

Intensive Client Support (ICS): 24-month case studies evaluation



Research Report
Gravitas Research and Strategy Limited
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MINISTRY OF SOCIAL
DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

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1 Executive Summary

The Intensive Client Support (ICS) trial was a randomised controlled trial developed by MSD in response to welfare valuations, which identified that some clients aged 18-39 years who entered the welfare system as teenagers have a significant share of welfare liability, and face multiple barriers to employment. The trial focused on improving off-benefit outcomes for two cohorts of this client group receiving Jobseeker Support with full-time work obligations:

- Early Entrants (EEs), who first received a benefit aged under 18 years and are now aged 18-29 years, and
- Entrenched Beneficiaries (EBs), who first received a benefit aged less than 20 years and are now aged 30-39 years.

On the trial, clients received support from Intensive Client Support Managers (ICSMs) who provided a more flexible, tailored and intensive service than traditional case management. The trial began in March 2015 and ran for three years at five sites (Manurewa, Naenae, Porirua, Invercargill, and Rotorua).

Key themes and findings

Qualitative findings collected for this 24-month evaluation of the ICS trial indicate that it is effective in contributing to client outcomes of:

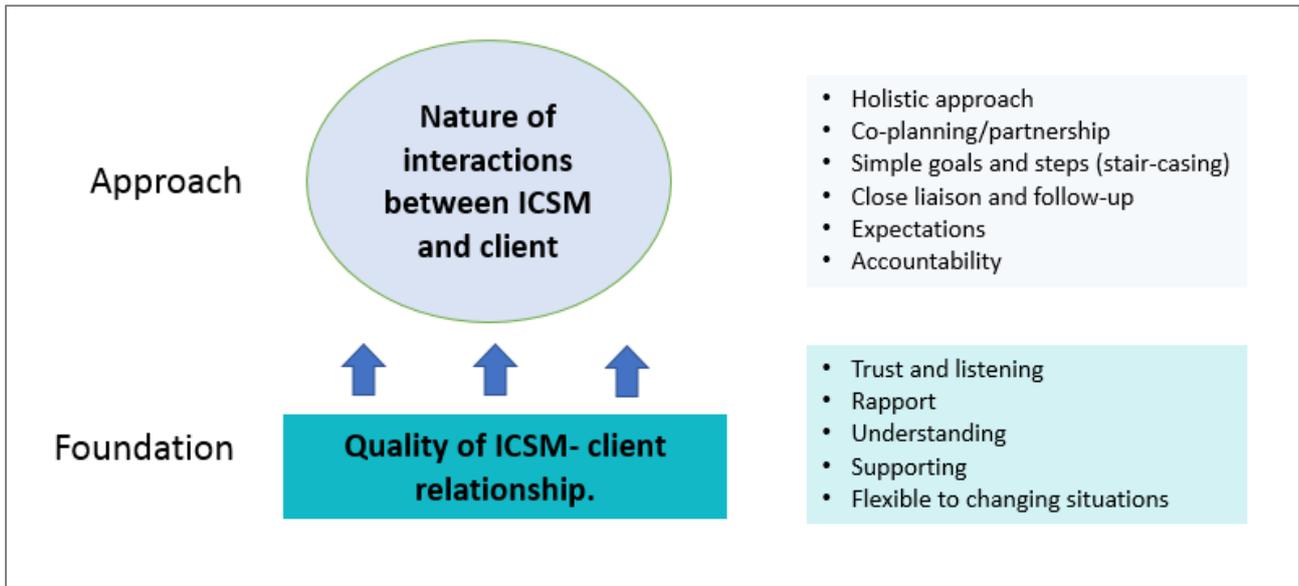
- stair-casing (ie taking progressive steps)
- sustainable employment, and
- benefit reduction.

As with any social service intervention, the degree to which it is effective varies between individuals and is dependent on each client's unique set of circumstances, past experiences, challenges, and barriers to employment.

The ICS approach was preferred by both interviewed clients and interviewed ICSM's. All interviewed clients cited the quality of their engagement (which often took place over the phone) with their ICSM as fundamental to identifying and addressing barriers to their employment, with supported goal-setting improving their circumstances. Engagement through ICS tends to be dynamic, driven by client's needs, and dependent on current circumstances, which often change over the course of a client's service engagement.

At its most successful, the approach appears to empower clients, and create or re-awaken self-motivation and self-belief, the lack of which is sometimes a critical barrier to progress for clients. Immediacy and responsiveness builds and supports momentum and motivation.

Client-ICSM Engagement



Interviewed clients faced a range of barriers to employment and felt they benefitted from customised approaches to their needs. Adequate housing appears to be the most essential need as without adequate housing it is difficult for clients to have their physical and mental needs sustainably met – for example, improving one’s diet is difficult if you are living in a car.

There were a variety of client responses to the service, with efficacy dependent on client circumstances, past experiences, challenges, and willingness to effect change in their lives. It appears that clients who have come onto the ICS trial and are close to being work-ready, both in terms of skills, training and/or experience, and in terms of their attitude, outlook, and personal wellbeing, are able to achieve an off-benefit (ie, the client moves off a benefit) outcome relatively quickly. For other clients, who come to the service with more entrenched, complex barriers, the ICS service is less likely to result in an off-benefit outcome in the short term. However, this is not to say that the service is less effective for these clients.

Many clients for whom employment may be a long-term, rather than short or medium term, goal, achieve outcomes from engagement from the ICS service that provide an essential, stable, sustainable foundation of health and wellbeing from which employment-related skills can be established. This means that, once they do become work ready, these clients are more likely to achieve more sustainable employment.

The ICSM-client relationship underpins the success of the service and it is therefore critical that ICSMs have the necessary skills and personal attributes to be able to effectively meet the needs of this client group.

Feedback from both clients and ICSMs indicates that qualities of a good ICSM include an ability and willingness to connect with their clients; adopt a holistic and long-term view of client needs and their barriers to work-readiness; customize their approach; and be persistent but flexible in their approach and interactions.

The ICSM role can be challenging, and maintaining emotional wellbeing for ICSMs is important for safety and optimal service delivery. Given that client selection for the ICS trial is data driven and that those with less complex barriers are likely to move off the service and into employment sooner, it is likely that caseloads for ICSMs will become increasingly complex and challenging over time.

1.1 Background and Method

The Intensive Client Support (ICS) trial is a three year randomised control trial. It focuses on improving off-benefit outcomes for two cohorts of clients – Early Entrants (aged 18-29) and Entrenched Beneficiaries (aged 30-39 years) – who entered the welfare system as youth and who are currently receiving Jobseeker Support with full-time work obligations. On the trial, clients receive support from ICSMs who provide a more intensive service than traditional case management, through, for example, smaller caseloads and a holistic approach.

In August 2017, MSD commissioned *Gravitas Research and Strategy* to collect qualitative data for the 24-month stage evaluation, using a case-study approach with clients, to assess how the trial has contributed to client outcomes of ‘stair-casing’ towards goals and work.

Data was collected through face to face in-depth interviews with 26 clients and all six of the current Intensive Client Support Managers across the five service sites (Manurewa, Naenae, Porirua, Invercargill and Rotorua x 2) and via review of client engagement documentation.

1.2 Context

The client group for the service commonly have complex personal and situational support needs, many of which may only become understood by ICSMs after several meetings. In addition, the nature of clients’ situations can often mean that crises unexpectedly arise and often repeatedly, which distracts from any focus on developing work readiness or job seeking. ICSMs typically spend considerable time working with clients on aspects of their personal situations and wellbeing (such as health, housing, and overcoming addictions), that are not directly work-related, but that have a significant impact on work-readiness.

Most clients (n=22) interviewed were currently receiving a benefit. As the sample for this 24-month evaluation included only four clients currently off-benefit, it is possible that the perspectives of those

clients who have been able to achieve off-benefit outcomes in the short or medium term were under-represented in the data.

However, it is important to consider that, as the service continues, it may become increasingly challenging to achieve an off-benefit outcome for ICS clients. Those clients who enter the service with less complex challenges and barriers to off-benefit outcomes, and those who enter the service close to being work ready, can be expected – and do – move off the service relatively quickly.

In contrast, for those facing more complex and entrenched barriers, it is likely to take considerably longer to achieve off-benefit outcomes. ICSMs believe that there is a group of clients for whom the barriers to employment are so great that they may never be sustainably off-benefit. Assuming that the size of ICSMs' caseloads stay relatively stable, the share of the caseload facing significant barriers could be expected to increase (as they remain in the service, leaving less space for new clients, some of whom may face less significant barriers) and so over time it can be expected that proportions of clients achieving sustainable off-benefit outcomes may decline.

However, this is not to say that, over time, the ICS service is becoming less successful. ICSMs and the clients themselves are extremely positive about the diverse range of other outcomes ICS has enabled clients to achieve and how life-changing (and in some cases, life-saving), participation in ICS can be. These outcomes form a critical, robust, resilient foundation of physical, mental and emotional health and wellbeing upon which employment skills can be built once the client is ready.

1.3 Stair-casing

'Stair-casing' is generally viewed by ICSMs as an umbrella term that encompasses any behaviour that clients engage in that, in some way, improves their current circumstances and wellbeing, and progresses their likelihood of a sustainable work outcome in the long term. Stair-casing activities span a broad spectrum, both in terms of their focus and in their relative level of direct influence on off-benefit outcomes, and are perceived by ICSMs and clients to be an effective mechanism for progressing toward goals. Stair-casing activities can be broadly classified into three groups:

1. those that are related to the client's physical and mental 'survival';
2. those that are focused on the wellbeing of the client, including addressing basic life skills; and
3. those that are more directly related to finding employment.

Discussing and being able to identify barriers to physical and mental health, wellbeing and employment in a structured way and then collaboratively plan for stair-casing activities to address challenges and improve work preparedness has proved very valuable to clients, providing a sense of direction and purpose, often previously lacking. Many clients interviewed had no prior experience of supported goal setting.

1.4 Outcomes

Although time off-benefit is the key metric by which success of the ICS trial is measured, ICSMs and clients see other, significant and positive outcomes. Positive outcomes, viewed as measures of success, incorporate aspects of personal growth and development, such as increased confidence and motivation that are less tangible and less easily measured. There is also a sense among ICSMs that the full value of this investment approach may only become apparent and measurable in the long term.

1.5 Client Perspective

All interviewed clients were positive about their experiences of the ICS service. This was founded on the relationship and support of their dedicated ICSM. All clients said they would (and have) recommended the ICS approach to others. Clients prefer the ICS approach to their previous case management experiences, underpinned by the dedicated relationship with their ICSM and the support and trust this affords.

Most clients can identify the progress they have made as a result of the ICS service, often describing significant impacts on their lives and their sense of wellbeing, purpose and progress. Many participants could articulate their goals and plans in a way that they said they would not have been able to prior to receiving the ICS service. Even where they experienced set-backs on the service (for example, not being able to sustain work, or taking on increased debt), clients felt that, overall, they have made progress and are now in a more positive position with clearer direction than they would have been under an alternative case management service.

1.6 ICSM Perspective

All ICSMs interviewed were positive about the service and its impact on their clients. They feel that the intensive case management approach is fundamentally more effective in dealing with the situational, personal, and financial challenges faced by clients and which are significant barriers to becoming work-ready, or even employment focussed.

ICSMs adopt a holistic approach to working with clients in which they seek a deep understanding of a client's individual needs and circumstances. Stair-casing activities are not necessarily focused directly on an off-benefit outcome but rather on progress toward improved life circumstances and personal position, which then sets a foundation for sustainable employment when clients are ready.

Work or study is often identified by ICSMs as a medium or long-term goal, rather than a short-term goal, and many incremental steps are sometimes necessary before clients are ready to set work-focussed goals. Some clients' barriers to work are so complex and significant it may take several years before they are work-ready; for some clients, progress is slow but steady.

ICSMs say they find their role rewarding and fulfilling, and feel they can have a positive impact on progress toward off-benefit outcomes for many clients; they indicate that they can provide more genuine support than through the standard system which is described as more transactional and time pressured.

ICSMs appreciate having the time to investigate first-hand the resources and services available in their community so that they can broker better and more sustainable solutions for clients. However, they note that this can be time-consuming, and it takes months or even years to build up a broad knowledge of suitable services and resources to be able to access for clients.

ICSMs have mixed views on whether the service is more effective for the Early Entrant or Entrenched Beneficiary cohort, with some seeing more progress among their younger clients and others seeing more progress among their older clients. However, the ICS service is observed to be most effective for clients who are motivated to make positive changes to their current life circumstances, and achieving this mind-set can take some time.

1.7 Factors for Success

The strength and nature of the ICSM-client relationship is clearly fundamental to clients feeling truly supported and enabling them to progress their situation and develop their work preparedness. This relationship is underpinned by trust and mutual respect, with clients commonly feeling that ICSMs genuinely care about their wellbeing and are invested in their progress. Clients interviewed often don't have this support elsewhere in their lives. The relationship with an ICSM is often in contrast to the impersonal, transactional and often negative interactions clients have previously experienced with Work and Income. The positive personal relationships developed by ICSMs have helped clients have more positive attitudes to Work and Income generally.

ICSMs adopt a holistic approach to identifying and addressing clients' needs, and collaboratively develop goals and plans for individually tailored stair-casing activities. This approach focuses on clients' overall wellbeing, including physical, mental, spiritual, and whānau health, as is articulated in the Te Whare Tapa Wha model.

The frequency and intensity of client engagement varies, is tailored to suit client situations, and can accommodate clients' changing circumstances. Face to face meetings are generally scheduled to allow sufficient time for clients to take steps toward goals before the next meeting. Typically, face to face meetings occur every two to three weeks, with more frequent meetings for those who are particularly motivated or where the ICSM feels the establishment of a more regular routine would be beneficial. In addition to face to face interactions, many clients have contact with their ICSM via text, phone or email, depending on the activities they are engaged in at the time and what their support needs are.

1.8 Client Personas

Based on data collected from client interviews, ICSM interviews, and from client engagement documentation, a number of 'personas' have been developed, which incorporate and represent common characteristics and patterns of behaviour observed among clients. There is a continuum for each aspect described and considerable overlap between personas, however for the purposes of building illustrative composite case studies, the personas identified are as follows:

'Success story' – These clients have made significant life changes since being on the ICS trial and are either in, or ready to be in, work or study. They can articulate the previous barriers they faced to being off-benefit and how these have been addressed and overcome with the support of their ICSM, and describe their progress and the stronger position they are now in.

'Almost there' – These clients have made considerable progress toward being ready for work or study, however they still face some barriers, which they are working towards addressing. They are motivated to gain employment or be accepted into a course of study which will enhance their future employment opportunities. Employment may not be sustainable in the short term and they might cycle back to benefit several times before sustaining long-term off-benefit outcomes.

'Slow and steady progress' – These clients still have significant barriers to being ready for work or study, however they recognise the barriers exist and are making progress toward addressing these with the support of their ICSM. Barriers are likely to be long-term issues that they have faced such as dealing with traumatic past events, mental or physical health issues, and which will take some time to become manageable.

'Complex journey' – These clients are facing multiple, complex barriers to being off-benefit. Their lives are characterised by instability and frequent adverse events that hinder their progress. How ready they are for work or study can be dynamic. ICSMs tend to be working on addressing 'survival needs' (physical and mental health, sustainable housing etc) with these clients.

'Self-imposed barriers' – These clients are more work ready than they recognise or choose to acknowledge. They describe barriers to being able to work or study which are likely to be relatively easily overcome when they are ready. They may lack pragmatism or self-belief and/or have unrealistic employment expectations. Some just prefer not to work.

'Disengaged' – These clients are likely to be Early Entrants. They lack structure and support in their lives and have often experienced little or no positive role-modelling throughout their lives. They may be

transient or have highly unstable living environments, and have issues with alcohol or other substance abuse.

1.9 Conclusions

Qualitative findings collected for this 24-month evaluation of the Intensive Client Support trial indicate that it is effective in contributing to client outcomes of stair-casing, sustainable employment, and benefit reduction. However, as with any social service intervention, the degree to which it is effective varies between individuals, and is dependent on each client's unique set of circumstances, past experiences, challenges and barriers to employment.

It appears that clients who have come onto the ICS trial and are close to being work-ready, both in terms of their skills, training and/or experience, and in terms of their attitude, outlook, and personal wellbeing, are able to achieve off-benefit outcomes relatively quickly. For other clients, who come to the service with more entrenched, complex barriers, the ICS service is less likely to result in an off-benefit outcome in the short term. However, this is not to say that the service is less effective for these clients. Many clients for whom employment may be a long-term goal, achieve outcomes from engagement from the ICS service that provide an essential stable, sustainable foundation of health and wellbeing upon which employment-related skills can be established. This means that, once they do become work ready, these clients are more likely to achieve more sustainable employment.

Given that client selection for the ICS trial is data driven and that those with less complex barriers are likely to move off the service and into employment sooner, it is likely that the caseloads of ICSMs will become increasingly complex and challenging over time.

The ICSM-client relationship underpins the success of the service and it is therefore critical that ICSMs selected for the role possess the necessary range of skills and personal attributes to be able to effectively meet the needs of this client group.

2 Introduction and Research Objectives

The Intensive Client Support (ICS) trial is a randomised controlled trial developed by the Ministry of Social Development (MSD) in response to welfare valuations, which identified that some of those aged 18-39 years and who entered the welfare system as teenagers, have a significant share of welfare liability, and face multiple barriers to employment.

