



**Australian Government**  

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**Department of Social Services**

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**Operational Guidelines**  
**Individual Placement and Support Program**  
**September 2021**

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## Preface

The Australian Government Department of Social Services (the department) has a suite of Program Guidelines, which provide information about each Program that provides grants funding, and the Activities that contribute to that Program. They provide the key starting point for parties considering whether to participate in a Program and form the basis for the business relationship between the department and the grant recipient.

These Operational Guidelines are to assist organisations delivering services under the Australian Government Individual Placement and Support (IPS) program within the Disability and Carer Support component of Disability, Mental Health and Carers. This document and the Grant Agreement form the basis of the business relationship between the department and service providers.

The Operational Guidelines include:

- the purpose of the IPS program
- the role and expectations of IPS program providers (IPS providers)
- information pertinent to the successful delivery of the IPS program

The Operational Guidelines are a living document. As additional issues arise and policy clarifications are developed, updates will be made to these Operational Guidelines.

The department reserves the right to amend the Operational Guidelines, by whatever means it may determine in its absolute discretion and will provide reasonable notice of these amendments.

The Operational Guidelines should be read in conjunction with the:

- Grant Agreement (including Schedule 1)
- Grant Opportunity Guidelines
- Data Exchange Protocols (for Commonwealth Agencies with program guidance)

It is the responsibility of each IPS provider to ensure they are familiar with the content and requirements of these Operational Guidelines.

### Further Information about the IPS program

The Funding Arrangement Managers are the first point of call for contact with the department. They will provide assistance with queries relating to the administration of grant agreements, delivery of services, data and reporting, or any new issues that arise under these Operational Guidelines.

If you do not know the contact details for your Funding Agreement Manager—please contact the Community Grants Hub:

- via telephone on 1800 020 283 (option 1)
- via email to **support@communitygrants.gov.au**.

## Contents

1.	Individual Placement and Support (IPS) Program .....	4
1.1	Objectives of the IPS program .....	4
1.2	Overview of the IPS program .....	4
1.3	IPS Practice Principles .....	4
1.4	Access to the IPS program .....	5
1.5	Working co-operatively with the IPS program partners .....	5
2.	Service Delivery .....	6
2.1	IPS program services to be delivered .....	6
2.2	Cultural Competency .....	7
2.3	IPS Vocational Specialists .....	8
2.4	Fidelity .....	8
2.5	Caseloads, duration and intensity of support .....	9
2.6	Links and working with other agencies and services .....	9
2.7	Evaluation .....	10
2.8	Compliance with Relevant Legislation .....	10
2.9	Service development and improvement .....	10
2.10	Confidentiality and Privacy .....	10
2.11	Consent .....	11
2.12	What participants can expect .....	11
2.13	Incident notification.....	12
3.	Handling Complaints.....	14
3.1	Complaints about the IPS provider .....	14
3.2	Complaints about the Department .....	15
4.	Funding for the Activity .....	15
4.1	Eligible grant activities .....	15
4.2	Ineligible grant activities .....	16
4.3	Service agreements for brokering / subcontracting services .....	17
4.4	Financial Reporting .....	17
5.	Communication and Promotion .....	18
6.	Performance and Reporting .....	18
6.1	Data Exchange (DEX) reporting .....	18
6.2	Quality checks.....	19
6.3	Access to the Data Exchange .....	19
7.	Document versions .....	20

8. Glossary.....21  
Attachment A – Incident Notification Form.....23  
Attachment B – Data Exchange information .....25

# 1. Individual Placement and Support (IPS) Program

## 1.1 Objectives of the IPS program

The objective of the IPS program is to improve the employment and vocational education outcomes of young people with mental illness up to the age of 25, who are at risk of disengaging from employment or education and who are at risk of long-term welfare dependency.

The IPS program aims to:

- Deliver the IPS model of vocational assistance to young people with mental illness up to the age of 25 within the IPS program sites to assist young people to achieve and maintain sustainable participation in competitive employment or vocational education.
- Provide specialist vocational assistance that adheres to the eight core [IPS Practice Principles](#).

All IPS program sites are located in headspace centres. headspace provides mental health support services to young people aged 12 to 25 years, who are experiencing, or at risk, of mental ill-health.

## 1.2 Overview of the IPS program

The IPS program uses an evidence-based model and integrates employment and vocational support with clinical mental health and non-vocational support. It focuses on individual needs of people with mental illness who are seeking to remain in education and/or employment.

Under the IPS program, vocational specialists are fully integrated into 50 headspace centres across Australia. Career development advice and vocational assistance is provided in tandem with clinical support and non-vocational assistance to young people with mental illness who are seeking to enter, or remain in, employment and/or education.

The IPS program adheres to the fidelity scale and is independently reviewed by a qualified fidelity reviewer.

