



Case Management Guidelines

Humanitarian Settlement Program

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1. Introduction

The Humanitarian Settlement Program (HSP) supports humanitarian entrants and other eligible visa holders integrate into Australian life. It does this by helping new arrivals build the skills and knowledge they need to become self-reliant and active members of the community.

Clients are assisted to achieve outcomes in accordance with the HSP Outcomes Framework (Attachment A).

Clients with complex settlement needs receive additional case management support under a component of the HSP known as Specialised and Intensive Services (SIS).

Case management is a crucial element of the HSP, underpinning its delivery to ensure that Clients are provided with the support they require in a timely and coordinated way.

Within the context of the HSP, case management is the process of working collaboratively with Clients to assess their needs, and deliver a tailored package of HSP Services to address those needs, through the implementation of an individualised case management plan.

The purpose of the HSP Case Management Guidelines (the Guidelines) is to outline the HSP Case Management Framework to be applied by Service Providers and provide guidance on the HSP Services that may be delivered under each of its six stages. The Guidelines are relevant to all Service Provider staff involved in the delivery of HSP Services to Clients.

Through their application, the Guidelines aim to create shared understanding and consistency in approach, while allowing flexibility to respond to diverse Client needs and local settings.

The Guidelines do not represent changes to the contractual agreement between the Department and Service Providers, but rather seek to mitigate any ambiguities in the interpretation of the HSP Contract.

1.1. HSP Guidelines

This document forms one part of the HSP Guidelines. Table 1 provides an outline of each component of the HSP Guidelines.

Table 1: HSP Guidelines

Title	Description
HSP Case Management Guidelines	Specifies HSP eligibility, outlines the HSP Case Management Framework and provides guidance to Case Managers and other Service Provider personnel on the delivery of HSP Services.
HSP Orientation Guidelines	Outlines the HSP Orientation Curriculum Framework and provides guidance on key teaching, learning and assessment principles.
HSP Orientation Facilitators' Resource Kit	Provides examples of lesson plans, participant learning activities and resources to support Facilitators in their delivery of HSP Orientation.
HSP Administration Guidelines	Information and guidance for Service Providers on service coordination, reporting and other administrative and program-level requirements.
HSP System Task Cards	Outlines HSP System functionality and includes step-by-step instructions to assist users to complete specific tasks.

1.2. Structure and terminology

1.2.1. Structure

The Guidelines are structured around the six stages of the HSP Case Management Framework (see 1.3).

Where the Guidelines intersect with the HSP Outcomes Framework, it is displayed as per the following example:

Immediate Deliverables – Pre-arrival to Australia

A Client has a Pre-Arrival Assessment in place prior to their arrival

A Client has suitable accommodation arranged

1.2.2. Terminology

Guidance on terminology used in the Guidelines is outlined below.

(a) Service payment points

Throughout the Guidelines, service payment points are labelled using the reference ID (e.g. F01) outlined in the HSP Contract.

(b) Service Provider personnel

The Guidelines refer specifically to the Case Manager where HSP Services must be delivered by the Case Manager and cannot be performed by other Service Provider personnel.

The Guidelines refer to the Service Provider where HSP Services can be delivered by other Service Provider personnel such as case workers and bi-cultural workers.

(c) Clients, Cases, Groups

The Guidelines refer to Clients, Cases and Groups:

- **Client** – is a person who is referred by the Department to the Service Provider through the HSP System and is eligible for HSP Services.
- **Case** – may comprise a single Client, or a couple or family who are part of the same visa grant.
- **Group** – may be comprised of part of, or all of, a Case determined by the date of arrival in Australia.

For the purposes of the Guidelines, where a Service is delivered to an individual, that individual is referred to as a Client. Where a claim for Service payment is made at the Case or Group level it is specified.

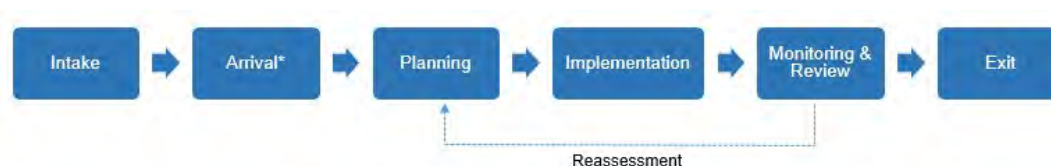
(d) HSP Services

HSP Services refer to Settlement Services outlined in the HSP Contract.