The trial focuses on improving off-benefit outcomes for two cohorts of this client group who were receiving Jobseeker Support with full-time work obligations:

- Early Entrants to the welfare system (EEs), who first received a benefit aged under 18 years and now aged 18-29 years; and
- Entrenched Beneficiaries (EBs), who first received a benefit aged less than 20 years and are now aged 30-39 years.

On the trial, clients receive support from Intensive Client Support Managers (ICSMs) who provide a more flexible, tailored and intensive service than traditional case management. The trial uses a stair-casing approach to client progress, where clients take progressive steps toward achieving goals aligned with achieving independence from a benefit.

Desired outcomes for the trial, targeted at the medium to long term, include improving education levels, improving work-readiness and moving into sustainable, full-time employment.¹

The service is a non-compliance model, in which ICSMs make only limited use of standard obligations failures for clients. This non-compliance model supports the five core principles of the ICS trial:

- Client centred;
- Goal focused;
- Strengths-based;
- Guide and navigate to obtain support; and
- Promote clients' independence.²

The trial began in March 2015 and is scheduled to run for three years at five sites (Manurewa, Naenae, Porirua, Invercargill, and Rotorua).

¹ Ministry of Social Development: *Intensive Client Support (ICS) Trial Evaluation: Interim 12 Months Evaluation*. Unpublished internal report.

² Ministry of Social Development: *Intensive Client Support Trial Practice Guide*. Unpublished internal document.

A 12-month evaluation of the trial was carried out by Insights MSD, incorporating both qualitative data collected via interviews with clients and ICSMs, and administrative data. The evaluation found the trial to have a significant positive effect on off-benefit outcomes and work-readiness for clients, particularly those of the Entrenched Beneficiary cohort.

In August 2017, MSD commissioned *Gravitas Research and Strategy* to collect qualitative data for a 24-month stage evaluation, using a case-study approach with clients, to answer the evaluation question:

How has the ICS trial contributed to client outcomes of 'stair-casing' (progressive steps towards goals), work, and benefit reduction?

3 Evaluation Method

3.1 Sampling and Recruitment

MSD randomly selected potential evaluation participants from among those currently on the ICS trial or who had previously been part of the trial. Lists of selected clients were provided to their ICSMs who were asked to identify for exclusion any clients with histories that would make them unsuitable for participation in the evaluation – for example those who might pose a security risk, or who have sensitivities, or circumstances that would make approaching them for an interview inappropriate. ICSMs contacted the non-excluded clients to advise that they might be approached by *Gravitas* and invited to take part in an interview.

A sample frame of n=135 ICS clients was supplied to *Gravitas Research*. From this list, a random selection of clients was contacted by phone by a *Gravitas* staff member and invited to take part in an interview.

3.2 Sample Profile

A total of n=26 client interviews were conducted. Table 3.1 outlines the sample profile.

Table 3.1. Client Sample Profile

Gender	n	Site	n
Male	15	Manurewa	5
Female	11	Rotorua	6
Age group	n	Naenae	5
20-24 years	3	Porirua	5
25-29 years	5	Invercargill	5
30-34 years	7	Time on trial	n
35-39 years	8	Less than 6 months	8
40-41 years	3	6 to 12 months	2
Ethnicity*	n	12 – 24 months	7
NZ Māori	16	More than 24 months	9
NZ European	10	Benefit status	n
Pacific	5	On benefit	22
Cohort	n	Off benefit	4
Entrenched beneficiary	16		
Early Entrant	10		

*Participants may identify with multiple ethnicities.

3.3 Data Collection

Data was collected via in-depth, face-to-face interviews conducted by a member of Gravitas' research team. In addition to the 26 client interviews, six interviews with ICSMs were also undertaken.

Clients were given a choice of interview location, almost all opting to have their interview take place at a Work and Income office, with the remainder being interviewed at a café or at their home. ICSM interviews were conducted at their work place.

The purpose of interviews was to gain insight from the perspectives of both ICSMs and clients on how well the trial service is working in practice, and their perceptions of the effect that the intensive service and stair-casing approach was having on outcomes for clients.

Interviews were guided by a discussion guide (one for clients and one for ICMs), which had been developed collaboratively by *Gravitas* and MSD to cover key areas of interest. However, free discussion was encouraged to pursue topics of relevance to the evaluation participants.

Client engagement documentation (Initial Client Assessments and Employment Plans) were also made available to the evaluators to provide an additional source of data on clients' situations, stair-casing activities, progress toward work-readiness, and outcomes from engagement with the trial service.

Note: Throughout the report, direct quotes from interview participants have been used to illustrate findings. These have been attributed to either ICSMs, clients in Entrenched Beneficiary cohort (EB), clients aged 18-24 years (Younger EE), or clients aged 25-29 years (Older EE).

4 Context

The 12-month evaluation of the ICS trial found that the service had a positive effect on off-benefit outcomes³, particularly for the Entrenched Beneficiary cohort. As the sample for this 24-month evaluation included only four clients who were off-benefit, it is possible that the perspectives of those clients who have been able to achieve off-benefit outcomes in the short or medium term were under-represented in the data.

However, it is also important to consider that, as the service continues, it may become increasingly challenging to achieve off-benefit outcomes for clients. The client group for Intensive Client Support often have complex personal and situational support needs, which can be dynamic, causing crises to arise regularly. Their lives can often be characterised as unstable and insecure. The nature of these needs and situations may only become understood by ICSMs after several meetings. Some clients will reveal much about themselves early on, while others may be wary of sharing personal information until a level of trust has developed with their ICSM. Further, after extensive past interaction with Work and Income, some clients have become disengaged or anxious about having contact with Work and Income.

Those clients who enter the service with less complex challenges and barriers to off-benefit outcomes, and those who enter the service close to being work ready, can be expected – and do – move off the service relatively quickly. For those facing more complex and entrenched barriers, it is likely to take considerably longer to achieve off-benefit outcomes – and ICSMs believe that there is a group of clients for whom the barriers are so great that they may never be sustainably off-benefit.

I can honestly say, of the caseload I've got, three-quarters of them will need benefit support either long-term or repeatedly until they are 65. (ICSM)

According to ICSMs, barriers and challenges to sustainable off-benefit outcomes for current ICS clients are wide, varied, often complex and dynamic. They include:

- Mental health issues (depression, suicidality, paranoia, agoraphobia)
- Physical health issues (diabetes, obesity, gout)
- Low self-esteem/confidence; lack of self-belief
- Lack of motivation
- Drug and alcohol use or dependency
- Transience, homelessness, or lack of housing security
- Overcrowding or poor standard of living conditions

³ Ministry of Social Development: *Intensive Client Support (ICS) Trial Evaluation: Interim 12 Months Evaluation*. Unpublished internal report.

- Family estrangement or conflict
- Domestic or family violence
- Past severe trauma
- Debt and/or poor budgeting skills
- Lack of transport, driver disqualification, or no driving licence
- Criminal record
- Poor literacy or numeracy, or learning difficulties
- Child care issues or care responsibilities
- Lack of support and positive role-modelling
- Physical appearance (ie facial tattoos, obesity)
- No previous work experience or training, no references, or poor work history
- Lack of (reliable) access to telephones or computers
- Lack of job-searching skills or interview skills
- No personal documents, records or identification.

Assuming that the size of ICSM's caseloads stay relatively stable, it can be deduced that the share of each caseload facing significant barriers is likely to increase over time (as clients remain in the service, they leave less space for new, less challenging clients), and so it can be expected that sustainable off-benefit outcomes may decline.

However, this is definitely not to say that, over time, the ICS service is becoming less successful. ICSMs and the interviewed clients themselves are extremely positive about the diverse range of other outcomes ICS has enabled clients to achieve and how life-changing (and in some cases, life-saving), participation in ICS can be. These outcomes are discussed further in Section Eight and in the case studies in Section Eleven.

5 Factors for Success

Data collected from ICSMs, clients, and from client engagement documents suggests that there are many factors that support the success of the service in terms of clients being able to stair-case toward an off-benefit outcome. These are outlined in the sections below.

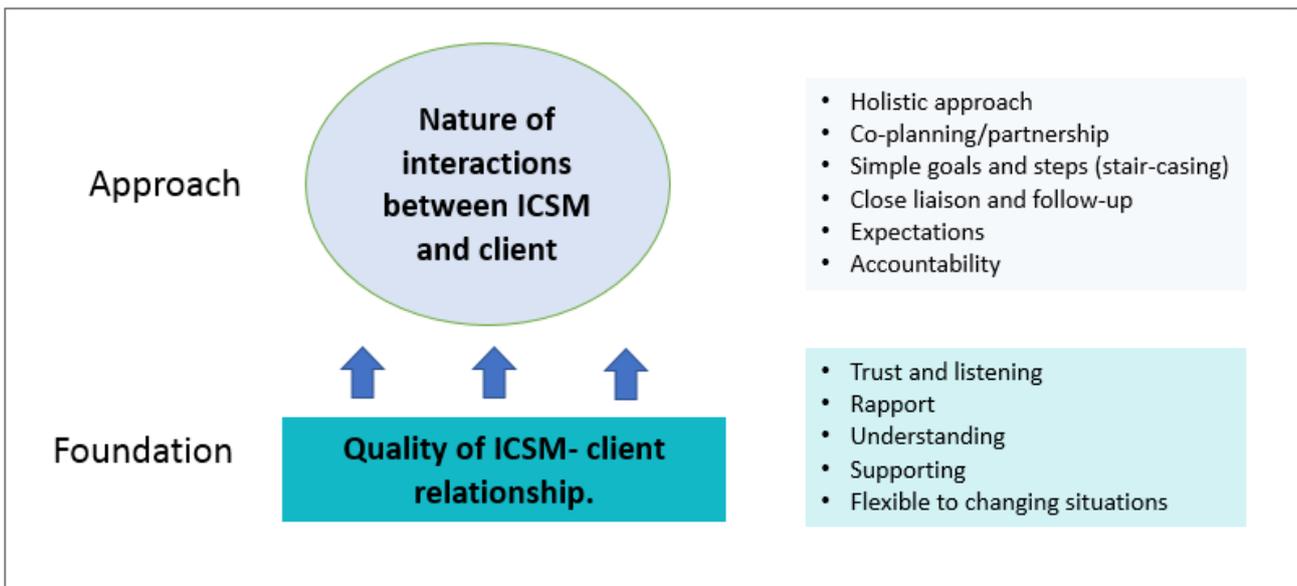
5.1 Client-ICSM Relationship

The ICSM-client relationship is fundamental to the success of the ICS service and underpins all other aspects of the service. The development of a positive relationship between ICSMs and clients, which incorporates trust and mutual respect, allows clients to ‘open up’ and be comfortable discussing their personal challenges and barriers to employment, and is a key enabler in clients being able to make progress. Figure 5.1 below illustrates the nature of the ICSM-client relationship.

We know through research that in actual fact the biggest predictor of success in therapy is a good relationship with the therapist. It’s exactly the same thing with case management, I think. (ICSM)

I reckon everyone should stick to one case manager instead of jumping from one chair to the other. That way you can build on that relationship. (EB)

Figure 5.1: Client-ICSM Engagement



ICSMs understand the importance of building trust with their clients, and know that establishing trust will take longer for some clients than others. All ICSMs put in considerable time and effort to achieve this relationship of trust. Clients also described the relationship that they have with the ICSM as incorporating mutual trust, and noted how enabling this is in supporting them to engage in stair-casing activities and progress towards work-readiness.

It's having a person to talk to, one person. I've got a client who is a true hermit. He lives in his bedroom 23 hours a day. He finds it an enormous struggle to come into this office because of the noise and the number of people. But now he enjoys his appointments because he can have a laugh and we talk about the things he is interested in. And now we're working on getting him to his GP. (ICSM)

The first person you should trust in your life are your parents, right? For some of my clients, that's just not a thing. Then they go to school and they might have been the dumb brown kid the whole time they were at school. So, every interaction that they've had in their life has always been on a level where they've felt they are viewed with suspicion. We work to slowly break through that until they trust you. (ICSM)

In the past I would have been too scared to ask for a food grant, but [ICSM] is different. I can call her up and she knows me well enough to know that I am not talking through a hole in my arse, that I am not lying about it, that I genuinely need help. (EB)

A key aspect in the development of a positive working relationship between ICSMs and clients is behaviours that make clients feel understood, 'seen', listened to, and then valued and respected. Clients note that ICSMs talk to them 'on the same level', rather than talking 'down' to them, or making them feel inferior. Clients also appreciate being able to discuss their challenges and barriers without fear of judgement or criticism.

I feel like [ICSM] is like my Mum. I can talk to her about anything. It makes me feel happy knowing that, whatever happens, I can just tell her. (Younger EE)

She doesn't talk down to you, she talks to you on the same level, which is good. (Older EE)

She just had respect. Just respect and it felt like she genuinely cared about you as well. (EB)

There's really good research to show that people automatically trust and respond more to people who have travelled the same journey as them. That's why I sometimes disclose, judiciously, about my own past. It's about building that rapport. (ICSM)

In many cases, clients indicated that they were now more likely to be upfront and honest with their ICSM than they would have previously been with case managers, an important foundational stage for being able to identify and address barriers to progress.

Clients value their ICSM being approachable, supportive, empathetic, showing that they genuinely care about their situations, and are invested in their outcomes.

The other whole thing that I liked about [ICSM] is that she was on the edge of her seat waiting for me to get that call back to find out whether I got [the job] which made me feel good that somebody else was like, “did you get it?” She was always really positive – “you’ve got this. I can feel it. It’s got to be your job.” (EB)

Clients appreciate their ICSM being straightforward in their manner, offering clear information and explanations of the services and supports available to them, and helping them develop realistic expectations of the ICS service and outcomes they can achieve through it.

The nature of the relationship with their ICSM can also change clients’ perceptions in relation to Work and Income, from feeling ‘up against the system’, to being supported. A key shift in this dynamic is for clients being able to feel ‘on the same side’ as Work and Income, rather than in a battle with the organisation. Additionally, clients feel less pressured about benefit sanctions, which lowers stress associated with Work and Income contacts and encourages engagement.

I dreaded coming in here. I hated this place. But [ICSM] has made me feel like WINZ isn’t the enemy. (EB)

[In the past], you’d get that phone call – “It’s Mary here from Work and Income. You’re going to need to come in here before I suspend your benefit.” They were using scare tactics, power control. But now [ICSM] will say “Want to come in and we’ll talk about different ways you can work things? I can slot you in any time between 9 and 3 ...” (EB)

At its most successful, the approach appears to empower clients and create or re-awaken self-motivation and self-belief, the lack of which is sometimes a critical barrier to progress for clients. Immediacy and responsiveness builds and supports momentum and motivation. Clients can contact ICSMs as and when they need to and can usually meet with little delay.

That's what I liked about this role, you had more time with a client, you had more spaces so if an issue popped up, I'd be able to see them tomorrow. It's not like "I can't see you, I can't get you in my calendar, I can't see you 'til next week." "Nah, I'll just squeeze you in because I can see the need is great and you need to be seen, it cannot wait." (ICSM)

Consistency of ICSM

Development of a positive relationship is supported by the consistency of ICSM. The 'continuity of care' associated with having just one designated ICSM is highly valued by clients who appreciate having someone at Work and Income who will develop a depth of understanding of their circumstances and needs over time. Consistency of case management also means that ICSMs can have and communicate clear expectations and monitor progress through meeting and checking in. A strong ICSM client relationship supports stronger accountability.

We've built a relationship where they can understand where I'm coming from – whereas case managers beforehand, they were always chopping and changing so they couldn't really get to understand me and my situation. (EB)

I just wanted to stay with one case manager, so she knows where I'm coming from and knows what to do in order to succeed at what I wanted to do. (EB)

A benefit of the consistency of ICSMs for clients, and one that they particularly value, is not having to repeat their story to different Work and Income staff. This is particularly important to those whose background and/or current situation is particularly harrowing, those who lack confidence, or who find it difficult to articulate their experiences or thoughts.

It's real frustrating being a client and coming in and getting to know a case worker. And pretty much having to tell them your whole full life story. And then halfway down the track, either that case worker ends up getting reassigned, or you get assigned a new case worker and then you have to redo the same thing again – I have to re-tell them my whole life story again and go through everything, explain everything. (Older EE)

Collaborative Nature of ICSM-Client Relationship

ICSMs and clients work together in partnership. Goals, and stair-casing activities to make progress toward those goals, are identified and planned collaboratively. This collaboration can be very motivating for clients. There is a sense from clients that when their ICSM is putting in personal effort to help them achieve, they do not want to let them down and feel obliged to 'meet them halfway'.

She'll help you out and then you've got to do the rest. She only can do a certain amount then you've got to do the rest. (EB)

Just keeps me honest, you know. If it's good enough for [ICSM] to help me, you know, it's only good that I pay her back. (EB)

[ICSM]'s put the effort in. I have to do things but at the same time, she's working hard to put offers down in front of me, putting courses in place for me, giving me her number in case I need it. (EB)

The sense for clients that their ICSM is providing not only practical, but also emotional support, makes them feel that they are not alone on their journey and helps them to feel more positive about what they might be able to achieve.

It had been a long time since I'd had a job. To be perfectly fair, once I finished studying and realised I had to get a job, I was like "I'm going to have a panic attack. I have to put myself out there and I have to work out how I'm going to get a job. This is really scary, I'm on my own." Just having that encouragement from somebody else – "you've got all these skills. You've actually got this to offer. You could do this". It actually helped change my mind-set about it. (EB)

5.2 Holistic Approach to Clients' Needs

A holistic approach is adopted by ICSMs, which encapsulates a client's wider personal and situational needs. The focus is on progress toward improved life circumstances, confidence and mind-set, which will set a foundation for sustainable employment when clients are ready.