## 1.3 IPS Practice Principles

All IPS services must subscribe to a set of Practice Principles that underpin delivery of support to participants. IPS is a highly defined form of supported employment and has eight core Practice Principles:

1. **Focus on Competitive Employment:** IPS services are committed to competitive employment as an attainable goal for participants with mental illness seeking employment.
2. **Eligibility Based on Participants Choice:** Participants are not excluded from the IPS service on the basis of readiness, diagnoses, symptoms, substance use history, psychiatric hospitalisations, level of disability, or legal system involvement.
3. **Integration of Rehabilitation and Mental Health Services:** The IPS model is based on a close integration of mental health treatment teams, including clinical care.
4. **Attention to Participant Preferences:** Services are based on participants' preferences and choices, rather than headspaces' judgements.

5. **Personalised Benefits Counselling:** Vocational specialists help participants obtain personalised, understandable, and accurate information about their government entitlements. (Fear of losing benefits is a major barrier to employment).
6. **Rapid Job Search:** The IPS model is based on a rapid job search approach to help participants obtain jobs directly, rather than providing lengthy pre-employment assessment, training, and counselling.
7. **Systematic Job Development:** Vocational specialists build an employer network based on participants' interests, developing relationships and partnerships with local employers.
8. **Time-Unlimited and Individualised Support:** Follow-along supports are individualised and are continued for as long as the participant wants and needs the support

#### **1.4 Access to the IPS program**

A young person can access the IPS program when they are a client of headspace and referred by the headspace clinical staff to the IPS program.

To be eligible to participate in the IPS program, people must:

- be a young person with mental illness aged up to 25
- be an eligible client of headspace in the participating headspace centre
- have employment, education or training goals and be facing barriers to achieving these goals
- be willing to participate in the service and able to make an informed decision to participate.

**\*Note:** A formal diagnosis of mental illness is not required to participate in the IPS program. The clinical staff of the headspace centre can determine that a young person has a mental illness.

#### **1.5 Working co-operatively with the IPS program partners**

The IPS program partners are made up of organisations funded by the department to support the IPS program and contribute to the IPS program objective. IPS providers must work co-operatively, including engaging in collaborative events with the IPS program partners.

The IPS program partners are:

- IPS Fidelity Review provider (fidelity reviewer)
- IPS Program Management provider (program manager)
- IPS Workforce Development provider

Other organisations that may support the IPS program include reviewers and/or evaluators. These organisations may be engaged by the department from time to time.

#### **IPS Fidelity Review provider (fidelity reviewer)**

The fidelity reviewer is responsible for ensuring the quality and compliance to the IPS Practice Principles by IPS providers by monitoring and regularly assessing all IPS program sites against the Fidelity Scale. They provide ongoing training and support to the IPS providers on matters related to fidelity and how to improve services, and can be contacted for fidelity-related issues.

The fidelity reviewer will monitor IPS providers at least once every four to six months to ensure the fidelity of the IPS services being delivered.

The department has engaged the Western Australian Association for Mental Health (WAAMH) as the fidelity reviewer. IPS Works is a dedicated unit within WAAMH that undertakes fidelity reviews.

### **IPS Program Management (program manager)**

The program manager is responsible for improving the performance of IPS providers, and therefore the outcomes for IPS participants, by delivering program management services. Their role includes ensuring a consistent and quality IPS program delivery across sites.

headspace National has been engaged by the department as the program manager.

The program manager role includes:

- assisting IPS providers with issues/problem solving they may be experiencing whilst implementing the IPS program
- bringing the IPS program partners and IPS providers together to share ideas, best practice, and challenges through meetings and online networks
- assisting IPS providers with the data collection for reporting to the department
- providing reports to the department on the IPS providers' behalf and on the program nationally
- facilitating and implementing program service improvements across the network.

### **Workforce Development provider**

The Workforce Development provider role is responsible for developing and implementing a framework for a workforce development program, with the aim of building the necessary workforce for IPS providers in a competitive market environment.

The department has engaged Orygen as the Workforce Development provider.

## **2. Service Delivery**

### **2.1 IPS program services to be delivered**

The role of the IPS providers is to contribute to the objective of the IPS program by providing specialist vocational assistance, that adheres to the IPS principles, to young people with mental illness in headspace centres.

IPS providers will develop a model of service delivery operating according to the following:

- [IPS Practice Principles](#)
- Principles outlined in National Standards for Mental Health Services 2010 (available at [www.health.gov.au](http://www.health.gov.au))
- Principles outlined in National Practice Standards for the Mental Health Workforce 2013 (available at [www.health.gov.au](http://www.health.gov.au))
- **Accessibility and responsiveness** – services are accessible to individuals according to their needs, are provided in ways that reduce the stigma of mental illness, and are responsive to individual circumstances.



- **Cultural Competency** – IPS providers have ability to interact effectively with people across different cultures (see [Cultural Competency](#) section).

Participants will be given specialist vocational assistance to obtain employment or training/education outcomes, including:

- job coaching, application assistance, interview techniques
- assistance to navigate mental health and community support services
- assistance to use services and Centrelink systems, including accompanying participants and advocating for them at appointments and assessments.

The vocational specialist will work closely with each participant's existing clinical support team to:

- coordinate services to ensure roles are complementary and not duplicated
- ensure the clinical team is aware of the participant's goals and plans
- gather clinical input for the participant's employment or education/training plan
- make appropriate referrals.

