelessness Industry Workforce Development Strategy.

### 12.1 Impact and process evaluation of the NSW Homelessness Industry and Workforce Development Strategy 2017–20

This section assesses how well the 2017–20 NSW Strategy was implemented and delivered and what its impact has been. The sub-question ‘what impact did the 2017–20 Strategy have on the NSW Homelessness Service Sector?’ will be answered in the final report.

#### How well were the *NSW Homelessness Industry and Workforce Development Strategy* and its projects implemented and delivered?

Overall, the evidence from the survey indicates that the 2017–20 Strategy was implemented and delivered well and was well received by the sector. The impact of COVID-19 on the sector was widely acknowledged.

- **IP effectiveness:** Overall, 85 per cent of managers thought that the IP had been effective or very effective in responding to sector needs in the past 12 months.
- **ASES:** ASES supports met the needs of most programs and practitioners.
- **COVID-19:** The IP's COVID-19 initiatives met the needs of practitioners, with accommodation and housing (84%) and SHS workforce matters (81%) rating highly. However, initiatives in relation to rough sleepers did not meet the needs of 44 per cent of practitioners. Managers thought COVID-19 initiatives met their program's needs, especially webinars (86%) and accommodation guidelines (76%).
- **CoPs:** Managers and practitioners thought CoPs met their needs and helped sector staff to do their job better, with the DFV CoP seen to be particularly effective (77%).
- **Network meetings:** Network meetings are effective in communicating up-to-date sector information. However, around a third of respondents were unaware of Network meetings.
- **Client Satisfaction Survey:** Nearly all practitioners thought that the client satisfaction survey either met their needs (61%) or partially met their needs (34%).

#### How effective are communications?

In relation to communications, the evidence indicates that overall, IP initiatives and messages reach the sector. However, not all messages from the IP reach all parts of the sector workforce equally. As a result, not all sections of the workforce are aware of all IP initiatives and opportunities that are relevant to them.

For example, around a third of respondents were unaware of Network meetings.

The evidence indicates that messaging about the ACCORD and cultural competence needs improving. While most managers were aware of the ACCORD, many practitioners were not.

## 12.2 Formative evaluation and training needs assessment of the NSW homelessness services workforce

This part of the evaluation establishes the characteristics and training needs of the NSW homelessness services sector workforce to inform the development of the Future Strategy.

### What are the characteristics of workers in NSW homelessness services?

- **Diversity:** The NSW homelessness sector workforce is largely female (78%), most are born in Australia (82%) and speak only English at home (83%); 8 per cent identify as Aboriginal and Torres Strait Islander.
- **Age:** The workforce is largely in the 25–54 year age group, followed by those aged 55 years and over. Only a small proportion of the work force is aged under 24 years.
- **Qualifications:** The NSW homelessness sector workforce is highly educated, with 51 per cent holding a Bachelor Degree or higher, and one in four currently undertaking a formal course of study related to their work.
- **Employment:** Most staff are employed on a permanent ongoing basis (73%) and work full-time (77%).
- **Time in workforce:** The sector workforce is stable and attracts few new entrants; 60 per cent of workers have been in the sector for five years or longer and only 15 per cent have been in the sector for 12 months or less. Lack of prospects for job progression and low pay may be impacting the sector's ability to attract and retain staff.
- **Client cohorts worked with:** Sector staff usually work with a breadth of different client groups (seven on average), most commonly with Aboriginal and Torres Strait Islander people, people with mental health problems, CALD people, and people sleeping rough.

### How well do the existing SHS L&D Framework and Capability Framework meet the needs of the NSW homelessness sector and how can they be strengthened?

- **Capability framework:** there was a high level of awareness of the Capability Framework among managers; most (85%) are aware of the SHS Workforce Capability Statement and most (75%) think it meets their program's needs.
- **MTS training level of uptake:** Managers indicated that 67 per cent of program staff had attended MTS training in the 12 months prior to the survey, with a median of four days training attended.
- **Training for new staff:** Managers indicated that almost all new staff were provided with induction training through the MTS Training Calendar. Training for CIMS client records and case management was used by almost all (94%), followed by working with SHS clients (76%). On average, new staff received four units of induction training. 63 per cent of respondents thought the MTS Induction training met the needs of new staff. However, 26 per cent thought it did not, and 11 per cent did not know.
- **Amount of training received:** Most managers thought staff received the right amount (47%) or almost enough training (29%). Most practitioners (86%) thought that adequate skill development opportunities were available to them, though 29 per cent of respondents did not access MTS training at all during the past 12 months.
- **Effectiveness of training received:** 84 per cent of managers thought the training was effective or very effective in helping staff to do their jobs better; 94 per cent assessed the training offered through the MTS Training Calendar as relevant to their program's needs. Most practitioners felt that MTS better prepared them for their job (74%).