I think it's just given me a lot more freedom. I have a little more time to be able to do quality engagements with these individuals and identify challenges holistically that are going on in their world as opposed to just being work focused – "let's kick you into work, work, work". I now have the freedom to look at some of the other barriers that have impacted on their capacity to go into employment or linking them with the right services. (ICSM)

One ICSM described the holistic approach that they adopt in terms of the Te Whare Tapa Wha model of health⁴, incorporating physical, mental, spiritual, and whānau health.

⁴ Durie, Mason. *Whaiora: Maori health development*. Auckland: Oxford University Press, 1998, pp. 68–74

I'm always going "your health, your mind, your family, all of that, and how that all involves you moving forward." Because if you're sick you can't ... when you fix that, okay cool, and all of your whole being is strong. (ICSM)

ICSMs describe the importance of gaining an in-depth understanding of client's circumstances and past experiences, to be better able to support them towards positive outcomes.

Of all the clients on my list, apart from the ones I've never met, I could probably tell you a whole lot of their story. I know them, what makes them tick, why they're in the situation, how well they get on with their parents.... (ICSM)

Clients feel that the holistic approach that the ICS service offers is preferable, beneficial for them, and well overdue. In some cases, clients indicated they had been seeking a broader type of support from Work and Income previously, which was not available to them.

My old case manager didn't like me talking about my counselling stuff, about my past and the things that have happened to me. I don't think he felt comfortable in that way. He didn't know what to say, didn't know what to do. I was trying to reach out to him but he didn't know how to help. (Younger EE)

All the previous caseworkers that I've had are like "you've just got to take the first job that you come to. We don't care whether you're going to be happy about it or whether it's even going to help you get towards your future goals. Just do it so you can get off the benefit". (EB)

Flexibility and Scope to Offer a Tailored Programme

Service delivery KPI measures include the tracking of employment indicators. However, having no 'off-benefit' targets to meet is perceived as a key success factor by some ICSMs, as this allows them more time to consider medium and long-term strategies towards sustainable employment options for their clients.

I look at the huge, bigger pictures. I know that a lot of the clients that have worked with me have gone off benefit and stayed off benefit. It's because I've worked with them that little bit longer, because I don't just put them into any job. (ICSM)

ICSMs adopt a mentoring approach to stair-casing clients, which is encouraging, guiding, and collaborative rather than directive. The actual stair-casing process is client-centric, being uniquely designed for each client. Clients have a choice in the activities they undertake. This is empowering for clients.

I always just give them a thought, like “where do you see yourself in five years? If you could pick five places you’d want to work at, what would they be?” And then let them go away and think about it, so bring that back to me at the next interview. (ICSM)

I kind of plant seeds with her and see where we go from there. It would be assessing her mental health more than anything else, first and foremost. So that would be the priority. I don't ever smash them into “you have to do this.” (ICSM)

The real big difference is catering to your specific needs, not just helping you based on a generalised population ... actually focusing on the individual. I think that’s probably the thing that [surprised] me the most. I’m sitting in the WINZ office getting help from somebody that’s helping me and the needs that I have and what I want to do, not on the needs of statistics and they need to get me the hell off the benefit. I think having that gave me more motivation to get a job as well. (EB)

My other case manager just helped with stuff like food grants or would just say “Here, fill in these job sheets.” I used to say to him “can you please help me get on a learning course?” I don’t think he actually knew what to do, how to help. But [ICSM] is helping me improve myself. She’ll ask me what I want to do and then how she can help with that. She is different. She is helping me build myself up. (Younger EE)

Some clients who had been receiving Jobseeker Support for some time spoke with cynicism about many of Work and Income’s requirements for job seekers that they had experienced prior to coming into the ICS service. In particular, clients mentioned the completion of ‘job sheets’ (records of employment search activities), and attending seminars. Clients said they felt in the past that they have been required to undertake work focused activities long before they are close to being work-ready.

Clients reported that prior to coming into ICS cheating on the ‘job sheets’ was commonplace, with workplace details sourced to give the impression that they were actively seeking work. They noted that these job sheets never seem to be checked for validity.

I was only pretending I was finding a job. I can just write anything down on those [job] sheets. I could have put down your company name. I actually told my [former] case manager that I just wrote anything down, that it wasn’t working for me, that it wasn’t helping. (Younger EE)

I've been to 19 seminars in the last four years and they tell you the same, same, same things. All I used to do was write the date and then just look on Seek and just write down all the jobs. I was just filling in the form, ticking the boxes, because that's what you need to do to make sure you get 'pay day'. I'd take the form back all filled out and they would say "oh excellent, look at all those jobs you found. Well done." But they never actually looked at what was on the paper. I just ticked stuff – like yes, they emailed me back – but none of it was true. But they didn't care because they didn't read the sheet, they didn't follow up. (EB)

Prior to the ICS, clients with literacy issues or learning difficulties reported having found completing employment 'job sheets' and other forms challenging, and perceived that case managers thought they were just being lazy when they asked for help. Similarly, traditional Work and Income seminars can be challenging (and traumatic) for some clients, including those who get anxious in group situations, who are uncomfortable in classroom situations, or who have learning difficulties.

It's being in a group. I've never been a classroom person. At school I never wanted to sit at a classroom desk and listen. I like watching and doing the practical stuff. In [a classroom situation] things just go in one ear and out the other and I walk out. Doesn't work for me. (Older EE)

As part of the ICS, clients who are work-ready may still be given forms to complete, but generally considerable discussion has gone on beforehand regarding what types of industries and roles will be most suitable for them. In contrast to previous dealings with case managers, some clients report that they will work on their job search sheets more diligently because they are now motivated to actively look for work, because they know their ICSM will check the sheet and challenge them if the information doesn't look correct, and because they are often very keen to please or prove themselves to their ICSM.

If [ICSM] gave me a form, I would do it the next day because I want to get a job I am actually interested in and I want to actually apply for them. I would feel like I was decision-making for my future. If she gave me a form I would go home and spend all night looking because I want to show her that I'm not a complete egg. (EB)

ICSMs have freedom and flexibility to source and access supports and services from the wider community to meet clients' needs. One ICSM was positive about the discretion she had to be able to source smaller or local service providers who could take clients almost immediately, thereby ensuring that a client's motivation was maintained – "strike while the iron is hot".

When someone is at that change point, you don't want to go "great, you're ready to get your license. Well AA can fit you in for lessons in a month. You go home and think about it for a month." So instead I've found a place that can usually do lessons in a couple of days. (ICSM)

The freedom from a 'stand down' period for clients who have used a particular service was also mentioned as a key success factor, again ensuring that a client's momentum and motivation is maintained:

I've had some fail their driver's test – "I still failed. I just didn't totally come to a total stop at that stop sign. But the instructor said I should just go straight back again." So, I say, okay, let's do it. That's really different to Case Management 101 where you are allowed to assist a client with their new driver's licence fee once in a 12-month period. (ICSM)

ICSMs' ability to be flexible with their time is also perceived as a key success factor:

I don't have to see nine or ten clients a day. I can manage my own calendar. I can say "Right, I'd like to have half a day to go up to a community organisation with my client who won't leave the house, meet him there and watch him take a cooking class." The investment approach is gradually trickling [down] and now I can do those things, block out half a day – it's my calendar and my job. (ICSM)

5.3 Client Engagement

There is no set pattern for ICSM engagement with clients, as a key element of the service is a tailored approach. Interaction with their clients occurs with differing frequency and by varying channels, both within and between ICSM caseloads, and throughout the duration of the ICSM-client relationship.

Frequency of Interaction

Frequency of client interaction varies by ICSM, by where the client is in the stair-casing process, and by the client's characteristics and needs. Where clients are particularly motivated, ICSMs have the flexibility to see them weekly or even more often.

I have a client who has been on my caseload for two years. He recently got a new girlfriend, she's been giving him a boot up the bum and suddenly he came in saying "alright, I'm ready." So, what am I going to do? Say "great, come back in three weeks and we'll have a talk about it?" No, you have to jump in and have time available for him. So, I've seen him five times in the last three weeks. (ICSM)

Some clients were initially surprised at how often their ICSM had requested they come in; the weekly or fortnightly visits being much more frequent than they had been required to visit previously. A small group expressed concern about this, either because they found visiting Work and Income stressful due to mental health issues and/or because of the cost of getting to and from the office.

It might only be \$2 or \$3 each time but that's a tin of food that I now can't buy. (Older EE)

Clients from the 'self-imposed barriers' segment felt that appointments were too frequent, not leaving them sufficient time to do the tasks they had been set due to their other commitments.

However, most clients reported being satisfied with the frequency of appointments, particularly as they found them non-threatening. For some, increased contact with Work and Income meant that they became more motivated to engage in stair-casing activities.

I was happy because, with other case managers, just the normal case manager, you don't really get that one-on-one support, and you only really get to see them every month or every two months. So yeah, it was good because she was getting me in there, proactive, every week or two. (EB)

Clients also appreciate that meetings with ICSMs do not feel rushed, but rather they have time to catch up on any changes to circumstances that may have occurred since the previous meeting, discuss any current needs, and plan and engage in stair-casing activities.

She has more time with me to go through looking for jobs. After she's seen me for what I wanted, we'll have a look at the jobs. She never says "oh, we don't have enough time, you need to leave." No. She looks at jobs for me and puts my CV through. When I was seeing her quite frequently she would've applied for two or three jobs for me at each meeting. (Older EE)

Methods of Interaction

The methods of contact used are client-centric and within the context of a client's progress plan. Some clients see their case manager predominantly face-to-face, while others prefer contact by phone, text or email.

The main method of interaction remains face-to-face contact at a Work and Income office. However, ICSMs 'humanise' the process by encouraging clients to text them just prior to arrival so they don't need to join the (often long) reception queues.

Giving work mobile phones to ICSMs has been instrumental in enhancing client engagement, giving clients alternative channels (direct dial and texting) which most clients prefer to having to go through the Contact Centre where long wait times can be stressful for clients, particularly for those with anxiety issues. The ability of clients to text their ICSM is important as clients often don't have sufficient credit on their own phone to call. Clients also find reassurance in having the ICSM's phone number; it is someone reliable and non-judgemental that they feel they could contact in an emergency.

It saves me having to go through someone else... because they have got to call her up anyway to try and book it in the system. So, it's good that I can just directly go straight to her. (EB)

I just feel lighter knowing that [ICSM] is there. You don't want to have anything bad happen, but if it does, at least you know you don't have to sit there and cry and feel like it's the end of the world. (EB)

Engagement tends to be dynamic, driven by client need, and dependent on their current circumstances, which often change over the course of a client's service engagement. Some clients reported being pleasantly surprised that they could have meetings over the phone rather than having to come to the office in person, and that this helped them engage more quickly with the ICSM and the service generally (since meetings could be held frequently and they were less anxious during these interactions). Clients with physical or mental illness and/or with limited access to transport found phone-based meetings particularly beneficial.

When I first started seeing [ICSM], sometimes I couldn't leave the house. I'd be having a bad day – I call them spaz attacks – and I just couldn't go in. In the past [before ICS], if I couldn't go in, that would make me even more anxious, worried I was going to get into trouble, that they were going to cut my benefit off if I didn't show up. But now we talk on the phone instead. She would always set up another appointment. And now I mainly see her face-to-face. Now I actually look forward to [my appointments]. (EB)

I hate the long lines and having to provide ID when you get here. I feel more relaxed not having to come in [to the service centre]. (EB)

Client engagements are also used as a work-readiness tool. For example, the ICSM may book early appointments for a client to encourage them to get up and out of the house at the start of the day.

[ICSM] is trying hard to make us independent and to get off our arses. I stay at home most of the time, we sit around doing nothing. But she always books me an early appointment. She's like "I'm getting you ready for work. You have to be early. You can do it." She makes us realise that you don't get the benefit for free; you have to do stuff for her. (Younger EE)

I usually see [ICSM] once a fortnight. It gets me out of the house. [ICSM] says I have to force myself to do what I don't want to do, which is leave the house. She used to make appointments for once a month but now it's once a fortnight. It's deliberately done that often because it's good for me to get out. It's hard but I do it. (EB)

6 Stair-casing

6.1 The Nature of Stair-casing

Stair-casing, in the context of the ICS service trial, involves clients taking progressive steps towards goals aligned with gaining employment in the longer term.⁵ Stair-casing activities are discussed and planned collaboratively by ICSMs and clients to align with client goals and to contribute to clients making progress toward the desired outcomes of the service, which include:

- moving into sustainable, full-time employment;
- improving educational levels; and
- improving work-readiness.⁶

‘Stair-casing’ is generally viewed by ICSMs as an umbrella term that encompasses any behaviour that clients engage in that, in some way, improves their current circumstances and wellbeing, and increases their likelihood of a sustainable off-benefit outcome in the long term (which may still be several years’ away). Stair-casing activities span a broad spectrum, both in terms of their focus and in their relative level of direct influence on off-benefit outcomes. Stair-casing activities are often non-linear and do not follow a set pattern but are client-centred, and determined by each client’s individual circumstances, needs and goals. Some activities may be repeated numerous times before any benefit is realised.

There is reported wide variance in the pace at which clients make progressive steps toward goals and off-benefit outcomes. Some clients are able to undertake a series of stair-casing activities progressing them towards work-readiness within a few months, while others need months to make minimal progress. Clients talked about the likelihood of re-entering the welfare system if pushed too quickly to achieve an off-benefit outcome and appreciated the ICS approach, which allows them to progress towards employment at a pace that suits them and that will be most likely to lead to sustainable employment.

[ICSM] tells me not to rush it. Sometimes I cry about why I can’t get a job. But she says, “It’ll come, and when it does come, nothing will hold you back”. But I need to go through the process, don’t rush it. I could have a relapse if I don’t do this properly. We’re both happy with slow steps. (EB)

[If they] throw you at something when you’re not ready and, just get you the job, go do it and then you fail at it and then you start from the beginning. (Older EE)

⁵ Ministry of Social Development: *Intensive Client Support (ICS) Trial Evaluation: Interim 12 Months Evaluation (Qualitative)*. Unpublished internal report.

⁶ *ibid*

A lot of people get pushed into doing something that they didn't want to do, and then they're right back in the queue the week after, back up for the benefit. (EB)

In addition, the level and magnitude of progress steps vary widely for individual clients across the duration of their engagement. While, for some clients, stair-casing activities might be engaging in work-focussed skills training, for others, simply developing daily routines might constitute a stair-casing activity that helps them progress closer to being work-ready.

Stair-casing is about at each appointment you have a goal. You have a main goal, you have sub-goals under that, but it's achieving something every time you've spoken to them. And like I said, whether or not that's literally just coming to the appointment, or maybe having a shower. Very small things, and it's all individualised. So, one thing for you might be different for me. (ICSM)

Stair-casing is seen by ICSMs as a critical element in engaging with clients, which adds value to client meetings, in that they always have something to take away and to work towards achieving.

You've always got to have a little step for them to do because it means that the engagement isn't worthless. What's the point of you coming all the time if we've got nothing to follow up from? So, it's a stair-case, whether it's a learner licence, organising a birth certificate ... (ICSM)

However, ICSMs are aware that, while an important pillar of the service is allowing clients sufficient time to transition through the various stages of getting work-ready, it is equally important that clients should not be able to take advantage of the lack of sanctions and just 'cruise'. A good ICSM can find a balance between pushing clients to achieve their goals and setting boundaries, but still allowing them to feel in control of the process.

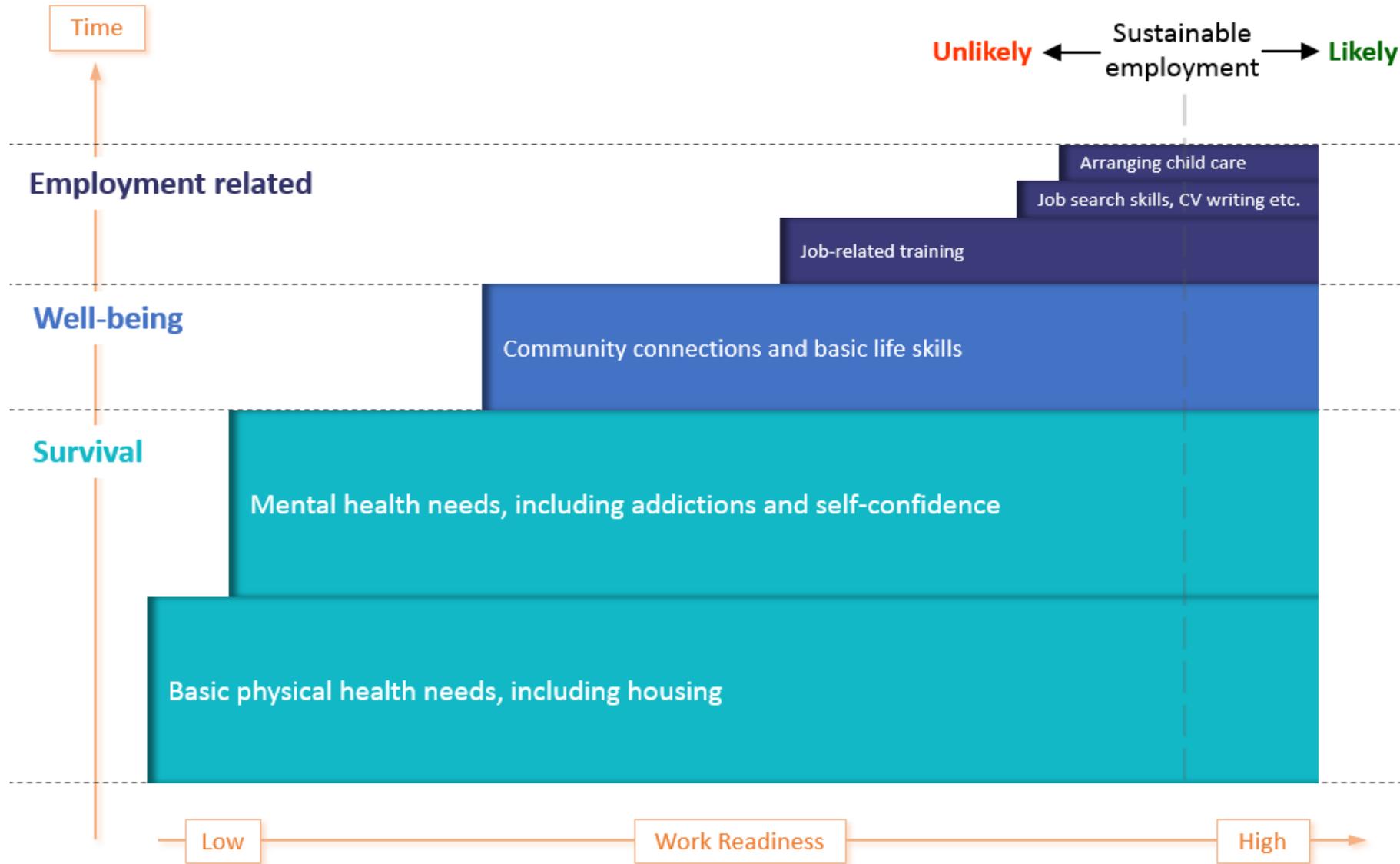
ICSMs note that the impact of the various stair-casing activities differs by client, and the most influential activities are client-specific.