Vocational specialists will liaise with employers and education/training providers to:

- create real opportunities that align with the participant's goals
- provide on the job support to assist the participant to maintain their placement
- provide support to employers and educators/trainers and participants if circumstances change, such as if the person has an episode of their mental illness.

## 2.2 Cultural Competency

Cultural competence is the ability to interact effectively with people across different cultures. It has four main components:

- being aware of one's own cultural worldview (one's own assumptions and biases that could affect decision making and actions)
- having a positive, respectful and accepting attitude towards cultural differences
- having knowledge of different cultural practices and world views
- having good cross-cultural communication skills.

A person who is culturally competent can communicate sensitively and effectively with people who have different languages, cultures, religions, genders, ethnicities, disabilities, socio-economic backgrounds, ages and sexualities. Culturally competent staff strive to provide services that are consistent with a person's needs and values.

IPS providers need to ensure that:

- cultural competence is embedded in their philosophy, mission statement, policies and the key objectives of IPS program sites
- they have a strong understanding of the cultural profile of their area and where possible, culturally and linguistically appropriate team members are employed
- cultural competence resources are readily available to IPS program employees in the workplace

- IPS program employees are encouraged to be flexible in their approach and seek information on specific cultural behaviours or understandings
- IPS program employees receive appropriate training for cultural competence

In delivering culturally competent services, IPS providers should:

- Seek to identify and understand the needs of specific special needs groups within the site.
- Investigate, understand and take into account a participant's beliefs, practices or other culture-related factors in designing services.
- Be respectful of a participant's cultural beliefs and values at all times.
- Ensure that the work environment and practices are culturally inviting and helpful.
- Ensure that services are flexible and adapted to take account of the needs of specific special needs groups and individual participants.
- Provide access to culturally specific training and supports to improve team understanding of the local community groups and effective communication methods.
- Regularly monitor and evaluate cultural competence of the service and staff (including obtaining input from participants and the community).
- Use information and data about specific special needs groups to inform planning, policy development, service delivery, operations, and implementation of services.

### **2.3 IPS Vocational Specialists**

IPS providers are required to engage suitably qualified vocational specialists to provide IPS vocational services to young people with mental illness in the IPS program sites. This activity will be undertaken in tandem with delivery of clinical mental health and non-vocational assistance by other staff employed by the headspace centre.

Vocational specialists will be professionals who are experienced in helping participants find and keep competitive employment, consistent with their capabilities, interests and vocational goals. Vocational specialists will have experience in managing caseloads of people with mental illness, particularly in liaising with clinical treatment teams, families and employers to achieve positive outcomes for participants.

At least two full-time equivalent vocational specialists must be engaged at each IPS program site, unless otherwise agreed by the department.

Vocational assistance delivered under the IPS program in each headspace centre must be provided in addition to, and not replace, existing vocational or educational assistance already being provided at that site through other funding arrangements.

### **2.4 Fidelity**

Fidelity is used to measure the quality of IPS program services. It has shown that services with higher fidelity scores produce better outcomes in terms of competitive employment.

An approved Fidelity instrument is used to monitor IPS providers. Adherence to the IPS model is measured using the 25-item ANZ Supported Employment Fidelity Scale, adapted by Waghorn & Lintott (2011).

The Fidelity instrument incorporates quality measurements in a range of areas and includes assessments of staffing profile, caseloads, number of and structure of the employment specialists within the organisation, time spent providing ongoing support, and the extent of service integration.

IPS providers must engage with the fidelity review process.

## **2.5 Caseloads, duration and intensity of support**

The approach to caseloads, service duration and intensity of support must be consistent with the eight core [IPS Practice Principles](#) and Fidelity. While there is a high level of flexibility, IPS is premised on the provision of *individualised* assistance tailored to each participant's preferences, choices and goals.

To meet the intent of the IPS program, vocational specialists should have relatively small caseloads—20 per vocational specialist at any one time is considered the benchmark in the Fidelity instrument. The caseload structure should facilitate the maintenance of high quality service delivery aligned with the intent of the IPS program. Participants should be able to identify their vocational specialist worker.

Another key IPS practice principle is the provision of time-unlimited support. The department expects that a flexible and sophisticated approach will be taken that accounts for the differing levels of support young people will require:

- Some participants will need an assurance of ongoing support for the foreseeable future.
- Some participants will need a safety net in times of crisis.
- Some participants will move on from the IPS program and require no ongoing support.

## **2.6 Links and working with other agencies and services**

To achieve the best outcomes for participants, support services should complement and intersect with other services in the local area, including clinical and non-clinical mental health services, community services, other employment services and employers. This approach is designed to build on existing arrangements and ensure services are coordinated to provide holistic and flexible support.

Services are expected to form partnerships and establish formal links with a range of local networks, services and other stakeholders, which may include:

- developing referral processes and managing referrals to other services, including to housing support, employment and education, drug and alcohol rehabilitation, financial services, independent living skills courses, clinical services and other mental health and allied health services
- participating in inter-agency meetings and other forums to ensure local service delivery and case coordination is well coordinated.

Where participants are already receiving assistance from employment service providers, including Disability Employment Services (DES) or *jobactive*, the IPS provider is expected to negotiate formal parallel servicing arrangements.