- **Accessibility of training:** Managers and practitioners alike were appreciative of the increased availability of training on Zoom, which increased accessibility. Many respondents commented that access to training is constrained in regional and rural areas (especially for face-to-face training), and that availability of courses (the right course at the right time, available training places) remains an issue.
- **Barriers to participating in training:** Time management issues (22%), lack of training opportunities in regional centres (18%), and a lack of suitable courses (18%) constrained practitioners' access to training. Around half of managers thought staff absences due to training affected services.
- **Training accessed:** Working with people with mental health issues was the MTS training most accessed by practitioners. This was followed by working with Aboriginal and Torres Strait Islander people and victims of DFV. Most of this training was accessed within the past five years. The most common training accessed for core and specialist skills was for trauma informed practice, CIMS and case management.
- **Appropriateness and comprehensiveness of training offered:** Practitioners' views on the quality and accessibility of MTS training balanced those who felt training was of high quality and met their needs, and those who wanted more diverse courses, more advanced and specialist skills, and more accredited training.
- **Cultural competence training:** The issue of cultural competence training attracted many comments. While many respondents felt this training was beneficial to them, many also noted the need for more locally specific training, increased use of Aboriginal trainers and alternative modes of delivery. Several programs/ organisations conducted their own cultural competence training or used trainers outside the MTS Training Calendar.
- **Staff wellbeing:** Sector staff felt they are contributing to reducing homelessness (65%) and can spend enough time with each client (61%). 58 per cent of sector staff do not feel supported by their manager and workplace, and 57 per cent do not think their job makes good use of their skills and abilities. 51 per cent do not feel prepared for changes and challenges associated with their work. Workers are motivated by a desire to create positive change and enjoy working as part of a team.

### How effective is the Framework at improving cultural competency?

Crucially, the survey highlighted that Aboriginal organisations and Aboriginal workers face unique challenges, which were further explored using a series of tailored qualitative consultations. The findings from these consultations are detailed in the final report.

- **Aboriginal staff:** NSW SHS organisations employ relatively few Aboriginal staff members, and even fewer are in managerial, leadership, or executive positions.
- **Recruiting Aboriginal staff:** Many organisations report difficulties attracting and retaining Aboriginal staff.
- **ACCORD:** There is a notable divergence in the awareness of the ACCORD between managers (who have greater awareness) and practitioners, many of whom don't know about the ACCORD.
- **Consulting with Aboriginal stakeholders:** Organisations need to communicate their approach to Aboriginal stakeholder consultation, and the outcomes of this, more clearly across the organisation. Organisations also need to put mechanisms in place to facilitate genuine engagement with the issue of providing culturally appropriate services.
- **Culturally appropriate services:** The main mechanisms used by organisations to ensure that services were culturally appropriate were: referral to culturally specific services, having an Aboriginal case worker or staff member, providing cultural competence training, and having policies in place. At the same time there was acknowledgement that these mechanisms may not be enough; there is a limited number of Aboriginal led and Aboriginal specific services to which clients can be referred, and most organisations employ few Aboriginal workers. Balancing this, several programs have put in place specific mechanisms to facilitate genuine engagement with local Aboriginal communities.

- **Supporting Aboriginal clients and staff:** The data demonstrates that a gap in understanding exists between managers and practitioners about whether and what kinds of mechanisms are in place to support Aboriginal clients and staff to resolve issues in a culturally appropriate way. Comments provided demonstrate that while a range of different mechanisms are used, there is scope for leadership by the IP to assist organisations to further develop and refine this aspect of providing culturally safe and competent workplaces in the NSW Homelessness sector.
- **Cultural competence training:** Most NSW homelessness sector organisations require their staff to undertake cultural competence training and most practitioners feel that they have the skills to engage with Aboriginal clients in a culturally sensitive way. However, the MTS training does not fully meet organisations' needs and two thirds of practitioners have accessed cultural competence training in other ways. This highlights that there is scope to review how cultural competence training is delivered through the MTS Training Calendar, including making training more culturally relevant to specific communities and providing better access to training.

There is considerable room for improvement in increasing organisations' cultural competence and safety. This includes:

- Increasing the number of Aboriginal staff members, especially in senior management and executive positions.
- There is a need for the IP to engage in further promotion, education and training about the ACCORD. This would increase knowledge across all levels of the sector, particularly among practitioners, and assist organisations to implement the ACCORD in meaningful ways. In addition, practical strategies are needed to ensure that the ACCORD is implemented in ways that increase the cultural competency of SHS organisations and their staff (see section 9.2 for information about the ACCORD).
- There is scope for the IP to provide leadership, education and training to assist NSW homelessness sector organisations to further develop and strengthen their capacity to provide culturally appropriate services and advocate to DCJ.
- There is considerable scope for the IP to offer support and training to leaders in NSW homelessness sector organisations to develop and strengthen their capacity for meaningful engagement with Aboriginal communities, and to strengthen the provision of culturally appropriate services for Aboriginal clients.