6.2 Client Needs and Stair-casing Activities

Stair-casing activities can be broadly classified into three groups:

1. Those related to the client's physical and mental 'survival';
2. Those focused on the wellbeing of the client, including instilling basic life skills; and
3. Those more directly related to finding employment.

Figure 6.1: Types of Client Need



1. Activities to Address 'Survival' Needs

As Figure 6.1 illustrates, addressing clients' 'survival' needs are essential to ensuring the client has a strong base from which their other needs can be addressed. Activities focused on addressing 'survival' needs ensure that the basic physical and mental health needs of the client are met.

Adequate housing appears to be the most essential need as, without adequate housing, it is difficult for clients to have their physical and mental needs sustainably met – for example, improving diet is difficult if you are living in a car. Lack of adequate housing is described by ICSMs as a 'huge' issue, with up to a quarter of their clients facing acute housing issues at any point in time. Clients are often living on couches, in garages, in make-shift sleep-outs, or with extended family or friends. Inadequate living situations include those that are overcrowded, have sub-standard conditions, and in dwellings where the tenancy holder is in breach of regulations by having additional occupants.

Challenges in securing housing include not knowing how to apply for rental properties, having a criminal record, bad credit, debt, and poor financial management. ICSMs point out that, for many clients, the challenge is not only securing housing, but also sustaining it, by ensuring that the tenancy conditions are met, rent is paid on time, and the house is well looked after.

ICSMs note that all other 'stair-casing' activity essentially goes on hold when client is experiencing crises in their housing, and until they have secured adequate accommodation, no progress can be made toward work readiness.

30-40% of clients have had housing issues and we can't move forward with anything else until that has been addressed. It stops us from moving forward on identifying job skills until that is sorted out.
(ICSM)

Examples of 'survival' stair-casing activities used by ICSMs include:

- liaison with Housing New Zealand, landlords, and/or rental agencies; support with applying for accommodation;
- addressing alcohol or drug consumption/addiction;
- having a client register with a GP/addressing specific health issues;
- adopting a healthier diet;
- managing health conditions better (eg, diabetes);
- improved personal hygiene;
- steps to improve physical fitness; and
- mental health outreach programmes – counselling, social worker involvement.

As Figure 6.1 shows, if basic physical and mental health needs are not addressed, the client cannot be considered work-ready and their chance of achieving sustainable employment can be expected to be very low. As Figure 6.1 also shows, of the three groups of client need, addressing 'survival' needs generally take the longest time. For example, it may take many months for a client to achieve a weight-loss goal, and potentially several years to address mental health issues such as Post Traumatic Stress Disorder. ICSMs are aware of the importance of addressing 'survival' needs first. However, the time that these needs can take to address and the fact that there are often no tangible/measurable outcomes from addressing them (for example, increased self-confidence) is at odds with the trial, where the key performance measure is getting clients 'off-benefit'.

Stepping people into leaving the house and having some sort of community interaction – that's not an 'off-benefit' outcome but six years down the track, if they've been making connections with community agencies, that agency might say "hey, we've got someone we know who needs someone to move trolleys at the supermarket. Let's take you down and get you interviewed." That person's life might take that long to get to that point, but you need to start really small with some of them. (ICSM)

Clients also understand the need to address more foundational issues first before they will be able to sustain employment.

If I started a job I don't think I would be well enough to carry on. That's why we're going through my issues first, getting help. We still do some of the job search things because that's [ICSM's] work, but we both know that if I go to work now, I'll be all over the place. I probably won't be able to concentrate on what I'm doing, so she's helping me with other things first, counselling and my learning and stuff. (Younger EE)

Most ICSMs have been able to tap into the services and networks needed to help clients address their physical and mental health needs. (Some exceptions are discussed in Section 6.3).

2. Activities to Address Wellbeing

Once a client's physical and mental needs have been addressed, ICSMs' focus turns to improving their wellbeing and helping them to function in society. This is achieved by helping clients build connections with their community and helping them acquire general life skills. Stair-casing activities used to address wellbeing include:

- improved physical appearance (removal of tattoos, dental repair);
- increased community interaction – eg, re-uniting with church, joining sports groups etc.;
- exploring hobbies and interests;
- obtaining a driver licence;

- purchasing a mobile phone;
- literacy/numeracy courses;
- parenting courses;
- budgeting advice and debt consolidation;
- obtaining personal documents such as birth certificates, photo identification;
- cultural identity and language courses;
- opening a bank account; and
- guidance about dealing with other government agencies such Housing New Zealand Corporation.

As with the 'survival' needs, benefits of stair-casing activities focused on improving clients' wellbeing may be intangible and difficult to measure, a concern for some ICSMs in the context of the trial evaluation. For example, the impact on a client of obtaining a driving licence is often more about the sense of accomplishment and associated self-esteem, than the actual licence itself.

To get your licence, there's a process to get it. And there's a sense of accomplishment when you do get it. I have clients that probably get their licence, and will probably never drive in their life, but – It's an achievement and it's a good step, because it shows them, I've noticed that if they can do that, they can do other things...I think a lot of it is about self-esteem. (ICSM)

Driver License

Getting a driver license is often used by ICSMs as the first stair-casing activity once 'survival' needs are met. It can be a 'quick win' for some clients, particularly as many are currently driving anyway (so the test is relatively quick and easy to pass), having a driver licence is important for many occupations; the licence provides a valuable source of photo ID, and 'passing the test' increases clients' confidence in their ability to succeed (to actually *pass* something) – which, in turn, allows the ICSM to challenge the client to take on other stair-casing activities.

I've had several people who said that it's the only thing they've passed or achieved since dropping out of school at 11 or 12. (ICSM)

Additional benefits of obtaining a driving licence include being able to avoid fines imposed when caught driving without a valid licence and saving on the cost of transport. For some clients, not having a driving licence is a barrier to attending appointments, job interviews, or being able to travel to a place of study or employment.

Getting a Phone

Organising a mobile phone for a client is another ‘quick win’. It ensures that prospective employers and support agencies (GPs, counsellors etc.) can contact the client, and enables reliable communication between the client and their ICSM. It also illustrates to the client that the ICSM can, and will, act quickly when it is required.

I needed a new phone because of what I was going through – for appointments with this doctor and that doctor – and [ICSM] thought it would be important for me so she organised it there on the spot at that first appointment. I went and got the phone straightaway. I felt like I had won the lottery. I felt like she was really going out of her way to help me. (EB)

3. Activities to Address Employment-Related Needs

As Figure 7.1 illustrates, the provision of employment-related support is small compared to the other two needs groups, and for many clients, can be done more quickly than addressing ‘survival’ and wellbeing needs. Examples of stair-casing activities used to address employment-related needs include:

- cell-phone etiquette (reinforcing the importance of answering unknown calls etc.);
- voluntary work;
- transition to *Studylink*;
- supported employment;
- employment seminars;
- arranging childcare and applying for subsidy; and
- interview preparation or training.

Education and Training Opportunities

A wide range of education and training providers are available for ICSMs to access for their clients, from community to tertiary-based, offering programmes at a range of levels. Some clients have successfully completed job-specific training and achieved certification in skills that they feel will increase their likelihood of gaining employment.

I’ve got all that, wheels, tracks and rollers and stuff like that, first aider as well. A lot of these courses WINZ have put me through just over the last couple of years. (EB)

Job Searching

Many clients come to the ICS service lacking the skills to undertake job searches and applications. A common stair-casing activity for work-ready clients is learning how to search and apply for jobs. When clients feel competent at job-searching, they are more likely carry out this activity independently.

I think she's like boosted me up a bit for looking for a job. Whereas, I wouldn't even have known where to look before I went to her. Or I wouldn't even try to look. (Older EE)

Specific job-search skills include navigating job-search websites, completing application forms, writing emails and attaching supporting documentation.

[The ICSM] has taught me how to use my account and how to email my CV. Coz before I never knew how to do that. I'd just walk in – "can I bring it to you?" "No, you have to email", so I didn't even bother...I didn't know how to send out emails or send out my CV to the employers. But today it's really good, I've learnt a lot...I can sit at the library, coz it's free on the computer and look for jobs, and just apply straight there, email. (Older EE)

ICSMs also provide one-on-one advice to help clients prepare for job interviews and the transition into work if successful. This includes helping select appropriate clothing and offering financial support to attend interviews and to transition into work. This can both reduce anxiety associated with moving from the benefit into employment (as barriers to work – such as covering childcare costs, buying a work-appropriate wardrobe etc – are addressed) and improve clients' chances of interviewing successfully.

[ICSM] told me how not to look so 'farm-y'. "When you go to the interview, don't wear your Swannie and gumboots" – which tends to be my default setting. She said, "next appointment, come dressed up like you are going to an interview." (EB)

Knowing all those things are available makes me want to get a job more. I know I have the shoes and the attire, all of that stuff is ready to go, and I would be able to pay the bills until my first pay day. Why don't they tell you all that at the seminar? (EB)

Work Brokers

When clients are ready to seek employment, they are commonly referred by their ICSM to a work broker, either internally within Work and Income, or externally in the community. Work brokers can be particularly useful in helping clients to gain interviews with prospective employers when there is a criminal record or lack of employment history, which would act as a barrier.

The work brokers, they can work around that. When I go to interviews, they come and they explain to [the employer] when was the last time I got convicted. And then [the work broker] sits down with them and explains my past to them, the reasons why and how it become that way. I think that gives [the employer] a different perspective of me as a person. (Older EE)

Supported Employment

For some clients, supported employment programmes are a valuable stair-casing activity. The employing organisation receives a subsidy which provides an incentive for it to “overlook some of the failings that someone who’s never had a job before might have”, and doesn’t have to commit to offering a permanent position.

[Through these programmes, clients] learn how to get up each morning, they learn how to deal with someone they don’t necessarily like, but who they work with, and they’re not allowed to just walk away. They learn that they can maybe live without smoking dope each day ... (ICSM)

Among clients who applied unsuccessfully for work prior to ICS, stair-casing is perceived as a better approach to ensuring they are work-ready and that their job applications will be successful (which make the job search process more efficient and has a more positive impact on self-esteem):

[ICSM] doesn’t push you and push you and push you like other case managers. I’d say “I don’t have qualifications, I’ve got to study, I’ve got to jump on some courses”. But they don’t see it like that. They think I should just ring up these fellas and say “oh, can you give me a job?” But I haven’t got the right skills, no qualifications, no CV, nothing. But with [ICSM], we’ve done a CV together. She’s broken the steps down to make them nice and easy and I am working my way up the ladder. (EB)

6.3 Gaps in Services and Activities

Some ICSMs felt that there were gaps in services and activities available in their communities that were suitable to meet the needs of their clients, and to which they could refer. In particular, it was noted that there is a lack of appropriate community-based services to support those with mental health issues and more broadly, activities to help develop more robust emotional wellbeing. One ICSM reported that depression is common, particularly among males and Māori.

Just a lot of mental health stuff as well. Like mental health and that motivation and confidence stuff, I think it comes from the mental health side of things. And that’s a huge thing that’s missing, like I think a lot of them suffer depression, or undiagnosed mental health conditions. (ICSM)

Another ICSM noted that, in the community in which she works, she has found it challenging to source appropriate outreach services for substance addiction issues, mental health services, and disability support services, all of which she has clients that would benefit from referral to.

7 Intensive Assessment and Planning

7.1 Goal Setting

The ICSM service is goal-focussed, with goal-setting an integral part of client engagement. Goal-setting and planning steps toward goals is an unfamiliar activity for some clients and something they would struggle to undertake alone. With the support of their ICSM clients have been able to develop goals that cover a broad spectrum and include:

- Employment
- Education and training
- Starting a small business
- Housing security
- Driver licence
- Having children back in their care
- Staying out of the criminal justice system
- Debt reduction
- Travel
- Improved health and wellbeing.

For some clients, working with their ICSM was the first time that they had used goal-setting as a mechanism for change.

I always knew about goals, but I never, ever did goals for myself. I didn't think I was able to go through with them, or fulfil them. (EB)

When [ICSM] first told me about [goal-setting], I told her that goals don't work for me. All the goals I've ever set I've just ended up failing on. (EB)

Clients value the opportunity provided for future focus and planning with someone they trust. Fulfilling steps toward goals supports a sense of achievement for clients.

Every time I fulfilled a goal, we'd move onto the next step. So [ICSM] had planned out everything to where I needed to be today, but starting from the bottom going to the top. (EB)

It is all about starting at the bottom and moving your way up through your goals step by step. My first step was to get my Class One license and I got that first goal. Then I did my [heavy machinery] license. Then the next step was a course then finally I got a job, which was my ultimate goal. (EB)

For some clients, goal setting supports a sense of direction, excitement, positivity, and hope about the future, which can impact their whole outlook.

[When I left the office after the goal-setting], I felt happy. I felt like I had done something new. I remember thinking “now my life is on track, now my life is going to go good.” (Younger EE)

[When I left the office after the goal-setting], I was feeling motivated. I was quite excited actually. I realised that, if you take things step by step, you can reach your goal. (EB)

It helps me look forward to the future instead of what I was seeing. It kind of gives my batteries a bit of a charge-up. I get a spark of hope. (EB)

Compartmentalising the future into a series of goals and smaller steps makes moving forward less daunting for clients. This is particularly valuable for those with mental health issues, allowing them to focus on one aspect of their life at a time.

My brain finds it difficult to cope with too many things. But [ICSM] broke everything down into small things – “talk to the doctor about seeing a psychologist”. She actually writes the steps down for me because my memory is shot. A ‘to do’ list actually works really well for me. It is like homework that I have to do. (EB)

For this client, who had had gained employment in her chosen field, goal-setting was something that she had taken from her experience of the ICS service and was now applying to her career:

My next step, my next goal, is to complete my level two, and that’ll give me a two dollar pay raise, and then that’ll give me a team leader, that’ll make me a team leader. And then from there to do my level three, and my level four, and then I can become an area manager on my level four. (EB)

7.2 Employment Planning

Employment planning needs to be realistic and appropriate to clients’ skills, experience, preferences, personal and family circumstances, and goals, to avoid repeated ‘failures’ at job interviews, or employment that is not sustained.

Employment planning helps Entrenched Beneficiary clients see they have a range of options. For some clients, an inability to see themselves in any job other than the one they previously worked at, can be a significant barrier to finding work. Employment planning helps clients identify and develop a ‘Plan B’ – a new industry, a new role or perhaps looking for work in a new location.

My goal was always trying to get a job in [specific industry] but [ICSM] helped me come up with a Plan B. So, I was still looking for a job in [specific industry] but at the same time I was working on my Plan B. I got my full license, did some courses ... I think I am more confident now, probably because of the skill set I've got now. Back [before the service], I'd only had one job, but now I can do multiple jobs. I can do a whole range of things now. (EB)

I was like "there's no way I'm going to work in an office." Yeah okay, I can write a Word document. I can use Excel. I can make PowerPoint presentations. But it never occurred to me that those skills are transferrable into an office job. Now that I think about it, I'm like "duh." It was an obvious choice. I can use computer software. I can use the internet. I can send emails. I can organise. I can file manage. I can do all this stuff. (EB)

Clients feel they can express their preferred interests, type and area of work they want to progress towards, and because they are not subject to the same benefit sanctions as other clients, not be pressured into applying for jobs that do not suit their needs and goals, which is likely to lead to more sustainable off-benefit outcomes.

Put the client somewhere where they want to be. So, if they wanted to work as a nurse, put them into medical training or something like that, you know, help them progress towards something that they actually dream of doing. Because then they'll stay there. (EB)

It wasn't a "you must apply for this job." It was a "check this out and then let me know what you think." So, she'd send me the link and then I'd go and have a look. I'd be like "yeah actually that's right up my alley. That would fit." (EB)

8 Outcomes

Time off-benefit for clients assigned to the ICS treatment group, as compared to those assigned to the control group (and who continue to receive services as normal), is the key metric by which the success of the ICS trial is assessed.⁷ However ICSMs expressed that, from their perspectives, indicators of the success of the trial are much broader in scope. These include aspects of personal ‘survival’, growth and development that are less tangible than ‘off-benefit’ outcomes and, in many cases, are difficult to measure, but can be life-changing – or even life-saving – for the client.