These could take the form of memoranda of understanding or an exchange of letters. As a minimum, the following should be included:

- roles and responsibilities of each party

- how the arrangements will operate, including the process for managing referrals
- how respective participant employment plans will be negotiated and jointly managed.

It is not acceptable for an IPS provider to only have *internal* parallel servicing arrangements in place (for example, where IPS provider is also delivering an employment service such as jobactive or DES). Participants must be allowed to have a choice in service delivery, particularly where they are being referred to an employment provider.

## **2.7 Evaluation**

Providers are required to actively participate in evaluations of the IPS program, which may include providing data and information on its effectiveness, efficiency and outcomes.

## **2.8 Compliance with Relevant Legislation**

IPS providers are required to deliver services in accordance with relevant legislation and industry standards, including relevant legislation regarding police checks for staff working with children and vulnerable persons.

IPS providers should be aware of any case-based law that may apply or has an effect on their service delivery. They must ensure that the services meet health and safety requirements and all licence, certification and/or registration requirements in the area in which they are providing services.

## **2.9 Service development and improvement**

Providers must regularly review and revise their service delivery practices to meet the needs of participants and ensure that:

- participants are aware of the procedure for complaints handling
- participants are encouraged to raise, and have resolved without fear of retribution, any issues, dissatisfaction, complaints or disputes they may have about the headspace site or the service they receive
- complaints and feedback are taken seriously by IPS provider, and are investigated, addressed and used to improve ongoing services.

More information about complaints can be found in [Section 3](#).

All IPS providers must:

- have quality management and financial systems in place to ensure standards of service and optimal outcomes for participants are met
- foster a flexible and learning culture to ensure improved outcomes for participants;
- understand the community and environment they service
- identify and address any issues and risks that might impact on service delivery
- have mechanisms in place to plan future service delivery and set objectives or goals to improve service delivery
- have strong and effective leadership to provide strategic direction, uphold, and exemplify the IPS values and standards.

## **2.10 Confidentiality and Privacy**

IPS providers will have access to personal and sensitive information. Personal information should only be shared with other support services with the written consent of participants, and should be kept safe and secure from access by others.

It is critical that IPS providers understand and adhere to privacy and confidentiality obligations. The department expects IPS providers to meet their obligations under the *Privacy Act 1988* and any other relevant state or territory privacy legislation.

Each participant's right to privacy, dignity and confidentiality in all aspects of life is recognised and respected.

The participant can expect that their headspace site:

- complies with the *Privacy Act 1988* in order to protect and respect the rights of individual service recipients
- only collects necessary information and uses it for the purpose for which it was collected. Information is only released with the written consent of the participant
- promotes tolerance and respect for each participant's personal needs and circumstances
- ensures the protection of information and data from unauthorised access or revision, so that the information or data is not compromised through corruption or falsification
- stores information and records in a secure place and disposes of them in an appropriate manner.

## **2.11 Consent**

IPS providers are required to gain written consent from each participant (or their parent or a responsible adult if under 18 years old) for the collection of personal and/or sensitive information, and for the disclosure of this information, including (as a minimum):

- de-identified participant data/information to their organisation
- the release of de-identified participant data/information to the department, and other organisations appointed by the department, for the purposes of monitoring, reporting, research, and evaluation of the IPS program
- the release of participant data/information to other organisations (if relevant).

## **2.12 What participants can expect**

Participants can expect to receive individually tailored and specialist vocational and employment support delivered in tandem with the existing clinical mental health treatment and personal (non-vocational) support provided at the participating IPS program site.

The IPS model of vocational assistance is a highly defined form of employment support with eight core [IPS Practice Principles](#).

Participants in the IPS program can expect to work in a collaborative and goal-oriented partnership with a vocational specialist, trained in the delivery of the IPS model. To achieve this, the IPS vocational specialists will:

- adhere to the principles of IPS when providing vocational support to participants
- assist the participant to identify their educational and employment goals
- develop a career profile and individual employment plan for each participant, with input from the participant and the participant's clinical team

- have formal procedures in place to work with the participant's clinical team
- conduct regular job development and job search activities with the participant
- assist the participant to apply for jobs and contact employers
- liaise with the participant's Disability Employment Services (DES) or jobactive provider, where applicable. This includes assisting participants to meet mutual obligation requirements
- develop a broad range of employer contacts to ensure there are job vacancies for IPS participants, and provide employers appropriate education and support.

Participants can expect respect, trust and understanding - each participant will be supported to feel welcome, valued and treated with respect, dignity and understanding as a unique person.

To achieve this, headspace will:

- have knowledge and understanding of mental illness and the impacts it has on people's behaviours and lives
- engage professional vocational specialists who are able to build meaningful relationships with participants based on openness and trust
- take all practical and appropriate steps to prevent abuse and neglect of participants and to uphold participant legal and human rights.

### **Fees**

Vocational and employment related assistance provided under the IPS program will be provided free of any charge for participants and employers in the IPS program.

### **Participant's rights and responsibilities**

Services are to be delivered in accordance with the National Standards for Mental Health Services 2010, applying to all mental health services, including government, non-government and private sectors across Australia.

