

NESA has contacted members to understand the actual and potential impacts of the Coronavirus. Immediate feedback indicates there is an escalating impact on Providers, which is in many cases being driven by external factors.

Providers have implemented risk and response plans and are monitoring the situation and advice from relevant Health Departments and are acting on the program advice available with regards to service delivery.

There are significant levels of concern from Providers regarding their responsibility in terms of safeguarding some of Australia's most vulnerable communities, as well as concerns regarding available information to inform scenario planning in the event service requirements change or are temporarily suspended in response to COVID-19 in remote communities.

Status to date

- Providers are seeing escalating impacts regarding COVID-19 - for example, the impact of increased external decisions (e.g. travel restrictions) and increased anxiety in the community.
- No sites to date have been closed as at 17 March 2020 to NESA's knowledge, however services have contacted NESA regarding for advice on how and when they should cease operation, in line with decision around gatherings of 100 people, but also in response to either community engagement, or workforce profiles.
- All providers are minimising exposure and managing operational responses in cases where there have been suspected cases of COVID-19.
- All providers have implemented risk management procedures and are following advice being provided by the Department of Health and state and territory departments. Actions taken include having hand sanitiser and disinfectants available to staff and job seekers, promoting good hygiene practices and displaying Department of Health notices, advising staff not to attend work if they feel unwell and displaying notices in office entry ways advising clients if they suspect they are unwell to contact the office via phone.
- Providers are also responding in real time to external decisions including access to communities, and travel restrictions.
- Providers are working to deliver business as usual as much as possible, however they have turned significant attention to scenario and continuity planning for the future. In this context they are seeking detailed information on possible directions as it relates to the program.

Provider Concerns

- **Communication** – Many Providers consider there has been minimal coordinated communication from the Agency with regards to the COVID-19 response. Only two formal advices have been provided to services to date. Providers are responding to a range of issues at present and require regular updated information and guidance from the NIAA. This advice needs to consider both the immediate requirements of Government, but also likely future requirements - particularly around servicing arrangements and job seeker engagement. There is a strong need for a national coordinated strategy at this time.

Providers also require more active support in terms of communicating Government decisions in the community. As levels of anxiety are increasing, Providers are being asked to speak to Government policy relating to ongoing CDP services. While Providers can be well placed to have these discussions, greater levels of engagement/media direct to communities regarding the CDP program and its current operation is necessary to support this on-ground work.

- **Delivery of CDP Group Activities** – Providers remain concerned about how local changes to service delivery should be considered, and what decision processes are required to support the cessation of activities.

Concerns relate to both their active implementation of broad government measures (e.g. 100 people gatherings) and locally focussed impacts (e.g. staffing or community concerns).

- **Funding Impacts:** The CDP Provider Funding Agreement and payment model is tied directly to job seeker caseload status for the delivery of case management services and remote employment services. Providers are concerned that there will be changes to payment arrangements in the event there are directions to cease or reduce services, or unintended payment impacts where exemptions to job seekers are applied. If not considered appropriately, it would result in significant job losses within organisations, including at the community level, and limit services ability to be part of the COVID-19 response.
- **Responding to contact with COVID:**
 - **Staff impacts:** Providers are currently working through the staffing realities and associated legalities around exposure to COVID-19 and staff entitlements.

The makeup of the CDP workforce includes a mix of local staff and fly in fly out in many cases which presents unique challenges. In remote locations, impacts are already being felt even in advance of positive cases of COVID-19 in community due to travel restrictions. Increased self-quarantine requirements will also place increased pressure on staffing for Providers.

- **Job Seeker Impacts and Major Personal Crisis Exemptions:** Major Personal Crisis Exemptions are currently in place for job seekers where exposure to COVID-19 is declared. In line with this advice, CDP Providers are referring job seekers to Centrelink where required. There are significant concerns however around the suitability of this measure, as it relates to the ability of job seekers to contact Centrelink for these exemptions, and the effectiveness of this as transmission rates increase around the country. Use of DNAV would more actively allow Providers to support job seekers and service delivery in these scenarios and could be a more fit for purpose response in remote Australia.
- **Access to supply chain/materials** – Services will be increasingly impacted by access to materials to deliver activities. This is as a result of both supply chain demands and impacts and travel restrictions to communities. This will impact on service delivery in the short and long term.