I must resist any pressure from certain staff who are still in the old paradigm of just moving people off benefit as quickly as possible. It's not about numbers, these are people. They're people who, if you don't do anything with them, sure, will cost the government over their lifetime. But the downstream effects are not just one benefit for a lifetime, it's use of the criminal justice system, their children's failures and risks. Who cares if they stay on a benefit if it means they don't go back to jail, if they can get help for their trauma in childhood, if they learn to read and write better so they feel more positive, if they are able to leave the house more. It's about improving their lives to make society better. (ICSM)

Measuring success rates are quite difficult because who says they've done well, and how is that measured? And that's quite hard for your personal development to go "Oh well I've got so many people, this person has been showing up to appointments" and so that's an achievement to me. But my manager's like "no, how many people have you got into work?" (ICSM)

Another ICSM identified savings in government social spending as an indirect outcome of the service, which is unlikely to be measured:

A client that I've been working with has come to a point, through their progress now, where they've had multiple children from foster care returned to their care. That's a saving of \$18,000 a year per child if you're looking at government saving. Not to mention what it's done for that client in reconstructing the family and having a vision of what their future as a family can look like. (ICSM)

8.1 Off-Benefit Outcomes

Of the 26 trial participants interviewed for this research, seven had achieved off-benefit outcomes, although three had subsequently returned to the benefit, one having lost their job, one returning due to an injury, and one due to seasonal work finishing.

⁷ Ministry of Social Development: *Intensive Client Support (ICS) Trial Evaluation: Interim 12 Months Evaluation*, pg. 23. Unpublished internal report.

Clients who had moved into employment as an outcome of the ICS service felt that this would have been unlikely without the support that their ICSM provided.

I'd probably be still on the benefit, still struggling, trying to make ends meet, not getting a job, probably not in a course either, going from home to home. (EB)

Before I did all this, I probably would have been like "I don't know if I'm going to be good enough." I would have had a whole different attitude because that's how I felt. I don't know if I'm good enough to do this or that. Am I going down the right path? Just having somebody to reinforce that that wasn't a part of my family – because the way I see it is, your family should say nice things to you. (EB)

Off-benefit outcomes for clients have had a positive effect on other aspects of their lives, including achieving housing stability and reducing or eliminating debt.

I've never been able to keep a home longer than three to six months. [Now] I've been in this home ever since I've moved down here, I've maintained it, I've been able to pay the bills, and been able to maintain my rent. (EB)

Some clients who had managed to achieve an off-benefit outcome expressed that, had the service been available to them earlier in their lives, they would have achieved this outcome sooner.

I was on and off the benefit since I was 19, oh 18. So that's a long time to be depending on benefits, and there were no other options given to me, obviously, otherwise I would have been off the benefit. (EB)

I think this job will be the job that I stick with until the end...this is what I wanted to do 10, 15 years ago, but I could never ... I never got given the opportunity. (EB)

8.2 Other (Interim) Outcomes

As well as off-benefit outcomes, interim outcomes from the ICS service for clients are wide-ranging, significant, and have been life-changing for many clients interviewed for this research.

My situation today, where I am now with my job, my housing situation, my financial stability, the relationship between me and my kids, the relationship overall with my family, my confidence. Everything's improved. [There's] not one area in my life that hasn't improved. (EB)

Health and Wellbeing

Clients report outcomes from engagement with the ICS service that include better management of long-term health conditions and better health and well-being in general.

One of the other ones or part of step one was sorting out my health which I am very much on my way to doing as well. (EB)

At one point in time, when I first met [ICSM], I was suicidal. I just didn't want to live. Basically, she helped to save my life. She put counsellors in place, she told me it was okay to go through what I was going through. She never made me feel like I was a freak. She always had time for me. (EB)

Other clients noted that they now rely on or use drugs and alcohol less frequently as an outcome of engagement with the ICS service.

I think a lot of my whānau have noticed a massive change, especially my brother. He was so used to seeing the drunk sister, the crying sister, the one that had no confidence, to this confident person that can take on anything. (EB)

[The ICS service] boosted [my confidence] a lot. I have a lot of confidence now compared to me having low esteem a year ago, year and a half ago. I was that bad that I was relying on alcohol because of my situation. (EB)

Improved Mind-Set

Many clients could identify and describe changes to their attitude, perspective, or outlook as outcomes that had resulted from their engaging with the ICS service. Among the most common outcomes for clients were increased self-esteem, confidence, sense of self-worth and/or sense of empowerment.

[The ICSM] made you feel good about yourself instead of being judged and made to feel like you were a piece of crap pretty much. I've had that from years ago. (EB)

If I had not met [ICSM], I probably wouldn't have come to this interview. I came today because [ICSM] has made me confident. She keeps telling me "You can do it! You can do it! They're not going to hurt you." (Younger EE)

I don't keep myself in a little bubble now. I put myself out there. I'm more confident. And I have the confidence to do things for myself as well. (Older EE)

Clients also identified having a more positive attitude, being more optimistic, and more goal-oriented as an outcome of engagement with their ICSM:

I was in a pretty, pretty dark, dark place. But since I met [ICSM], she's made me open my eyes to the bigger picture, and getting me out of the house and into a job. (EB)

Before, it was negative thinking, but she brings the positive out in me. (Older EE)

I had a bit of a pessimistic attitude and then I started working with [ICSM] and I started getting a more positive vibe about myself and got a bit more confidence to do stuff. That pushed me to want to reach my goals. (EB)

Clients had become more comfortable and confident dealing with Work and Income and were able to transfer this to the interactions with other government agencies, such as Housing New Zealand.

Now that I am able to talk to WINZ, I feel like it's not such a bad and scary place, I can see it's okay to talk the same way to other places. (EB)

Appearance

Clients had been able to address appearance issues that they felt posed a barrier to employment, for example getting cosmetic dental work done. Another client was in the process of having a tattoo removed which he had identified as likely to pose a barrier to employment.

Before I started my job last year, I was missing my front teeth. How would I go to a job interview without teeth? That's just wrong – but [ICSM] helped me with that. (EB)

Improved Financial Management

Many clients who had attended budgeting courses were now in a better position to manage their finances, including having bills paid on time and adopting new skills to avoid future debt.

They helped me get all my bills in place, everything, all my automatic payments set up. It's way better. It's easier. I'm not stressing out worrying about having to pay bills. (Older EE)

Clients felt that, with less pressure and focus on short-term employment goals, they could focus on other needs, which may have been barriers to progress, and to develop longer term goals and have a focus towards the future.

They were asking me how I wanted my life to be run. That's nice, especially when I'd been on the benefit for such a long time. I didn't really have a focus I guess. It was just like "I just need to get this paid this week. I need to get that paid next week. How am I going to afford this?" I didn't really have time to think about where I need my daughter to be going or I need to make a goal about my health. (EB)

Education and Training

Clients had been able to access a range of education and training, including literacy and numeracy courses. Some achieved certificates in a range of work-related skills through referrals from the ICS service, which many felt will increase their likelihood of being able to secure employment.

I didn't have any previous experience, so I had to look for another way to work on Transmission Gully and that was getting my tickets, my TC ticket, traffic control.... Well, now I can step on the roads and start working. Yeah, I'm work ready. (EB)

Driver Licencing

As well as providing an opportunity to experience success, which instils a sense of achievement in clients, obtaining a driver's licence is critical for some to be able to seek and secure employment.

I was really proud. When I first got my learner's I was running around, "Yeah I got a licence now!". (Older EE)

Probably just have no [driver's] licence, I'd be just in the same place I guess. I can drive somewhere now and get a job. I can go look for a job. (EB)

Reduced Likelihood of Criminal Activity

Some clients identified that they were less likely to resort to criminal activity since being supported by the ICS service.

If I didn't have this and people that are there to support [me], I'd probably be out there, doing nothing, probably ripping off people. (Older EE)

To be honest, I reckon I would have got caught with something, probably gone to jail. (EB)

Impact on Whānau

Clients identified that they had experienced improved relationships with whānau/family and, in turn, this had improved wellbeing for their children.

It's been a big game changer for my kids, because my daughter at the time, she was 15, so she was going through her teenage years and starting to run away and everything like that. She wasn't doing so well at school, mixing with the wrong crowd... With this change, with this move and with how my life's been changed in the last year, it's actually shown with the kids, you can see it with the kids.... We're more like family now. (EB)

Employment-Related Outcomes

Clients had gained skills in searching and applying for jobs, including CV writing and emailing. Other clients had achieved a greater level of motivation or determination to find employment and a greater sense of belief that obtaining a job is possible.

About two weeks ago there was a job going but I couldn't get here [to the interview] because I had no money. So, I just walked all the way here [about 4 km]. It was a long walk, but I knew the only way to get that job was if I came in for the interview. I was willing to walk that far to get the job. [Before the trial] I wouldn't have done that. I wouldn't have even thought about walking. I would have just thought "nah, I can't get there." [The trial] has given me a push to do things. (Older EE)

It certainly boosted my confidence in wanting to try and get into work. With other case managers, I felt like I wasn't important enough to want to help, so I'd walk away not getting anything out of the appointment. When I came on board with [ICSM] she's boosted my confidence to actually wanting to put goals in place, and wanting to work towards a job. (EB)

8.3 Outcomes for Early Entrants versus Entrenched Beneficiaries

ICSMs have mixed views on whether the service is more effective for the Early Entrant (EE) or Entrenched Beneficiary (EB) cohort.

Some feel that the service can be more effective for EB clients who have often experienced significant life events (such as having children, experiencing a significant health issue, or going to jail) and are often more ready for/open to change:

They've had more time to see the consequences of the shittiness of the earlier 15 years. So, they're often really, really, ready for change because they don't want the next 30 years to be the same. They've done the jail time and don't want to go back. You're much more likely to see that type of reflection in the older group. (ICSM)

However, these 'significant life events' can stymie this group when looking for employment – so while an EB client may be more open and ready to change, they can present more challenges for an ICSM in terms of achieving off-benefit outcomes:

They are coming from a background which means an employer is going to need to overlook some pretty serious convictions, the person may not be able to read or write well, they may not have computer confidence, and their body is not that of an 18-year-old who can jump on a spade for a 12-hour shift. (ICSM)

Another ICSM indicated that younger EE clients can be more challenging to work with due to their lack of stability and tendency to be transient, moving on and off the trial service.

It's only been three years and some of these kids have come on, came in at 18, 19, and most of them young ones at the beginning are not on my caseload now, because they move and they come back, they move and they come back. They're all over the place. (ICSM)

Older Early Entrant Cohort

The 12-month evaluation found that the trial was more successful in terms of off-benefit outcomes for Entrenched Beneficiary clients, compared to Early Entrant clients. Clients aged under 25 years were already well serviced by a wide range of other MSD interventions, which may have contributed to the lack of ICS impact for them. For this reason, the trial includes only clients at the upper end of the age range (those aged 25-29 years) in the Early Entrant cohort, for whom it has proven difficult to explain the lesser impact of the service.

This 24-month evaluation collected data for five clients in this age bracket (25-29 years). None of these clients were off-benefit at the time of interview, although one had been off-benefit and then returned to the service. They were clients with complex barriers and patterns of behaviour that were not conducive to being ready for employment, however this is not dissimilar to some younger clients in the EE cohort and some clients in the EB cohort. The main barriers and issues for this group included criminal records, including time in prison, family care responsibilities, high debt, and lack of housing security and/or transience.

Data collected did not reveal any specific commonalities among the five clients in the 25-29 age group that stood them apart from clients who were younger or older. Some were more similar to younger clients in their characteristics, while some were more similar to older clients. In general, maturity, motivation, and life experiences seemed to be greater determinant of current situation and outcomes of the ICS, rather than age.

There were mixed views among ICSMs with regard to working with this older EE cohort (aged 25-29 years), with some finding them easier to make progress with, due to a perceived higher level of motivation for change. In contrast, others found them more challenging to work with.

ICSMs indicated that their clients in this cohort generally had the same range of issues and barriers that other clients did, however for these clients the challenges were often more complex and entrenched, having compounded over more years, compared to their younger counterparts. For example, substance abuse and mental health issues were often more pronounced, and financial difficulties, including debt, was often worse for this group. It was also noted that a higher proportion of this cohort had a criminal record compared to younger clients. In addition, it was noted that most older EE clients had been employed in the past, but had been unable to sustain employment, in contrast to many younger clients who may never have had a job.

It was mentioned that, by the time that clients reached their 30s, issues had often come to a head, which for some, had become an impetus to try to 'turn their lives around'. As framed by one ICSM, the situations for older EE clients have often gone "one of two ways", since their youth, either their circumstances have improved, or have got dramatically worse, depending on the issues and challenges they faced, and the support available to address these earlier on.

One ICSM highlighted that there is a lack of holistically-focused intensive contracted services for this older Early Entrant cohort, and that perhaps something similar to the *Limited Service Volunteer* programme run for young people, could be ideal to be able to offer to older EE clients.

One ICSM noted that older Early Entrant clients tended to be more settled and less likely to be living transiently than younger clients, often because they had responsibility for children. In contrast, another ICSM found this group more likely to be homeless, as 'crashing' with mates seemed to be less common.

Two ICSMs felt that the service should ideally still be taking on younger EE clients, as, without adequate supports in place at this life-stage, they risk becoming part of the older EE cohort, whose barriers have become increasingly compounded and entrenched. Although there are a range of MSD interventions available to this younger group, it was noted that these tend to be provided in group settings rather than one-on-one intensive support, which is felt to be more appropriate and beneficial for some clients.

8.4 Who Does the Service Work Best For?

For some clients who had made positive progress on the ICS service and were either in employment or work-ready, the service had been offered to them at an optimal time, when they felt ready to make significant changes in their lives but needed external motivation and guidance to be able to do so.

I did need [the trial]. When you've been from where I was to where I've been going now through my journey, it was something like [the trial] that actually came calling at that right time. I needed it. (EB)

It will work for everybody if they have that positive mind. If they have a negative mind then they're not going to get anywhere, but if they have the positive thoughts and a can-do attitude, then it'll work for them. (Older EE)

One of the challenges of the trial at its current point for ICSMs who have been involved since the start is motivating themselves to work with clients who have not engaged with the service (the 'Disengaged' segment identified in Section Eleven). ICSMs find it most rewarding to work with clients who are engaged, motivated, and making progress, even though they may still be some way from being work-ready. In contrast some ICSMs express frustration at the time and effort spent trying (often unsuccessfully) to engage with some clients.

Some ICSMs feel that those clients who choose not to engage with more intensive client support should be transferred to an alternative case management service where benefit sanctions might be used more effectively to encourage engagement.

There is a certain part of the caseload, they're on there in name only really. I'm not actively working with them because they're just not playing ball. Some of these clients [who haven't engaged with ICSM], they might be better on the normal service where they should engage. Every client has to engage when they've been on the benefit for 12 months, they have to come in and sign a bit of paper. If they don't engage, their bene stops. Is that a better investment – or is it better for me to try to do my job better and keep trying to drag these people in? (ICSM)

9 Client Perspectives on the Service

9.1 Initial Perceptions

When told about their involvement in the ICS service, most clients were comfortable with being assigned to a consistent case manager and felt that it was likely to be advantageous to them in terms of progressing towards employment and/or in addressing other issues or problems that they faced.

I was happy, because with other case managers, just the normal case manager, you don't really get that one-on-one support, and the intensity of their position, you don't really get to see them every month or every two months. (EB)

Some clients initially thought that they had been identified to be put onto the ICS service because of the way they had engaged with previous case managers, or some other aspect of their behaviour or interaction with Work and Income.

It's just for the fact that I've been slacking... I think the main reason why they put me onto it was just because my other case managers were having trouble... I've always tried to turn up to all my meetings but there might have been one or two that I missed. (EB)

A small number of clients commented that, when they first heard about the service, the term 'intensive' made them wary of what to expect.

I actually felt like they were trying to push for me to get a job quicker. When you see the word 'intensive' you think 'intensive care'... I was actually kind of hesitant about going... is this going to be one of those nasty caseworkers that's going to look down their nose at me and be like "just get a job and do it now, now, now!" Pressure me into something that I don't really know if I want to be doing. (EB)

Just 'intensive care' just sounded quite... do I need this? Just like counselling, you know, you think you don't need it and you don't really know when you're in that situation, so it was kind of like that. I was just a bit frightened that it was some sort of counselling thing. (EB)

Some clients initially found the approach from their ICSM somewhat intrusive as they had not previously experienced the same degree of discussion around their personal circumstances with Work and Income and may well have been unfamiliar in talking about personal matters in any forum.

I was a bit ugly at her at the first moment, but I ended up apologising to her. And I said to her “sorry, you’re just digging too deep.” (EB)

Clients tended to have a good understanding of the aims of the service in terms of supporting their stair-casing progress towards work-readiness by addressing the barriers that exist for them.

I think the aims of the service is to help me get into work, and to see where all the barriers are. They’re there just to help me knock down some of these barriers. (EB)

9.2 Clients Preference for the ICS Approach

All clients interviewed were positive about their experiences of the ICS trial. This is strongly driven by the relationship they develop with their ICSM and the type of support they receive. All clients indicated that they would recommend the ICS service to others receiving Jobseeker Support.