### **What are the priority training areas across the NSW homelessness service workforce?**

The skills and capabilities of the NSW homelessness sector workforce largely meet the needs of the sector, though there is room for improvement, particularly in relation to cultural competence.

- Managers' training priorities for staff are to equip them for working with people with mental health needs; Aboriginal and Torres Strait Islander people; LGBTQI+ people; victim survivors of DFV; and people vulnerable to AoD misuse. Training priorities for specialist skills are advanced mental health and cultural competence.
- Managers identified strategic planning and governance management for the community sector as the key priority for skills development for their leadership team. Training and mentoring for emerging leaders are a priority.
- Managers indicated that needed additional training is often not available through the MTS Training Calendar (29%).
- Practitioners' priorities for management and leadership training were professional and clinical supervision for managers, building workplace culture, and emotionally intelligent leadership.
- Practitioners' training priorities were cultural competence training; access to training in regional areas; more availability of training for advanced skills; and leadership; career development and accredited training.

### How can the SHS L&D Framework and Capability Framework be strengthened?

Survey results show that there is a high uptake of MTS training across the sector. The widespread use of online delivery in response to the COVID-19 pandemic has broadened access to training for those in rural and regional areas. Findings indicate that many practitioners hope the availability of online training will continue beyond the pandemic, but that this should be balanced with face-to-face training.

Barriers associated with training include the fact that training courses are often booked out, courses is not available when and where needed, and the time needed to access training is not available. This indicates that there may need to be greater flexibility in how, how often and when training courses are provided.

Many workers have been in the sector for a long time and several indicated that they had completed all training relevant to them. These workers indicated that they would be interested in new training especially around advanced and specialist skills.

While induction training is frequently accessed by new staff and is generally well received, more than a quarter of managers think it does not meet their needs. This indicates a need to review the induction training.

In terms of the wellbeing and capacity of the workforce, it seems there is scope to better utilise workforce skills (a high proportion of workers feel their skills are not being used well) and to create more supportive work environments.

There is a need to review and improve cultural competence training in relation to its content and relevance and the mode of delivery.

Similarly, survey responses indicate that there is a significant gap in awareness of the ACCORD with managers generally being aware of it, but many practitioners not aware. This indicates a need to review how the ACCORD is communicated and its relevance (this is further explored in a separate evaluation report based on consultations with Aboriginal organisations and staff).

## 12.3 Assess the organisational sustainability across the NSW homelessness sector

This section answers evaluation questions in relation to the characteristics of NSW homelessness services and the sustainability of homelessness service providers. Issues relating to the main risks to sustainability will be addressed in the final report.

### What are the characteristics of NSW homelessness services?

Organisations in the NSW homelessness sector are diverse in terms of funding received, number of staff employed, and geographic areas serviced.

- **Location of services:** Services are concentrated in the greater Sydney area. The NSW homelessness sector provides services in metropolitan (42%), regional (40%) and rural (17%) areas (Figure 10). Many of these services are located in Sydney (16%) and south western Sydney (12%). Far fewer services are available in the Illawarra Shoalhaven (2%), far west NSW (3%), western NSW (4%) and Murrumbidgee (4%) areas (Figure 11).
- **Funding:** 11 out of 23 responding organisations have an annual income of \$1 to \$5 million, five have funding over \$10 million, but three have funding of less than \$500,000 per year (Figure 17). Most of this is NSW Government funding (Figure 18).
- **Services provided:** Most organisations provide a range of SHS services, most often a combination of case management, support to access housing and sustain tenancies, client advocacy, information, advice, and referral (Figure 12). Additionally, 43 per cent of responding organisations provided community housing (Figure 13), which indicates that there is considerable overlap in service provision between SHS service providers and community housing providers in NSW.