**Rights:** Standard 6 of the National Standards for Mental Health Services 2010 lists rights applying to consumers of mental health services. They include that participants must:

- be treated with respect
- have their privacy protected
- receive services appropriate to their needs in a safe and healthy environment.

**Responsibilities:** Participants have a responsibility to provide accurate information about their needs and circumstances so they can receive quality services, and are required to comply with the rules and regulations for engaging with services and behave in a manner that does not compromise the health and safety or privacy of others.

### **Exiting a service**

Participation is voluntary and participants may exit the service when they choose or as agreed with the IPS provider. Exiting participants may be asked to provide information on the reasons for exiting the service.

## **2.13 Incident notification**

Providers must comply with relevant Commonwealth and state and territory laws if there is an incident in relation to delivering the IPS program.

Incident reporting can also contribute to service improvement through analysis of incidents to inform the implementation of preventative measures and responses to adverse events.

### **Reportable incident notification**

A reportable incident includes:

- the death of a client (regardless of cause)
- serious injury of a client
- abuse or neglect of a client
- unlawful sexual or physical contact with, or assault of, a client
- sexual misconduct committed against, or in the presence of, a client, including grooming of the person for sexual activity
- the use of a restrictive practice in relation to a client, other than where the use is in accordance with an authorisation (however described) of a State or Territory in relation to the person.

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IPS providers must notify their Funding Arrangement Manager of any reportable incident within 24 hours of personnel becoming aware of a reportable incident or allegation, using the Incident Notification Form at [Attachment A](#).  
Updates should be provided within five days.  
Information supplied to the department should be de-identified.

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### **Serious incident notification**

A serious incident is an event that disrupts service provision or threatens the safety of people or property. Examples of serious incidents include:

- incidents involving fraud (including allegations) or misuse of IPS funding
- incidents of alleged physical or sexual assault of a client committed by an employee
- incidents of alleged physical or sexual assault of a client committed by another client while in the care of the provider
- death, injury or abuse of staff/volunteers undertaking delivery of IPS
- significant damage to, or destruction of property impacting service delivery
- adverse community reaction to IPS activities
- negative media coverage that may adversely impact the delivery of services to participants or the reputation of the department.

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IPS providers must notify their Funding Arrangement Manager of any serious incident, particularly where they affect services to clients or a client's wellbeing, within 72 hours of personnel becoming aware of a serious incident, using the Incident Notification Form at [Attachment A](#).  
Updates should be provided within five days.  
Information supplied to the department should be de-identified.

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### **3. Handling Complaints**

#### **3.1 Complaints about the IPS provider**

Complaints, queries and feedback are considered a valuable opportunity for IPS providers and the department to review and improve processes and the quality of services provided.

A complaint is defined as: "Any expression of dissatisfaction with a product or service offered or provided".

Complaints are to be treated professionally and in a positive, timely and fair way. In the first instance, complaints (from participants or others) should be directed to the IPS provider. The IPS provider should attempt to resolve the complaint amicably in accordance with their internal complaints resolution process and policies.

IPS providers must have an Internal Complaints Procedure (ICP) in place, and participants must be made aware of the avenues available to them to make a complaint, such as, in person, in writing, over the phone, and via email.

The ICP should respect the participant's confidentiality in order for issues to be raised in a constructive and safe way without any fear of their issues affecting the support or assistance they receive.

A formal register of complaints should be maintained, and include the following information as a minimum:

- the complaint received, including the nature of the complaint and actions taken to resolve the participant's issues and concerns
- how the complaint was resolved, including whether it was referred to another authority.

Providers must provide the register to department, if requested.

IPS providers should handle most complaints in the first instance; however, particular complaints will require an external referral. These may be complaints of a serious or sensitive nature that cannot be handled by the IPS provider, or where a satisfactory resolution is not reached through the organisation's internal complaints system. For example, allegations of assault or abuse and neglect should be referred to police.

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IPS providers must immediately notify their Funding Arrangement Manager about serious complaints, that is, those related to serious harm or misconduct, or serious injury to a client, and keep their Funding Arrangement Manager informed of developments.

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### **3.2 Complaints about the Department**

Where there is a complaint about the department made to an IPS provider, the person should be directed to contact the department's Feedback Coordination Team.

Any member of the public who is dissatisfied with the department or the service of a department funded provider can make a complaint. The Feedback Coordination Team handles complaints about:

- unreasonable delay
- inadequate service, explanation or reasons
- legal error
- factual error in decision making process
- human error
- procedural deficiency
- unprofessional behaviour by an officer
- breach of duty/misconduct by an officer
- discriminatory action or decision
- flawed administrative process
- inadequate knowledge/training of staff.

As the purpose of the system is to assist in improving the department's processes, the system does not handle complaints about government policy, legislation, reviews over eligibility for a benefit or entitlement, ministerial correspondence, Freedom of Information requests, or complaints made to service providers (as these will be covered by their own complaints mechanisms required under the Grant Agreement).