Clients preferred the ICS approach to previous case management they have experienced for a range of reasons, including that they find it more ‘user-friendly’ and less stressful. ICSMs accommodate them in a more flexible way, which lowers anxiety that may be associated with Work and Income.

Back in the day when I wasn’t on the Intensive Client Support, everything just seemed harder. You needed all the information before you came in and if you missed one thing they’d send you off to go and grab it, which means you couldn’t see them in the same day. When you needed it that day, it gets stressful. And everything just gets up in the air, and I just can’t be bothered. (EB)

Other clients indicated that they no longer felt bad when seeking additional help or support, such as food or emergency grants.

It’s like a whole different level of care. [ICSM] doesn’t make you feel bad when you ask for help. She doesn’t act like she’ll be pulling the money from her own back pocket like some of [the case managers] do. If [all case managers] actually paid attention and cared about their clients’ circumstances, so everyone felt good about coming in here, you wouldn’t need Security Guard Bob on the door ID-ing people. (EB)

Clients appreciate ICSM working with them in a holistic way to help identify and address underlying problems and challenges that may be acting as barriers to progressing toward off-benefit outcomes.

She helps you towards your goals. And instead of like pushing you into stuff, she helps with your problems too. Like I’ve had a lot of problems, so she pulls it apart. (Older We talked about everything that was going on in my life at the time. How’s my health going? How’s my daughter doing? How’s she doing at school?)

Has she got any needs? Do I need self-esteem coaching? Stuff like that. She just kept trying to work out what I needed to help me make the steps to actually get a job and find employment. Then once we knew where I should be focused and what kind of a job I should be looking for, then she would send me links for jobs that she'd seen. (EB)

Clients perceive ICSMs to engage with them in a way that is in stark contrast to past experiences they have had interacting with Work and Income staff. Previously, clients had experienced interactions with case managers in which they felt there was a palpable power imbalance and in which there was a risk of benefit sanctions if specific activities were not undertaken.

My last case manager, she was always down, like downing. "No, you've got to do this or else I'm cutting your benefit", instead of helping me achieve my goals and giving their time. (Older EE)

Clients were also positive about the future focus of the service. This is important to those whose pasts have been particularly difficult or where past events (such as imprisonment or gang involvement) have been barriers to obtaining employment.

[ICSM] is there to help me go forward, to move on, to not worry about what has happened in the past with my family and my circumstances. We are focused on moving on. (Older EE)

Clients felt that the way the service is designed and delivered supported them to be motivated to engage in stair-casing activities. Some clients felt that the support they received from their ICSM has been crucial in their ability to stay focussed on making progress toward goals.

I wanted to give up a lot of times, but [ICSM] was quite good in that department. She'd always say "never to give up" ...and she'll keep helping me to get to where I needed to be. (EB)

While clients preferred a less pressured approach from their ICSMs than they had often experienced in the past from case managers, some clients also noted that they appreciated that their ICSM was not 'too easy' on them, and had expectations of them to fulfill activity commitments.

She listens, but then she's also strict... It's good like that though. It keeps me on my toes. (Older EE)

10 ICSM Perspectives on the Service

10.1 Role of the Intensive Client Support Manager

The ICSM role is critical to client engagement and requires strengths and skills in terms of human relations, life experience, and resilience. Current ICSMs feel that it is not a role that would suit all case managers and that retraining current frontline Work and Income staff to undertake the role might lead to less successful client outcomes.

You wouldn't want someone who's very entrenched in the 'public servant, safe desk job' kind of thing. Someone who sees a client – do they have some food assistance available? Tick. Give it to them and boot them out the door, and never think about all the problems that led them to need that food assistance. (ICSM)

Effective ICSMs adopt a holistic view of a client's current circumstances and past life events that have given rise to these and are therefore able to effectively support and guide them towards improved outcomes.

People who can identify deeper needs and actually follow through and try and get that person the help they need. (ICSM)

ICSMs were attracted to the role because of the scope that it offered in terms of being able to work holistically with clients in a more in-depth way, and to be able to support them to achieve more positive outcomes than they might be able to via traditional case management, which was described as more transactional in nature.

When this role came up, I thought this was a different way of working; this will give me probably a bit more flexibility to be able to work with my clients in-depth, and help them a bit more. (ICSM)

ICSMs appreciate having the time to investigate first-hand the resources and services available in their community so that they can broker better and more sustainable solutions for clients. However, they note that this can be time-consuming and it can take months or even years to build up a broad knowledge of suitable services and resources to be able to access for clients.

The difference from being the case manager to having this role was that you're able to get out in the community, and go and get information to be able to help support these clients where they need it. (ICSM)

The flexibility to be able to network in the community, see what's out there, look at our options. You don't really have time, or it's not part of your role as a case manager, to go out and network as such. (ICSM)

Feedback from clients and ICSMS indicates that qualities of a good ICSM include an ability and willingness to:

- adopt a holistic view of clients' circumstances and barriers to work-readiness;
- be approachable and friendly;
- be flexible in their approach to meeting diverse client needs – accept there's no 'one size fits all';
- effectively network in their community to source suitable activities and services for clients;
- be empathetic and non-judgemental;
- be curious and to think 'outside the square';
- be persistent, but also accept that clients will have 'set-backs';
- be able to guide without directing;
- be willing to take a long-term view of off-benefit outcomes;
- be innovative in their approach to dealing with clients. If something is not working for a client, be able and willing to think of another way to do things;
- communicate well and be able to 'sell' clients the bigger picture/longer-term prospect; and
- implement sanctions if poor compliance arises.

Successful ICSMs will be able to find a way to connect with each of their clients individually on a level that will encourage engagement.

I had a client who was a patched Mob member. They are not allowed to wear their patch in here, so they leave that in the car but the rest of their outfit is all black and red. And this client came in in the most interesting outfits. A general case manager would have just talked to him about his job hunting, but for me, the curiosity angle comes in and I talked to him about his outfits. It turned out he makes them all himself, that he is quite creative and quite passionate about what he does. So I got a hint of another person in there as opposed to the stereotype of the gang member. That gives you more to work with. (ICSM)

You need to be a really strong communicator. You've got to try and sell them the longer-term picture and I think you have got to have some marketing skills there. You can't sell clients a dream that is not realistic. That's not fair. I've heard work brokers and other case managers say "You'll always be better off in work." Better off how? You should be careful of the way you say that. They're not going to be better off in the next six months – it's actually going to be enormously stressful. But a year down the track ... (ICSM)

As digitalisation of Work and Income's services increases as part of 'Simplification' (Work and Income's new programme for transacting with clients), ICSMs believe there will be an increased need for intensive case management. Clients with some level of education, some familiarity with digital technologies, and a degree of self-confidence, will be able to navigate and use the services and support of Work and Income available online relatively autonomously, and so will visit service centres less often. However, this means that those who do continue to visit service centres to seek assistance from case managers will be those with the more complex needs. Case managers will need to be able to identify deeper needs and be able and willing to follow through on these to get the client the assistance that they need.

The people coming in the doors will be those who can't get a food grant online because they've actually had too many, they've used up their entitlement or they're not engaging with financial support services. I think every case manager is going to require some of these skills around de-escalation, around connecting with the client so they can understand their needs, understand their big picture rather than just doing what policy says. (ICSM)

Are Two ICSMs Better Than One?

The Rotorua site has two ICSMs. Other ICSMs see the key advantage of multiple ICSMs at a site being the ability to trade off clients. When an ICSM finds they have got 'stale' with a client (for example, if they can't bond with the client after several meetings), they are able to swap them to the other ICSM.

Because I am the only one at this site, I tend to park the ones who don't bond with me, until maybe they're at a better place or I feel I've got more juice in the tank to deal with them. There's an element of self-protection. You might have a client that hasn't shown up to your appointment again. You think "am I going to call them? No, I'm just going to leave it. I'm just going to get on with this next client I've got who is going to turn up and be ready." You could probably be more efficient if you had a colleague in the same role so you could trade off your clients – "I know I'll end up losing my rag with him. Can you give him a call for me?" I think that would be neat. (ICSM)

Key advantages to having two ICSMs on site include more efficient identification of, and networking into, services and support available in the community (as one ICSM can inform the other of a particular service they have identified – or ask the other for recommendations for local service providers) and providing informal professional supervision.

10.2 ICSM Perspectives on Service Tools

ICSMs have a number of service tools to track and report on client progress. These are the ICA (Initial Client Assessment), the BEUT (Behavioural Evaluation Update Tool) and MEP (My Employment Plan).

The ICA (Initial Client Assessment) form includes questions relating to goals and personal circumstances, work expectations and experiences. While it became compulsory for ICSMs to complete this form for all clients in the second year of the trial⁸, in practice it was not completed consistently.

Some ICSMs do not see the BEUT as an effective tool for measuring client progress in its current form as it does not capture detailed or sufficiently-nuanced data. They would like to see this expanded or redesigned to more accurately be able to capture a client's progression.

I think the BEUT doesn't capture enough information, it's not rich enough, it's just a tick box. There's this big housing crisis at the moment so it's like when you want to capture like housing is unmet, lives in a garage. (ICSM)

I can see why [the MEP is] needed for reporting purposes, absolutely, but in the real world they're just clunky. (ICSM)

Another ICSM could not see any value of the BEUT and did not refer to these as a practice tool:

I don't understand the relevance of the BEUTs. The BEUTs are not useful to me, I don't ever refer to them. (ICSM)

ICSMs prefer to be completing BEUT forms on entry and exit as is current practice, rather than having to complete them quarterly for each client. However, there remains some lack of clarity around the requirements for the use of reporting tools for some ICSMs.

We need to have clear guidelines as to what you want us to do. At the beginning, it was that we only have to do the BEUTs and I was like, no you do the BEUTS, employment plans, and the ICAs, all the stuff. What do you want us to do reporting wise? Be very clear as to why you need it, and what it's for. That's all you need to do, just be clear, right from the get go, because when you're having to catch up on stuff that you haven't been doing, it's just a pain. (ICSM)

⁸ Ministry of Social Development: *Intensive Client Support (ICS) Trial Evaluation: Interim 12 Months Evaluation*. Unpublished internal report.

One ICSM noted that completion of an Initial Client Assessment very early on in the client's engagement is not always appropriate given the level of detail and personal information that is being sought. To gather in-depth information that will have value in supporting clients to make progress, rather than just 'surface' information, can take numerous meetings, and for this reason ICAs are often completed incrementally as and when clients are ready to provide the necessary information.

And in this initial interview assessment form, you have to be able to capture that as soon as possible. They're asking for you to do that in the first interview, if you can. It's a seven-page document. It can be a bit tricky when you're meeting somebody for the first time to go into such depth on the initial meeting. (ISCM)

"Can you speak to me about the convictions that you have?" when they don't know you from a bar of soap and they haven't built up that rapport. They just go "no, I don't really want to talk about it." So then this document isn't really capturing as much as we require. (ISCM)

10.3 Policy and Process

Caseload Issues

The caseload size was increased for the third year of the trial after feedback from some ICSMs suggested that the benefits of the service could still be realised with a ratio of 1:60, as opposed to 1:40 in the first year⁹.

Most ICSMs feel that the current caseload of 1:60 is manageable and allows for sufficient intensity in client engagement. A ratio of 1:60 still permits diary flexibility, allowing ICSMs to meet with clients promptly when needed – a key strength over general case management. From a pragmatic perspective, a higher ratio is seen as making more effective use of ICSMs' time, given the high rate of appointment 'no-shows' among service clients and also the fact that each caseload includes a small group of clients who are completely disengaged with the service and with Work and Income (the 'Disengaged' persona identified in Section Eleven) and will often only engage once their benefit is stopped for repeated non-response (under Section 81 of the Social Security Act).

However, not all ICSMs felt that the increase in the size of the caseload was appropriate given the level of intensity required to work with each client to be effective. One ICSM felt that their ability to be responsive to clients (in particular, answering phone calls and texts) had been compromised by the increase in caseload. They expressed concern that, as the service continues and is found to be beneficial to clients, the caseloads may also continue to increase – *I bet [National Office] are saying "If we can get good results for*

⁹ Ministry of Social Development: *Intensive Client Support (ICS) Trial Evaluation: Interim 12 Months Evaluation (Qualitative)*. Unpublished internal report.

this amount of money, wouldn't we be able to get better results if we just up the numbers for the same amount of money?" – until they return to current general management caseload levels.

There is that inevitable drift towards 'business as usual.' We're already half-way there right? 60 to 120. (ICSM)

I feel like the 40 would've been sufficient in regards to the type of information that they're wanting us to be reporting on. I don't know how people got bored with having 40 people on their caseload... I'm not too sure what they're doing, why they get to a point where they've become bored in that role because these individuals have always got growing aspirations and goals that are constantly in progress. (ICSM)

One client also viewed ICSMs' smaller caseloads positively, perceiving that they had a greater chance of being referred on to job opportunities.

The more people [ICSMs] see, the greater the chance that you might be overlooked when a job comes through, that others in the group will get put forward but not you. If there is a large group of you, you might not even find out about that job. It just gets given to others. (Older EE)

Because they are working holistically with clients, when a client finds work or comes off benefit, they don't immediately exit the ICSM service. ICSMs note that they sometimes continue to see ex-clients, particularly those who may not have addressed underlying issues. Clients may still make contact with their ICSM when they need support or advice, as they have built a trusted relationship with them. Clients may also contact ICSMs to request financial assistance in the month or two following their transition into employment. This can impact on ICSMs' capacity and ability to take on new clients, however one ICSM noted that they would commonly refer clients on to the In Work Support Service once they were no longer an ICS client.

They might have come off benefit, but all the problems that were there beforehand are still there. (ICSM)

If a client comes off the service for any reason (moving into work, leaving the area, going to prison), they are currently unable to return to the service unless a space becomes available. ICSMs note that the current wait period before being able to re-join the service may be several months or a year. This is extremely disruptive and frustrating for the client, and often comes at a time when they are experiencing a high level of stress (for example, if they have lost their job or a partner who was supporting them financially has left). However, while these clients may benefit from being able to come back onto the service immediately (in terms of being able to work with someone who knows them well), some ICSMs are keen that clients don't

see intensive case management as an ‘easy fall-back option’, to avoid their responsibilities to Work and Income, and therefore feel that some ‘stand-down’ period is justified.

If things go wrong for clients [off-benefit], they can try and get back in with me, thinking that I will make everything go away. They think “I have to get back on the bene and it’s going to be a pain in the arse. Maybe if I can just find [ICSM], I won’t have to do the work seminar, I won’t have to provide documents to prove why I was fired, I won’t have to sit through an hour-long appointment to get my paperwork done.” (ICSM)

Ring-Fencing of ICSM Role

The 12-month evaluation found that there was variation in the extent to which the ICS workload was ring-fenced (that is, ICSMs only working with ICSM clients). The evaluation noted that *“maintaining a ring-fenced ICS workload was sometimes a challenge, and this needs to be carefully monitored and minimised to retain the integrity of the trial.”*¹⁰

Ring-fenced workloads allow ICSMs more time to focus on client engagement and community networking. However, at least one ICSM reported that to maintain good relations with other case management staff, she continues to provide support to the general case management team. This support primarily involves taking on community liaison roles (as opposed to general case management) – which the ICSM felt was beneficial in helping her improve her knowledge of the community. Currently about 10 hours a week of the ICSM’s time was not spent on ICS.

I know National Office say “we pay for these extra bodies at your site so you don’t get to touch them or use them. They’re just using the office space, essentially.” But they’re in sites that are under enormous pressure physically and people-wise with the demand coming in through the door. It’s totally unrealistic to think that Intensive Client Support Managers are going to sit there and not do anything. That would make us pariahs in our workplace, like we think we are better than everyone else. (ICSM)

Another ICSM noted that, due to the high demand for frontline contact from clients, it was difficult to avoid providing support to clients outside of their caseload, when they were available to do so.

Sometimes you can have 30 people waiting down there, and some of them have been waiting for two hours. And some of them aren’t your clients, so I don’t always stick to just ring fencing ourselves because our office is so busy... we want to still be part of our team... I think Wellington finds that really hard to understand. (ICSM)

¹⁰ Ministry of Social Development: *Intensive Client Support (ICS) Trial Evaluation: Interim 12 Months Evaluation (Qualitative)*. Unpublished internal report.

Impact of the MSD Security Review

As noted in the 12-month evaluation, the MSD security review was a significant event which adversely affected ICSMs' perceptions of their mobility. ICSMs continue to feel that the role has been much more office-based than they envisaged. (However, it is important to note that ICSMs are still able to be mobile, and to meet with clients in spaces outside the Work and Income office provided it is a publicly-shared environment or appropriate safety measures are in place.)

Where services have been provided by third party NGOs, ICSMs have been able to attend with their clients. Both clients and ICSMs report this as being very beneficial.

I've got a client who was too shy to go into the literacy service. So, I can meet them out front there – provided I have a site safety plan done and I have my tracker on my work phone activated. (ICSM)

ICSMs believe that stair-casing activities would be more effective for some clients if they had the option of being able to collect clients from home and take them to the activity or to meet with clients in a more 'neutral' setting such as a café rather than at a service centre. Ideally ICSMs would like to be able to have more off-site client contact.

It'd be good if we could, like the other day my client went off to Limited Service Volunteer Programme; he had to walk about an hour with all his clothing on, you know, his flash clothing, and his bag of gear, to go away for six weeks. It would've been nice if I could actually go and pick him up and just save [him] the hassle. (ICSM)

It's so frustrating that I can't go out there and knock on the door, "come on, we're doing this now". (ICSM)

Client Facing Time versus Processing Time

Some ICSMs still process applications for their clients when it will increase efficiency in terms of the turnaround time, although they understand that this is outside the scope of their role. Others send all applications away to be processed.