- **Client groups targeted:** Around a third of organisations provide generalist homelessness services. Many organisations provide services that are targeted to particular client groups. The most prominent target groups are people sleeping rough (49%), women and children experiencing DFV (44%), and Aboriginal and Torres Strait Islander people (43%) (Figure 14).
- **Services for Aboriginal and Torres Strait Islander people:** Respondents estimated that around 35 per cent of clients accessing services identify as Aboriginal or Torres Strait Islander, making this a major client group. 56 per cent of managers answered that their organisation is contracted to provide Aboriginal specific services (Figure 16). In addition, all respondents were asked whether their organisation provides services to Aboriginal and Torres Strait Islander people: 43 per cent answered no; 27 per cent worked for organisations that provide Aboriginal specific services but are not contracted to do so; and a further 27 per cent are contracted to provide Aboriginal specific services (Figure 15).
- **Aboriginal led organisations:** There is only one Aboriginal-led organisation in the NSW Homelessness sector that is funded directly by the NSW Government to provide SHS services. Other Aboriginal-led organisations in the sector work with mainstream organisations through JWAs. This issue will be further explored in a separate evaluation report based on consultations with Aboriginal organisations and workers in the NSW homelessness sector.
- **Staffing:** NSW homelessness sector organisations vary greatly in size, with staff numbers ranging from three to 253 staff (Figure 19). Most staff are employed full-time, and most are on permanent contracts or fixed term contracts up to three years (Figure 20). Most programs usually employ staff on permanent contracts (43%) or on fixed term contracts up to three years long (22%) (Figure 20). Many organisations have targets to employ people identifying as Aboriginal and Torres Strait Islander, people from CALD backgrounds, women, and people with lived experience of homelessness (Figure 21).
- **Changes to staffing:** Overall, the number of staff employed by organisations has stayed largely the same or increased slightly in the past year (Figure 22).
- **Ability to recruit staff:** An organisation's reputation, fringe benefits and flexible working hours are positives in terms of attracting new staff. However, a lack of applicants with the right qualifications or skills is an issue for many organisations (Figure 24).
- **Ability to recruit board members:** Half of the responding organisations found it difficult to recruit members with lived experience to their Board or Management Committee. A quarter found it difficult to get members to take up opportunities for governance training or to recruit members with appropriate skills (Figure 25).

### How sustainable are NSW homelessness service providers?

Overall, the data paints a picture of a sector that is heavily reliant on government funding. Issues of sustainability arise where organisations cease to receive government funding, which can imperil their ability to continue to deliver services and remain sustainable.

Aboriginal organisations struggle to access direct government funding to provide SHS services. Despite the high proportion of Aboriginal and Torres Strait Islander clients, only one Aboriginal controlled organisation receives funding from the NSW Government to provide homelessness services, with other Aboriginal organisations working together with mainstream organisations via JWAs. Many non-Aboriginal organisations are contracted to provide Aboriginal specific services. This issue was further investigated in a separate round of consultations with Aboriginal organisations and sector staff.

The characteristics of the sector workforce (section 4) indicate that there may be future issues in terms of sustaining and refreshing the workforce. While the sector workforce is stable, it attracts few new entrants and has a low proportion of younger workers under 24 years of age. Lack of prospects for job progression and low pay impact the sector's ability to attract and retain staff; lack of applicants with the right skill set constrains organisations' ability to recruit suitable staff. This indicates that there is a need to develop strategies to improve the attractiveness of the sector for new and younger workers and to develop pathways for job progression.

## **Collaboration**

Collaboration between agencies and services is key to the sustainability of the NSW homelessness sector. Collaboration enables pooling of resources, facilitates better services and better client outcomes and allows services to support each other.

- All programs collaborate with other organisations, either via MOUs (outside a JWA) (85%), informal agreements (70%) and JWAs (35%).
- At the program level, collaboration is usually formalised. At the practitioner level, informal arrangements are the main form of collaboration.
- Barriers to collaboration included tendering practices and competition, different ways of working, referral practices, breakdown of communication, lack of capacity within the sector, and staff turnover.

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# Appendix 1: Responding organisations

- Aboriginal Corporation for Homeless and Rehabilitation Community Services (ACHRCS)
- Action on Housing Older Women
- Anglicare
- Armidale Women's Shelter
- B Miles Women's Foundation
- Bonnie Support Services Ltd
- Bungree Aboriginal Association Limited
- Carrie's Place
- CatholicCare
- Detour House Inc
- Domestic Violence Service Management NSW
- Foster House
- Gunnedah Family Support
- The Haymarket Foundation Ltd.
- Housing Plus
- Housing Trust
- Jenny's Place
- Link Wentworth
- Marist 180
- Mission Australia
- Momentum Collective
- Narrabri & District Community Aid Service
- Neami National
- Newtown Neighbourhood Centre
- Nova for Women & Children
- Parramatta Mission
- Path 2 Change
- Platform Youth Services
- Samaritans Foundation
- Shoalhaven Women's Resource Group
- Social Futures
- St Benedict's Community Centre
- St Vincent de Paul Society
- The Gender Centre
- The Girls Refuge
- The Salvation Army
- Tumut Regional Family Services Inc.
- Twenty10
- Uniting
- Wesley Mission
- Women Housing Company
- WUNH Inc
- Yacaaba Centre
- Information & Counselling Service Port Stephens Inc





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