Practical opportunities to support the provider network and mitigate operational risks

- **Communications:** Priority engagement with the sector is critical at this stage. NESAs recommend the following is put in place immediately:
 - **CEO/Manager Briefing:** NIAA should call a meeting of relevant CEOs and CDP Managers to brief on the current environment. Providers can also provide feedback directly to senior staff on localised impacts.
 - **Dedicated and regular COVID advice to be provided:** CDP organisations should be provided with weekly updates on the state of play with regards to CDP Service Delivery. This should be provided on the Provider Portal, and via Peak Bodies to ensure rapid circulation of information. The timeline for publishing/making advice available should be consistent each week. NESAs recommend this occur each Monday morning by 8am AEDT.

- **Mutual Obligation:**

- **Immediate term:** If mutual obligation remains in place, Providers must continue to be supported to apply discretion and manage participation on an individual case-by-case basis, or activity by activity as broader considerations are made by Government. This may require additional leniency in the current COVID-19 environment.

This discretion can be enabled through the existing Do Not Attend Valid result (as opposed to the current Major Personal Crisis arrangements in remote locations). Providers should receive clear direction that in the current environment, use of DNAV in response to local issues is appropriate and will not impact on performance where decisions are tied to local COVID-19 responses.

- **Medium/Longer Term:** In the event mutual obligation requirements are suspended either nationally or on a location by location basis, the forward impact on finances, engagement and performance must be considered.

- **Stability in Funding Arrangements/Supporting the COVID response in community:**

- Stability in funding must be assured for CDP services during the COVID-19 response period, and beyond. There are both public health, and economic benefits for safeguarding the ongoing operation of CDP services during the COVID-19 response period, and during recovery.

NESA recommends government commit to a continued financial certainty (consistent with what providers have received in the first 6 months of the financial year) at least until the end of the year. Doing so would provide a level of assurance and financial stability in an environment which is requiring rapid adjustment.

This stability is required to both minimise job losses, and ensure an ongoing provider network in community. That network could play an active role in supporting community responses to COVID-19 as the progress of the virus continues.

The coming weeks and months will benefit from continuity of providers in the CDP service footprint. CDP providers are local organisations who are often trusted institutions with long histories and large local workforces within the communities in which they deliver services. Already many are participating in public health initiatives to increase community readiness and improve community infrastructure for personal hygiene. Providers are also, for example, playing an active role in the development of local response plans and are considered key partners in the emergency response.

This local organisational presence in community provides an opportunity to mobilise quickly in a range of ways to enact local service responses when appropriate. This would need to be considered on a community by community basis.

For this reason, decisions regarding ongoing service delivery must give regard to the operational and financial needs of services in the coming months to ensure a robust CDP market post COVID-19, but also to provide a platform for in-community responses throughout the period.

- **Local Service Delivery Decisions:**

- Providers should be actively supported and permitted to make decisions around servicing, based on their local environment. These decisions should take into consideration the application of flexibility within the CDP program, however where services cannot be continued in the view of the Provider, they should be supported by NIAA, and assisted to implement these decisions. Confirmation of the decision tree for this should be provided to Providers to enable this.

- **Performance Period 9:**
 - The Agency should pause Provider Performance Period 9 to allow services to focus internal resources on their immediate and upcoming responses to COVID-19.

- **Adapting to changes in the labour market following COVID (from April 2020):**
 - **Permissible breaks** – Permissible breaks for job seekers in employment be extended for up to 3 months, effective from 1 April 2020 (commencement of PPR10). This would allow employment retention in where employers have to reduce staff's hours and would allow providers to continue to work with employers to sustain their employment over the mid-term and enable providers to continue to claim eligible outcomes.

 - **Revising Outcomes Requirements** - Redefine the work hour definition to increase the number of eligible outcomes based on an assessment of work opportunities in remote regions.