In regard to our processing, I get a form that a client has filled in for admin to keep their benefit going. I still have to do half the work, the SWIFT stuff, so the stuff that actually granting takes 30 seconds, where you've got to write the note.... It takes me literally 30 seconds to process it. So, I've really struggled with just doing it myself because seriously, it takes me longer to send it to them and then them just to scan it and send it off. That annoys me. (ICSM)

Change of Personnel at National Office

Some ICSMs felt that the change in personnel at National Office over the course of the trial was detrimental. It is noted that within a week of the trial starting “*with a hiss and a roar*”, those who had developed the programme had moved on to their next project. One ICSM reported that she no longer ‘knows who to contact’ at National Office with queries or requests about the trial.

Exclusion of Youth

At least one ICSM felt that the exclusion of younger EE clients from the trial would be detrimental to outcomes for them as the service they receive through an alternate case management approach would lack the intensity they need to stair-case toward an off-benefit outcome.

I don't think that's a good idea. We do have a youth service, but they still have 150, well they actually would be more like 200 [on their caseload], so those people are possibly going to fall through the cracks or not get the intensive service that they might need. I don't think that's a good idea. (ICSM)

10.4 ICSM Support and Professional Supervision

The ICSM role can be challenging, and maintenance of emotional wellbeing for ICSMs is important for safety and optimal service delivery. There are mixed views and understanding about the role of, and need for, professional supervision, with some ICSMs seeing this as crucial maintenance to avoid ‘burn out’, and others feeling it is something to use in a crisis or if no other support is available.

My colleagues and I have felt jaded by just the role itself. Sometimes that sadness of hearing and bearing what our clients have gone through can make you actually quite tired of doing it. (ICSM)

ICSMs have been expected to organise their own professional supervision – which has had limited success. ICSMs report recommended professional supervisors being rejected based on a conflict of interest, supervisors not diarising appointments, or ICSMs themselves getting too busy and not prioritising support.

Social workers have formalised professional supervisors. We're doing de facto social work, so I think it is absolutely crucial that the Ministry has a professional supervisor contractor for the ICS expansion. (ICSM)

If you don't have much juice in the tank, then it's harder to be as giving to the clients who actually need quite a lot from you. That's why I think professional supervision needs to be a contract rather than self-organised – to make sure you actually do it. (ICSM)

The kind of work we're doing, we're dealing with trauma, some huge traumas in people. I've broken down with some stories that I've been told. It's hard, and you can't take all that home with you. It's really important to separate yourself from that kind of stuff. (ICSM)

11 Client Personas

Based on data collected from client and ICSM interviews, and from client engagement documentation, a number of 'personas' were developed, which incorporate and represent common characteristics and patterns of behaviour observed among clients. There is a continuum for each aspect described and considerable overlap between personas, however for the purposes of building illustrative composite case studies, the personas identified are as follows.

Note that the case studies presented in this section are composites of all clients interviewed who fit within the persona. The names of the clients are fictional.

11.1 'Success Story'

These clients have made significant life changes since being on the ICS service and are either in, or ready to be in, work or study. They can articulate the barriers they faced to being off-benefit and how these have been addressed and overcome through intensive client support.

Composite Case Study

Background

Karen in her mid-30s. She went on the Independent Youth Benefit at age 16, and moved onto the Sole Parent Benefit when she was 18. Karen's relationship with her partner was 'on and off' for the following few years, and they had another child. When she was 24 years old, Karen was convicted and incarcerated for two years, during which time her children were taken in the care of Child, Youth and Family.

Since being back in the community and on Job Seeker Support, Karen's children came back into her care. She experienced a high degree of transience, moving from place to place every few months. Karen had always wanted to be off the benefit and improve her circumstances, however she had no idea how to go about seeking employment and believed that her criminal record would always be a barrier. She had no skills or experience in CV writing, applying for jobs, or interview presentation. Her self-esteem was low and she tended to rely on alcohol and drugs to mask negative thoughts and feelings. Karen found herself mixing with people who she described as 'the wrong crowd'. She was also finding her eldest child becoming increasingly difficult to manage, spending significant time away from the home.

Experience of ICS Service

Karen was pleasantly surprised to hear that her ICSM had come from a background like hers and bonded with her ICSM from the initial meeting. She felt her ICSM had a good understanding of her issues and the challenges she was facing, and she was also excited about the different types of support that the service might be able to offer her.

Contact between Karen and her ICSM was much more frequent than she had experienced with previous case managers, with fortnightly face-to-face meetings and further contact by phone. Karen was happy with the intensity of the contact with her ICSM; initially she appreciated having someone to talk with about her issues and later she liked having regular meetings as she felt this resulted in quicker progress towards her goals. She felt that she was treated respectfully and without judgement by her ICSM and liked the fact that she could contact her any time she needed to – to ask about a job she had seen advertised for example – rather than having to call the Work and Income Contact Centre and wait for an appointment.

Karen could define her areas of interest and employment goals with the help of her ICSM. She had no previous experience of goal-setting but found this to be a useful tool which helped give her a sense of direction and also a sense of excitement about what the future could hold. Meetings with her ICSM were always positive, focussing on her strengths and identifying action steps that she could take to work toward her employment goal.

A range of activities were offered to Karen and during her time in the ICS service she undertook several courses and seminars, including CV writing, First Aid certification, caregiving, and general employment. Karen's ICSM helped her create a 'Real Me' online ID so she could keep track of her benefit payments and entitlements independently, and she was also referred to a driver licencing course and attained her full driving licence.

Over the course of the subsequent 12 months, Karen applied for more than 30 jobs as a caregiver, usually not making it to interview stage. Her ICSM undertook a brokering role by contacting prospective employers and discussing Karen's history, progress and future goals. During this time, the regular meetings and the positive reinforcement she received from her ICSM helped Karen to remain optimistic and not become disheartened by the process.

Outcomes

She was eventually successful in securing a job in her chosen field which she has now been in for six months and loves doing. The job required relocation to a nearby town which she was happy to do to facilitate a 'fresh start' for her and her whānau.

Since the move, Karen has observed her children to be more settled, with her eldest no longer 'roaming' and now happy to spend time at home. She feels that she is providing positive role-modelling for her children and that they are a tighter family unit.

Karen is continuing to undertake training courses through her employer and intends to progress her career by advancing to higher levels within the organisation. She would like to stay with her current employer and never wants to go back on a benefit.

She has been in the same home now for seven months (the longest in her adult life) and enjoys being able to manager her finances and pay bills on time. Her family visited recently from Australia and noticed a dramatic change in Karen, both physically and emotionally, and remarked at her new-found self-confidence and 'can do' attitude. Despite her relocation, Karen remains in touch with her ICSM, keeping her updated on her progress. Karen is keen to make sure her ICSM knows what a positive impact she has had on her and her family's lives.

Karen believes that without the support of her ICSM that it is likely she would still be on a benefit.

11.2 'Almost There'

These clients have also made considerable progress toward being ready for work or study, however they still face some barriers, which they are working toward addressing. They are motivated to gain employment or be accepted into a course of study and are using multiple channels to achieve this. Employment may not be sustainable in the short term and they might cycle back to benefit several times before sustaining long-term off-benefit outcomes.

Composite Case Study

Background

Wayne is in his 30s and has been receiving Jobseeker Support this time for 18 months and in the ICS service for 15 months. He has worked on and off for most of his adult life in one industry, but has had difficulty sustaining long-term employment, and so has bounced on and off the benefit.

Wayne has anger management issues and finds it difficult to interact with others. He prefers not to be around other people and acknowledges that a barrier to sustainable employment is his attitude, particularly to people he doesn't like.

Experience of ICS Service

Wayne came onto the service keen to work, but wary of being pushed into roles that he would not be able to sustain (as had been the case previously). After a referral from his ICSM, Wayne has attended counselling to help him manage negative emotions, control anger, and be more personable around others.

Wayne has particularly liked the continuity of working with one person at Work and Income, who has got to know him and means he does not need to re-tell his story at each meeting. He has not felt judged or 'put down' during meetings with his ICSM, which he has felt in the past when dealing with Work and Income. This has helped him to 'open up' and be more engaged in the process of progressing towards being off-benefit.

Support of his ICSM has helped Wayne to look beyond the industry in which he had primarily worked and look at alternative options. Setting a goal in place to gain employment and detailing small practical steps necessary to achieve the goal has meant that he could remain focussed without feeling overwhelmed.

He feels that he has been able to make significant progress towards sustainable employment by being able to move at his own pace and not be pressured into attending repetitive job-search seminars or to apply for any job that might be available, which could result in another 'failure' in the workforce.

Having collaboratively identified an industry and type of work that would be suitable and sustainable, Wayne was referred by his ICSM to a series of industry training courses and gained a Level One certificate.

Outcomes

Wayne is continuing counselling and is becoming increasingly self-aware and able to deal with 'triggers' that may have previously caused him to become angry. He has increased motivation to find sustainable employment and is applying for jobs.

His ICSM believes that he is ready to be back in the workforce, provided the work environment will suit Wayne's personality and needs, and is encouraging the client to take his time around finding the right fit with an employer.

11.3 'Slow and Steady Progress'

These clients still have significant barriers to being ready for work or study, however they recognise the barriers that exist and are making progress toward addressing these with the support of their ICSM. Barriers tend to be long-term 'survival' issues – such as physical or mental health problems or significant debt – which can be expected to take some time to become manageable.

Composite Case Study

Background

John is 40 years old. He has experienced significant trauma in his past and has been diagnosed with Post Traumatic Stress Disorder. He has suffered from depression and been suicidal in the past. He is not comfortable around people he does not know well and tends to leave the house as little as possible. John has two children, not in his care, but whom he has for overnight visits. John has worked in the past, doing outdoor labouring and landscaping. His last job was about 10 years ago.

Experience of the ICS Service

John has been in the ICS service for two years. Contact with his ICSM tends to be by phone as the number of people at the Work and Income office makes him feel anxious. He has met with his ICSM face-to-face on about six occasions, the first three meetings being in a private meeting room, which helped John feel less anxious.

John's ICSM referred him to a psychologist, who he has been seeing fortnightly. The psychologist is helping him come to terms with his past and gradually feel more able to interact with people. One of John's long-term goals is to improve his mental health, with a short-term goal to regularly attend psychologist appointments and to reschedule if he feels unable to do so on the day.

With the support of his ICSM John has also been able to identify a goal of having his own small business in garden maintenance services. He has also enrolled with Te Wananga o Aotearoa and is undertaking home-based numeracy and literacy courses. His ICSM used discretionary funds for John to purchase a laptop to help with his study. John is extremely appreciative of the laptop and is determined to pass his courses to show his ICSM that he is worthy of the support he has been given.

His ICSM describes John as having a high level of engagement with the service and is very motivated to be off benefit at some stage in the future. However due to his mental health issues, numeracy and literacy challenges and limited work record, this may still be some time away.

Outcomes

John is gradually feeling more able to engage in the community. Since he first came onto the service, he sees his children more frequently and feels comfortable attending face-to-face meetings with this ICSM at her desk. He has now found confidence as a result of attending his course and is motivated by the prospect of one day being able to start a small business.

11.4 'Complex Journey'

These clients are still facing multiple, complex barriers to being off-benefit. Their lives are characterised by instability and frequent adverse events that hinder their progress. Their state of work-readiness tends to be dynamic.

Often these clients' lives are like a house of cards. You can build some great stuff, get some positives happening. But it only takes one thing and it will fall apart. (ICSM)

Composite Case Study

Background

Faith is in her early 30s and has had five children, two of whom have passed away and three are in the care of Oranga Tamariki (formerly CYFS). She has recently been diagnosed with Type 2 diabetes but has not been back to her GP to start treatment. Faith was herself raised in CYFS care and has no contact with her family. Faith has spent most of her life since leaving school on a benefit, with brief periods of part-time factory and cleaning work.

Faith now has a court case pending for driving-related offences and is currently disqualified from driving. She also has considerable debt to Work and Income and to finance companies. She is currently boarding in an environment that is unsuitable for her children, but has been given notice as the tenancy holder has been evicted.

Experience of the ICS Service

Faith came onto the ICS service two and a half years ago and has had a six-month break during this period when she was living out of the area. She meets with ICSM every three to four weeks. As she relies on public transport to attend meetings, any greater frequency would be financially unmanageable.

Faith feels that her ICSM has been encouraging and helps her to feel more positive about the future. She feels that her ICSM treats her like an individual and seems to understand her situation, which has helped her to open up and discuss her challenges and barriers to work. She strongly prefers being able to meet with her ICSM one-on-one, rather than having to attend group seminars, which she found boring and repetitive.

Faith admits that, in the past, she had frequently falsified information to case managers to 'tell them what they wanted to hear', and expedite meetings. However, she says that she is now able to be honest with her ICSM as she feels that she won't be judged if she has not completed tasks or activities that had been planned and agreed to. She also appreciates that her ICSM is willing to discuss the issues Faith is dealing with rather than solely focusing on finding employment as was the case with her previous case manager.

Her goals are to get her diabetes under control, find employment, secure stable housing, and get her children back in care. Faith likes having goals broken down into manageable steps, which she can work towards in between meetings. She finds having the goals broken down less daunting and enjoys the buzz she gets from achieving each task, no matter how small. Some of the tasks have had to be repeated multiple times due to the changing circumstances in her life, but her ICSM has reassured her that, despite it sometimes being slow, she is making progress in the right direction.

Faith's ICSM believes that, because of her family situation, potential criminal record, and lack of skills, Faith may never be employed; however, through improving her physical situation, reducing her debt, and giving her some life skills, her ICSM believes that Faith will be able to make a positive contribution to society and potentially be a good role model for her children.

The ICSM suggested Faith apply for *No Asset Procedures* to be able to move past her debt, which she agreed to, and together they are in the process of completing the paperwork. The ICSM has also helped Faith liaise with Housing New Zealand and she is now on the waiting list for suitable accommodation. Faith is not currently looking for work. Collaboratively, she and her ICSM have agreed that her focus in the short-term should be on improving her personal circumstances. They are also waiting for a decision to be made regarding Faith's driving offences. Faith broke down in tears when her ICSM told her that, if she goes to prison for her driving convictions, she may not be able to come back to the ICS immediately after she is released. Faith is concerned that the progress she has made so far – and perhaps more importantly, her motivation to improve her situation – will be lost if she returns to general case management.

Outcomes

Since being in the ICS service, Faith is now more likely to attend meetings at Work and Income. She feels more motivated to make positive changes in her life and believes that being able to move forward without the burden of debt will help her do that. She says that she now dwells on the past less, and looks to the future more.

The ICSM noted that full-time employment is likely to be some time off, if at all, for Faith, particularly if she is incarcerated for her driving offences. The ICSM is hopeful that once Faith secures suitable housing, she will be able to have her other children back in her care.

11.5 'Self-Imposed Barriers'

These clients are more work-ready than they recognise or choose to acknowledge. They describe barriers to being able to work or study which may be relatively easily overcome when they are ready to do so. They may lack pragmatism or self-belief, have unrealistic employment expectations and/or may just prefer not to work. They tend to be very knowledgeable about Work and Income and the benefit system.

Composite Case Study

Background

Sarah is in her early 30s and is a sole parent with two school aged children. Sarah has worked in the past in supervisory roles in retail and hospitality and has spent considerable time undertaking tertiary study. She has a diploma level qualification, although this is in an area of study for which there are few industry openings in the region where she lives. She has also partially completed a bachelor's degree. She is very keen to finish her degree but has no further student allowance eligibility.

Experience of the ICSM Service

Having the intense support from ICSM has made Sarah feel valued and she has finds that her ICSM is less demanding than Work Focussed Case Managers she has worked with, meaning that meetings are more positive and she is more likely to attend. She also likes the fact that she no longer has to attend seminars which she found unhelpful for the types of work she is looking for, and also slightly 'beneath her', given that she has tertiary qualifications.

Her ICSM noted that Sarah was more focussed on her past achievements than on setting realistic goals for progressing towards employment, and this was proving to be a barrier. Sarah's ICSM feels that she has become complacent and does not currently have sufficient motivation to be off the benefit. Sarah is also prone to using her caregiving responsibilities as an excuse for not being able to undertake a wide range of jobs. Her ICSM has found this frustrating, as she describes Sarah as being intelligent, articulate, well-presented and sees her as being work-ready.

Sarah is reluctant to take 'just any job' and feels that she is overqualified for most jobs that she sees advertised through Work and Income or that her ICSM suggests to her. Her ICSM perceives that Sarah may be too proud to work in a relatively low-paid job in her local community where she may be seen by family and friends. Sarah currently won't consider work outside of school hours as she feels she needs to be home when her children return from school. Her ICSM has discussed childcare subsidies with her and has promised to help put these in place for her should she find a job but Sarah is still reluctant to seriously consider full-time work.

Her ICSM believes that despite coming across as confident, she may be afraid of going back into the workforce after many years in study and on the benefit.

Sarah was referred to a budgeting service which she found beneficial, both to help her manage her bills in the short-term but also to allow her to save longer-term so she can complete her degree. Her ICSM also introduced her to a wide range of job-search channels to broaden the range of employment opportunities she was exposed to.

She has also been referred to a work broker, although this has not been successful in assisting her into employment as she has repeatedly missed appointments and is prone to making excuses as to why she will not apply for suggested jobs.

Outcomes

Sarah is now managing her finances better because of the advice she received from the budgeting service and is slowly repaying debt, which has alleviated some stress for her. She hopes to repay her debt soon and start saving to allow her to finish her degree.