Complaints can be lodged with the department through the following mechanisms:

Phone: 1800 634 035  
Email: [complaints@dss.gov.au](mailto:complaints@dss.gov.au)  
Post: DSS Feedback, PO Box 9820, Canberra, ACT, 2601

If participants or providers are dissatisfied at any time with the department's handling of their complaint, they can also contact the Commonwealth Ombudsman at [www.ombudsman.gov.au](http://www.ombudsman.gov.au)

## **4. Funding for the Activity**

### **4.1 Eligible grant activities**

Funding must only be used for the purposes for which it was provided. Funding provided under the IPS program may be used for:

- staff salaries and on-costs, which can be directly attributed to the provision of the IPS program in the identified IPS program sites as per the Grant Agreement
- employee training for paid and unpaid staff, and Committee and Board members that is relevant, appropriate and in line with the delivery of the IPS program

- engaging people or organisations with relevant expertise to ensure organisational capacity to deliver services (that is, measurement of fidelity, research and evaluation, as appropriate)
- operating and administration expenses directly related to the delivery of services such as:
  - materials and equipment directly relating to service delivery
  - marketing of services, including electronic promotion of services
  - telephones
  - rent and outgoings
  - computer/IT/website/software
  - insurance
  - utilities
  - postage
  - stationery and printing
  - accounting and auditing
  - travel/accommodation costs
  - assets as defined in Grant Agreement Terms and Conditions that can be reasonably attributed to meeting agreement deliverables.

The Grant Agreement Terms and Conditions outline how funds must be spent, acquitted and repaid (if necessary).

#### **4.2 Ineligible grant activities**

The grant funding may not be used for:

- the purchase of land
- costs that are not directly related to the provision of the IPS program
- purchase of goods and services for participants, for example, paying participants medical bills or accommodation costs
- major construction/capital works
- funding to cover retrospective costs
- costs incurred in the preparation of a funding application or related documentation
- overseas travel
- activities for which other Commonwealth, state, territory or local government bodies have primary responsibility.

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IPS providers should contact their Funding Arrangement Manager if they are unsure whether an expense is eligible or ineligible.

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### 4.3 Service agreements for brokering / subcontracting services

The department considers any parts of the activity not directly delivered by the grant recipient and are instead delivered by a third party, pursuant to an agreement between the grant recipient and the third party, to be subcontracting. Examples of agreements between the grant recipient and the third party which the department considers to be subcontracts include:

- operating as a consortium
- brokerage arrangements
- fee for service arrangements
- memoranda of understanding

The provider using the services of a subcontractor must ensure that all services delivered by the subcontractor are in line with the Grant Agreement, these Guidelines and prescribed on the provider's approved fee schedule.

In line with the Grant Agreement, the department must provide prior written consent before a provider enters into any subcontracting arrangement, and the department may impose any conditions it considers reasonable and appropriate when giving consent. The department may request a copy of the agreement between the provider and the subcontractor.

Reporting requirements for subcontracted services is the responsibility of the provider that the department has the Grant Agreement with, unless otherwise agreed by the department.

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IPS providers must seek prior written consent from the department before entering into any subcontracting arrangement by contacting their Funding Arrangement Manager. IPS providers should provide the details of the subcontractor, as well as what services the subcontractor will be providing. Details include:

- legal name of the organisation or individual, and any trading names
- Australian Business Number (ABN)
- full name of the head of the organisation
- address
- contact details
- schedule of fees

IPS providers must also notify their Funding Arrangement Manager if subcontracting arrangements change.

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### 4.4 Financial Reporting

Providers must ensure the efficient and effective use of public monies, and this will be consistent with the grant agreement, and will aim to maintain viable services and act to prevent fraud upon the Commonwealth.

Financial acquittal documents must be provided to the department as outlined in the grant agreement.

## 5. Communication and Promotion

IPS providers are free to name or brand IPS program in such a way that it is relevant and welcoming for young people in their local area and consistent with branding used for the host service. A description of the IPS program should be included on the IPS provider's website.

The following wording should be used to acknowledge the financial support of the department in all IPS program material published by providers (where space permits):

*Funded by the Australian Government Department of Social Services.*

## 6. Performance and Reporting

IPS providers must meet their data collection and reporting obligations as outlined in their Grant Agreement, including the submission of reports. IPS providers must have information technology systems in place to allow them to meet their data collection and reporting obligations outlined in their grant conditions.

IPS providers must inform their Funding Arrangement Manager of any reporting delays as soon as they become aware of them.

### 6.1 Data Exchange (DEX) reporting

IPS providers are expected to use the headspace National system, hAPI, to collect participant data for the IPS program. headspace National, the program manager, intends to provide the data required via a system-to-system transfer, on behalf of all IPS providers, to the department's Data Exchange.

System to system transfers and bulk file upload of data into DEX are approved mechanisms outlined in the Data Exchange Protocols. By entering the required data into hAPI, IPS providers will be meeting their reporting obligations under the agreement.

The information collected in the hAPI system is equivalent to the participant level data and service delivery information from all participants in accordance with the Data Exchange Protocols available at [dex.dss.gov.au](http://dex.dss.gov.au).

### Partnership Approach

Participation in the 'partnership approach' under the Data Exchange is a requirement of funding. By participating, IPS providers agree to provide some additional information in exchange for the receipt of regular and relevant reports.