The ICSM feels that Sarah is gradually coming around to the idea that she may need to re-enter the workforce in a role that may not be her ideal, but that she will have opportunities to progress from there.

Sarah has investigated OSCAR childcare subsidies and is now aware of her entitlements once she is in employment. She is working closely with the ICSM to develop a more generic CV which will be relevant to a range of employment opportunities.

11.6 'Disengaged'

A small group of clients in the research were much less engaged with the trial, this lack of engagement and commitment typically a result of the chaos of their lives (multiple challenges to deal with), and a lack of maturity in that they tend to lack the skills necessary to navigate challenges. These clients are likely to be Early Entrants. They lack structure and support in their lives and have experienced little or no positive role-modelling. They may be transient or have highly unstable living environments, and typically have substance abuse issues.

Comments made by ICSMs suggest that there may also be a group of disengaged clients who don't really need the financial support provided by Work and Income, whether this is because they have adequate family support or are living off the black-market economy.

Composite Case Study

Background

Sam is a male in his late-20s and has been on the ICS service for 18 months, having initially come onto the Independent Youth Benefit before transferring to Jobseeker Support. Sam has come from a highly dysfunctional home environment, with little structure or support. He has worked for brief periods but has not managed to sustain employment for more than a few months at a time.

Sam is a frequent drug user and has no housing stability, moving between friends' couches and sometimes sleeping rough. Sam has a criminal record and when he came onto the service, was under the Probation Service, completing a Community Service sentence, with repeated breaches, and had another court case pending.

Sam has no prior work training or school qualifications and has gang affiliation. In the past, when he has felt pressured by Work and Income to find work, he has disengaged completely, resulting in his benefit being suspended. In these situations, income has come from criminal activities.

Experience of ICS Service

Sam was wary of the ICS initially, but after a few meetings he found his ICSM to be approachable and more 'hands on' than previous case managers. He was pleasantly surprised that his ICSM seemed to care about his circumstances and how the ICSM could help him to improve them. He does not feel the same pressure to follow instructions from his ICSM or to engage in activities he is not interested in taking part in, which he did with previous case managers.

Sam came to the ICS with no form of identification and, with the help of his ICSM, obtained a birth certificate and photo ID.

Sam wanted to reduce his drug use and after some encouragement from his ICSM, agreed to attend a support service.

Goals set with his ICSM were to attend his drug and alcohol support service meetings and ICS appointments. Over the course of the ICS service, Sam has frequently missed appointments. However, he has gradually improved his communication and will now sometimes notify his ICSM by text rather than just not turning up.

ICSM noted that over the course of the ICS service, Sam has been speaking with more clarity, looking healthier, and there have been gradual improvements in his attitude and reliability. However, this tends to be inconsistent and he frequently drops in and out of engagement with the service when he feels that too much is required of him, which is a barrier to making increased progress towards employment.

The ICSM reports that Sam has a skill base in the industry he wants to work in, however the industry requires mandatory drug testing, and so illegal substance use could remain a barrier for some time. The ICSM has liaised with Sam's Probation Officer to ensure that appointment times do not clash with Community Service requirements.

Outcomes

The ICSM reports that Sam has made some progress, from barely talking when he first came onto the service to now engaging in some discussion 'if he is in the mood'. His ICSM believes that Sam has potential to be in employment at some stage in the future, however needs to overcome other significant life challenges such as finding safe, secure accommodation and being drug-free.

Sam now feels less pressured to find work and knows that he will not be sanctioned with benefit reduction or loss of benefit if he does comply with job seeking targets. This means that, while his benefit continues, he is less likely to commit crime.

12 Moving Forward to the ICS-X Trial

Overall, the ICS service is considered by ICSMs and clients to be working well and is effective in supporting clients towards a range of positive outcomes, including employment. However, several aspects were identified as potential areas for improvement or focus.

Group Sessions

The introduction of small group sessions was suggested by both ICSMs and clients. It is envisaged that ICS clients with similar characteristics and/or a similar stage in their stair-casing could meet (under the guidance and direction of the ICSM) to share experiences and learnings. This is considered a 'safe' transition to working in group situations among those who are anxious around people they don't know, would provide an opportunity to meet new people/develop support networks in a non-threatening environment, and also acquire 'hints and tips' in relation to job search techniques, useful courses etc.

Specialist Mental Health and Addiction Support

It was noted by ICSMs that significant proportions of clients on their caseloads have mental health issues (often undiagnosed), and/or substance dependency. A frustration can be the lack of appropriate support services to which ICSMs can refer clients to get help to address these issues. ICSMs note that, while they can help clients to identify and acknowledge the existence of these issues and guide them towards being motivated to address them, specialist support is required once the client is ready.

The ICSM Role

One ICSM noted that training for the ICSM role is critical, particularly around ways of interacting with clients in a supportive and encouraging way, so that a positive rapport can be built. Looking to the future, with the increased number of ICSMs who will be involved in the ICS-X, ensuring that all those who fulfil the roles have the appropriate balance between 'soft skills', organisational knowledge, and community networking ability will be important.

Client Selection

Although the client selection process for inclusion in the ICS service trial is data-driven, some ICSMs felt that there could be particular circumstances which make clients unsuitable for the service (for example, clients in the 'Disengaged' segment). A suggestion made by an ICSM was to have clients assessed for suitability prior to them being put onto the service. Similarly, ICSMs (and some clients) would like to see some flexibility to allow particular clients not initially selected for the service to be assessed for suitability for the trial (clients were often aware of family or friends who they felt could benefit from the more intensive and more holistic support provided by their ICSM).

Processing

Some ICSMs consider that having more discretion to process applications when they feel it will be in the client's best interest and will increase efficiency. This would streamline the process, minimising the time that a client needs to wait for a response on an application.

IA Trial Discretionary Fund Payments

One ICSM noted that having IA payments being paid directly to clients can cause difficulties in circumstances when the money gets redirected by the client to another purpose. It was suggested that there could be a process implemented whereby IA payments could be made directly to suppliers to avoid this occurring.

External Supervision

Some ICSMs felt strongly that periodic professional supervision should be a mandatory aspect of the ICSM role. In addition, it was suggested that supervision should be conducted by an external professional.

13 Conclusions

Qualitative findings collected for this 24-month evaluation of the Intensive Client Support trial indicate that it is effective in contributing to client outcomes of stair-casing, sustainable employment and benefit reduction. However, as with any social service intervention, the degree to which it is effective varies between individuals and is dependent on each client's unique set of circumstances, past experiences, challenges, and barriers to employment.

It appears that clients who have come onto the ICS trial and are close to being work-ready, both in terms of their skills, training and/or experience, and in terms of their attitude, outlook and personal wellbeing, are able to achieve an off-benefit outcome relatively quickly. For other clients, who come to the service with more entrenched, complex barriers, the ICS service is less likely to result in an off-benefit outcome in the short term. However, this is not to say that the service is less effective for these clients. Many clients for whom employment may be a long-term, rather than short or medium term, goal, achieve outcomes from engagement from the ICS service that provide an essential stable, sustainable foundation of health and wellbeing from which employment-related skills can be established. This means that, once they do become work ready, these clients are more likely to achieve more sustainable employment.

Given that client selection for the ICS trial is data driven and that those with less complex barriers are likely to move off the service and into employment sooner, it is likely that caseloads for ICSMs will become increasingly complex and challenging over time. The ICSM-client relationship underpins the success of the service and it is therefore critical that ICSMs selected for the role possess the necessary range of skills and personal attributes to be able to effectively meet the needs of this client group.

Appendices

ICSM Discussion Guide

Client Discussion Guide

Intensive Client Support (ICS) Trial Evaluation

ICSM Interview Guide

Introduction

- Introduce self, and Gravitas as independent research company
- Briefly discuss nature and purpose of research
- Explain researcher and participant roles
- Explain that there are no right or wrong answers – that we are just interested in their experiences, thoughts, opinions and ideas
- Confidentiality issues/anonymity – explain we have guaranteed confidentiality to clients, so cannot discuss what they have said
- Explanation and consent on use of digital recorder
- Answer participant questions

Involvement in the ICS

- How long have you been involved in the ICS Trial?
- What was your previous role?
- How did you feel about being involved in the trial? What appealed about the Trial? What concerns did you have?

Resolution of Process Issues Identified at 12 Month Evaluation

- What changes have been made to ICS practices over the second year of the trial? Probe: How have these impacted on your work? How have these impacted on clients? How have they impacted on the outputs of the Trial generally? [Note: some ICSMs may not be able to answer this as were not in the role in year one].
- How did ring-fencing of your workload occur in the second year of the Trial? Probe: for impact on work and on clients.
- What impact did an increased caseload ratio from 1:40 to 1:60 have on your work? For clients?
- Were there any other changes to ICS practice that occurred? Probe: for impact on work and impact on clients.

Working with Clients in General

I'm interested in the types of stair-casing activities that clients engage in.

- What does 'stair-casing' a client towards employment mean to you?
- Which stair-casing activities are the most common? Why? Who chooses them? Why? Which are the most successful? Why?
- Are there any other activities that you would have liked to have offered but didn't? Why these? What difference would these activities have made? For whom? Why were they not offered?
- Do you have any issues finding activities for your clients? Keeping them engaged in those activities? Do you use the tools the ICS provides such as the education and training components?
- Do the activities follow a pattern? Do they build on each other? Does this lead to employment?
- Which activities do you think are the most effective at helping clients move towards employment? Or facilitating a move to study or another off-benefit outcome?
- What difference do you think the trial is making to client outcomes? We're especially interested in how it has built their job seeking abilities: For each: What are the key interventions that have helped achieved these outcomes?
- - (a) Confidence and commitment
 - (b) Managing personal circumstances
 - (c) Realistic job goals and skill match
 - (d) Ability to look for the right jobs
 - (e) Presentation to employers
 - (f) Staying in the job
- What are the characteristics of those that engage more with the trial; engage less? Why do you think that is? Were there some clients that you couldn't get to engage with the service? What happened to them? What could be done to encourage better engagement?
- What differences (if any) are there in working with EE clients as compared with EB clients?
- When you're working with clients, what are the most common barriers you come across in terms of clients moving into employment? How do you manage these? What more could be done to help you/the client manage these?
- What strategies do you use to motivate clients? How did you use your skills? How do you handle relapses? How different is your approach to work you may have done with WFCM?
- Do you find you work with some clients more than others? Which clients? Why these?

Working with Particular ICS Clients

For this evaluation, we will be interviewing [insert names of clients]. I'm interested in your experience of working with these ICS clients and I will ask you a series of questions relating to each client.

For the following questions, could you please think about your experience of working with [insert name of client].

- When did you first start working with [insert name]?
- How did you first come into contact with them?
- What were your impressions of [insert name] when you first met them? How would you describe them?
- Were there any issues in getting him/her to participate in the ICS?
- Tell me about the process of working with him/her to identify their goals. What things did you consider when developing a plan?
- How motivated and engaged has he/she been in the ICS Trial?
- What impact has the ICS Trial had for him/her? What changes have you observed?
- In your view, what has made the most difference to this client?
- What outcomes has he/she achieved since being on the ICS Trial?
- Would you consider this client has been successful on the Trial? Why/why not? Do you think they would consider they have been successful? Why/why not? Where do you think they would have been now if they had not participated in the trial?
- What barriers to further progress toward goals/outcomes have you observed for?
- In hindsight, do you think they were an appropriate candidate for the Trial? Why/Why not?
- In hindsight, what, if anything, would you do differently with respect to moving this client through the trial?
- What else do you think could help to support them toward achieving goals/outcomes? Ideally, what else would you do, if you could?
- How typical are they of other clients you work with?

Reflection

- Thinking about the ICS trial overall, what do you think has been the most successful part of it?
- Are there any aspects of the ICS Trial that you think haven't really worked well?
- What type of client does intensive case management work best for? Why?
- The ICS is to be rolled out to the ICS-X. If you could change or add anything to improve this trial, what would you do?
- How are you feeling about moving into the ICS-X trial? What are you looking forward to? What do you anticipate the challenges will be?
- What lessons from the ICS Trial can be carried through to improve the ICS-X?

Finishing Up

- That's all the questions we have for you. Is there anything else you want to say that might help us understand how the trial is working?
- Just to remind you that your participation in this research project is confidential and anything that you have said today will be reported anonymously.

Intensive Client Support (ICS) Trial: Interim Outcome Evaluation

Client Interview Guide

Introduction

- Introduce self, and Gravitas as independent research company
- Briefly discuss nature and purpose of research
- Explain researcher and participant roles
- Explain that there are no right or wrong answers – that we are just interested in their experiences, thoughts, opinions and ideas
- Confidentiality issues/anonymity
- Explanation and consent on use of digital recorder
- Answer participant questions

Client Background

Firstly, I'd just like to understand your situation and what your journey has been so far.

- Tell me about your work and benefit history. Probe: How long have you been on (were you on) a benefit for? When did you first go on benefit? What type of benefit(s)? Have you worked in the past? For how long? What kinds of work have you done? What kinds of work do you look for? What about education?

Involvement in the ICS

This next part is about your involvement with the Intensive Client Support service.

- Tell me about the Intensive Client Support Service, or ICS service – what are the aims of the service? How is it different from how you have worked with previous case managers?
- How long have you been involved with the ICS?
Probe: for any time spent out of the trial and re-entries.
- Tell me about how you first heard about the ICS service?
Probe: Who talked to you about it? What did they tell you?
- What did you think about ICS when you first heard about it?
Probe: What did you like the sound of? What interested you about it? What did you not like the sound of? What concerns did you have? What questions did you have? What did you hope to achieve by joining in ICS?

- Tell me about your experience on the ICS. I am really interested in what happens, who you have contact with, what things you have to do – that sort of thing.
- ***If not covered in discussion above:*** What things have changed for you in your personal circumstances since you've been on the ICS Service Trial? e.g. your housing, caring responsibilities, transport, health?
Probe: In what ways have these changes affected your involvement in the ICS Trial?

Outcomes from the ICS

We're interested in what difference the ICS service has made to you.

- What difference has being on the ICS made to you?
 - In your employment prospects?
 - In your education or learning new skills?
 - Your personal life?
 - Your relationships with others e.g. family and friends?**Probe** for detail on each of these areas.
- Do you think being on the trial has prepared you for finding a job? If no, why not? If yes, how?
 - Your work expectations?
 - Setting realistic job goals?
 - Your job search confidence?
 - Looking for the right job?
 - Your in-work support plan?
- What things (about the ICS/that Work and Income have helped you with) have been useful? In what ways?

If not mentioned, check extent to which client job seeking and retention abilities are being built:

- How has being on the ICS trial affected your:
 - Self confidence
 - Commitment to looking for work
 - Your ability to manage your personal circumstances
 - Presenting yourself to employers
 - Staying in a job

- What has been most useful to you in moving closer to work?
- Where do you think you would be if you hadn't been on the ICS Trial?
Probe: goal setting, use of time, motivation, confidence, job searching, work readiness?

Experience of the ICS

Now I'd like to ask you about your experiences of the ICS. **Probe for those aspects of experience not discussed in Point 6 above.**

- What types of contact do you have with your Case Manager?
Probe: Ask about use of all channels available – and reasons for non-use of some (face to face; phone; text; email). Frequency of contact? Reasons for contact? Preferred mode of contact? Preferred location of contact? Is contact sufficient/too much?
- What usually happens at meetings with your Case Manager?
Probe: Is this useful? What else they would you like to occur? What could your Case Manager could do differently?
- Have you made a plan with your Case Manager to set goals?
Probe: Tell me about your goals. Talk me through the process of how you came up with these goals. How did you feel about these goals when they were first set? How do you feel about them now?
[If no plan yet] What are you hoping to do or looking forward to doing?
- Have these goals changed since you started the ICS trial?
Probe: How goals have changed? Why did they change?
- Can you talk me through the activities that you have undertaken to work toward [insert goal/s]?
What was the first activity....?

Probe for each activity: What was this? Where did you do this? Who was this done with? How long did you undertake this activity for? How did you feel doing this? What impact did it have/is it having? Has it helped you to achieve your goal/s? Why/why not? What more could have been done/how could things have been done differently to help you achieve this goal.

Continue asking about subsequent activities undertaken and probe for details for each goal identified.

- Are there any activities that you would have liked to do, but haven't been able to?
Probe for details: Why have you not been able to do this? What difference would it have made?
- What other services or changes to current services for clients would you like to have available?
What difference would this/these make?
- What could be done differently to help client achieve their goals?
- How have you felt being on the ICS?
- What do you think is good about the Intensive Client Support Service compared to the normal type of support you would receive when on the Jobseeker benefit?
- What are the not so good things?
- Which type of approach do you prefer? Why?
- What are you most proud of having done on the ICS trial?
- What do you still want to do while you're on the ICS trial?
- If you could go back in time and had the choice to join the trial, would you?
Probe: Why/why not? If yes, what would you do differently this time? What difference would this make?
- Would you recommend the ICS service to other people like you? **If yes**, what would you say to them? **If not**, why not?
- And if you could change anything about the ICS, what would it be? What difference would this make?

Finishing Up

- That's all the questions we have for you. Is there anything else you would like to tell me about your experience of the ICS?
- Just to remind you that your participation in this research project is confidential and anything that you have said today will be reported anonymously.

- Would you be willing to re-interviewed in about a year's time to check back to see if things have changed for you? RECORD ANSWER.
- Thank you for the time and effort that you have given to this interview. If you have any concerns or queries about this interview please don't hesitate to contact us.
- *Give Koha and obtain signature on consent form.*