IPS providers are encouraged to collect the Standard Client/Community Outcome Reporting (SCORE) information for as many participants as practical, noting that IPS providers must take into consideration the vulnerability of participants when gathering the information used for SCORE, including whether gathering the information will cause harm to the participant.

The priority for gathering the data is to get an accurate reflection of where the person is at, which may include a negative or no progress outcome. Due to the nature of mental illness and the journey of individuals, the department recognises that this does not necessarily mean failure of the services.

The Data Exchange has two standardised six monthly performance reporting periods each year, which run from 1 July to 31 December and from 1 January to 30 June, with a 30-day close off period after each of these. No further changes can be made to the data once the close-off period is completed.

Further information on training and resources available about the Data Exchange is included at [Attachment B](#).

## **6.2 Quality checks**

IPS providers are expected to undertake checks to ensure the accuracy of the data collected, and to troubleshoot any discrepancies or inconsistencies with the data, such as:

- looking at missing information, for example looking at nil, zero or unknown entries where there should be data
- looking at the minimum and maximum values of the data to find out if values are within the correct range
- checking to see that fields add up to the totals indicated
- reviewing comparative data, for example, previous months, to ascertain if the amount exceeds or falls short of expectations.

## **6.3 Access to the Data Exchange**

IPS providers should ensure appropriate personnel have a Data Exchange user account. This is required to access the Data Exchange.

Before requesting a Data Exchange user account, your organisation must be registered with Relationship Authorisation Manager (RAM), and individuals (the appropriate personnel) must have a myGovID account.

- Instructions for registering organisations with RAM can be found at the Relationship Authorisation Manager website (see details below) and include:
  - o Getting your digital identity
  - o Setting up your business
  - o Authorising others to act online for your business
- Instructions for setting up a myGovID account can be found on the myGovID website.
  - o Once individuals have a myGovID account, they can fill in the Data Exchange System User Access Request Form at the Data Exchange website, submit the form to their manager for approval, then submit it to the Data Exchange for processing (remember, organisations must be registered with RAM before requesting access to the Data Exchange).

If you have questions about the Data Exchange, myGovID or RAM, you may find the following useful:

- Data Exchange Helpdesk  
**Email:** [dssdataexchange.helpdesk@dss.gov.au](mailto:dssdataexchange.helpdesk@dss.gov.au)  
**Phone:** 1800 020 283 (between 08.30am–5.30pm Monday to Friday)  
**Website:** [dex.dss.gov.au](http://dex.dss.gov.au)
- myGovID  
**Website:** [www.mygovid.gov.au](http://www.mygovid.gov.au)
- RAM  
**Website:** [info.authorisationmanager.gov.au](http://info.authorisationmanager.gov.au)

## 7. Document versions

Version	Date	Description	Author
v1.0	September 2021	Approved operational guidelines	Advocacy and Inclusion Branch

## 8. Glossary

Term	Definition or use
<b>Access</b>	<p>Australian Government policy is aimed at ensuring that government services:</p> <ul style="list-style-type: none"> <li>• are available to everyone who is entitled to them</li> <li>• are free of discrimination including discrimination of a person's country of birth, language, gender, disability, culture, race or religion</li> <li>• take into account the needs and differences of clients</li> </ul>
<b>Brokerage</b>	<p>When a service provider pays for the services or goods of another organisation or individual to assist a client with particular needs. Brokerage is considered a form of subcontracting.</p>
<b>Caseload</b>	<p>The number of participants that each vocational specialist may be providing intensive support to at any given time.</p>
<b>Cultural Competence</b>	<p>The ability to interact effectively with people of different cultures, particularly in the context of non-profit organisations and government agencies whose employees work with persons from different cultural/ethnic backgrounds.</p>
<b>Data</b>	<p>Information collected for a specific purpose.</p>
<b>Data Exchange (DEX)</b>	<p>The Data Exchange is the program performance reporting solution developed by the Department of Social Services in consultation with organisations and clients, in response to the Australian Government's commitment to empower civil society organisations. For more information visit the Data Exchange website at <a href="http://dex.dss.gov.au">dex.dss.gov.au</a></p>
<b>Funding</b>	<p>Public money given to a service provider delivering the service outlined in the grant agreement and includes interest earned on the money.</p>
<b>Funding Arrangement Manager (FAM)</b>	<p>The departmental officer responsible for the ongoing management of the grantee (the IPS provider) and their compliance with the Grant Agreement.</p>
<b>Grant</b>	<p>An arrangement for the provision of financial assistance by the Commonwealth or on behalf of the Commonwealth:</p> <ul style="list-style-type: none"> <li>• Under which relevant money or other Commonwealth Resource Fund money is to be paid to a grantee other than the Commonwealth</li> <li>• Which is intended to help address one or more of the Australian Government's policy outcomes while assisting the grantee achieve its objectives.</li> </ul>
<b>Grant agreement</b>	<p>The legal contract between the Department and the auspice body/service provider that outlines service delivery, accountability and reporting requirements.</p>
<b>Individual Placement and Support (IPS)</b>	<p>An evidence-based, supported employment model to assist people with mental illness to seek and obtain employment.</p>

<b>Term</b>	<b>Definition or use</b>
<b>IPS program provider</b>	The organisation funded by the Australian Government to provide the IPS program service in accordance with an executed grant agreement.
<b>IPS vocational specialist</b>	A specialist IPS worker employed to assist young people with mental illness who are willing to engage with employment services or educational training and take part in the IPS program.
<b>Mental health</b>	A state of wellbeing in which an individual realises their own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to their own community.
<b>Mental illness</b>	A diagnosable disorder that significantly interferes with an individual's cognitive, emotional or social abilities. Under this program, participants do not require a formal diagnosis.
<b>Organisation</b>	Legal entity in the non-government sector.
<b>Participant</b>	A person receiving IPS program services.
<b>Partnership approach</b>	The partnership approach is an extended data set that providers share with the Department, intended as a genuine collaboration between government and the sector to exchange knowledge and share resources to inform service delivery.
<b>Performance</b>	The extent to which objectives or targets are achieved, the efficiency with which resources are allocated and the probity, equity and fairness with which outcomes are achieved.
<b>Risk</b>	The chance of something happening that will have an impact on objectives, measured in terms of consequences and likelihood.
<b>Stakeholders</b>	Individuals, organisations or networks that have, or potentially have, a relationship or interest in the work undertaken by providers.
<b>Supported Employment Fidelity Scale</b>	A 25-point scale used to ensure fidelity to the IPS model. The Australia and New Zealand Version 2.0, 28 October 2011, is a slight adaptation of The Dartmouth Supported Employment Fidelity Scale.  See <a href="http://www.waamh.org.au/assets/documents/ips/supported-employment-fidelity-scale.pdf">www.waamh.org.au/assets/documents/ips/supported-employment-fidelity-scale.pdf</a>  Also known as the IPS Model Fidelity Scale.
<b>Sustainable Employment</b>	Sustainable employed is considered to be employment for a minimum of 26 weeks. This is captured in the Data Exchange reporting.
<b>The Department (or DSS)</b>	The Australian Government Department of Social Services.
<b>Terms and Conditions</b>	The terms and conditions of the standard grant agreement between the department and grantees.



## **Attachment A – Incident Notification Form**



## Australian Government

### Department of Social Services

## Incident Notification form

### Who should use this form

This template is provided for the use of providers of the Individual Placement and Support (IPS) program. Providers are funded by the Department of Social Services (the department).

### When to use this form

Providers should use this form when notifying the department of a serious or reportable incident, as outlined in the Operational Guidelines. Providers should submit a completed form to their Funding Arrangement Manager within the timeframes outlined in the Operational Guidelines, while updates on incidents should be provided within five days. Providers should report incidents to their DSS Grant Agreement Manager within 24 hours of occurrence/discovery. Reportable incidents include:

- Death, injury or abuse of a participant while in the program, or of staff/volunteers undertaking delivery of IPS
- Inappropriate conduct between a participant, especially a child or young person, and employee
- Significant damage to or destruction of property impacting service delivery
- Adverse community reaction to the IPS activities
- Misuse of the IPS funding.

### Organisation details

Organisation: [Click or tap here to enter text.](#)

Site details: [Click or tap here to enter text.](#)

Name of site manager: [Click or tap here to enter text.](#)

Signature of site manager:

Date: [Click or tap here to enter text.](#)

### Details of incident

Type of incident (serious or reportable): [Click or tap here to enter text.](#)

Date of incident: [Click or tap here to enter text.](#)

Time of incident: [Click or tap here to enter text.](#)

No. of individuals involved: [Click or tap here to enter text.](#)

Gender of individuals: [Click or tap here to enter text.](#)

Age/s of individuals involved: [Click or tap here to enter text.](#)

Status of individuals: [Click or tap here to enter text.](#)

Location of incident (Address and location) : [Click or tap here to enter text.](#)

Incident details (Describe what occurred, including what led up to the incident, if applicable. Where there is more than one individual involved, you may refer to the individuals involved as Staff1, Client1, if needed):

[Click or tap here to enter text.](#)

Response to the incident (What actions were taken as a result of the incident occurring):

[Click or tap here to enter text.](#)

Preventative action (What has been implemented, or will be, in order to prevent the incident from happening again):

[Click or tap here to enter text.](#)

Media coverage (Outline whether media coverage is likely): [Click or tap here to enter text.](#)

## Attachment B – Data Exchange information

There is a range of information about the Data Exchange, including training resources and policy guidance, available on the Data Exchange web-portal at **[dex.dss.gov.au](http://dex.dss.gov.au)**

You can search 'training resources' to find fact sheets and step-by-step task cards, or search the following to find other useful resources:

- Getting Started:
  - o Quick Start Guide
  - o Log in to the Data Exchange web-based portal
- Organisation Administration:
  - o Overview of the My Organisation section
  - o Setting up the structure of your organisation
  - o Create and manage outlets
  - o Add and edit a user
  - o Update participation in the partnership approach
- Data Exchange Reports:
  - o Report Structure
  - o Quick guide to using reports