1.3. HSP Case Management Framework

The HSP Case Management Framework is based on established best practice standards in case management, adapted to reflect the characteristics of the HSP. The HSP Case Management Framework incorporates six core stages:

Figure 1: Stages of the HSP Case Management Framework



*Only applicable to Clients who enter the HSP as a Humanitarian Program referral

Although it is displayed as a linear process, in practice, the stages of the HSP Case Management Framework may overlap.

1.4. Service Delivery Principles

The following HSP Service Delivery Principles underpin the HSP Case Management Framework:

- **Client-centred** – outcome goals and activities are tailored to each Client's needs and personal circumstances.
- **Respect** – Clients are individuals who have the inherent right of respect for their human worth and dignity.
- **Client participation** – Clients are active participants in the case management process.
- **Flexibility** – HSP Services are delivered in a way that suits the individual Client needs and are varied according to the changing needs of the Client. This tailored case management approach identifies the need for, and gives priority to, early intervention strategies as required.
- **Children and young people** – the best interests of children and young people are considered a priority.
- **Quality and continuity of care** – HSP Services are delivered in an orderly and uninterrupted manner so that Clients are satisfied with both the interpersonal aspects of care and the coordination of the care they receive.
- **Sustainable Client settlement outcomes** – HSP Services must focus on achieving sustainable Client settlement outcomes by developing Client skills and competency, supporting realistic expectations, and transitioning Clients to independence, other settlement services and mainstream service systems.

1.5. Role of the Case Manager

The Case Manager is critical to the successful implementation of the HSP Case Management Framework.

The Case Manager builds a trusting working relationship with Clients to encourage their strong participation in the HSP and support early intervention in emerging issues.

The following HSP Service Delivery Principles relate to the role of the Case Manager:

- **A central point of contact** – the Client has one Case Manager who is the central point of contact and assumes overall responsibility for the management of the delivery of HSP Services.
- **Regular engagement** – Case Managers must regularly engage with Clients to build rapport, and to identify and address changing Client needs.
- **Life strengths approach** – each individual has strengths that must be the focus of the interaction between the Case Manager and the Client. The delivery of HSP Services must draw upon Client strengths, with the aim of assisting Clients to participate fully and independently in the Australian economy and society.
- **Collaboration** – Case Managers must work collaboratively with community service providers and professionals involved with a Client to ensure the best possible settlement outcomes for each Client. They must communicate effectively, and work transparently, cooperatively and professionally with any other case managers or professionals who interact with the Client (such as Workforce Australia or AMEP).

1.6. Case Manager skills and qualifications

Case Managers must have the necessary and appropriate registrations, accreditations, qualifications, skills, training and experience to deliver HSP Services. Case Managers must have, as a minimum, one of the following qualifications (or an equivalent alternate qualification):

- Diploma of Community Services (Case Management), or
- Bachelor of Applied Sciences (Community Services).

For Specialised and Intensive Services (Tier 3 Clients), Case Managers must have, as a minimum, one of the following qualifications (or an equivalent alternate qualification):

- Bachelor of Social Work, or
- Bachelor of Psychological Services.

1.7. Client characteristics

Clients are likely to have experienced high levels of poverty, severe trauma, and suffer the health impacts arising from persecution, discrimination, displacement, nutritional deprivation and inadequate medical care.

Homesickness, culture shock, a sense of social dislocation, and language barriers can also affect the ease with which Clients settle in Australia.

Many Clients will have spent long periods of time in refugee camps or other precarious living conditions before coming to Australia. Clients may have no experience of renting a home or other aspects of life in Australia which are considered fundamental to successful settlement.

Many Clients will have to establish new support networks in a community which may not understand their culture or experiences.

1.7.1. Special considerations

Some Clients will have additional vulnerabilities which Case Managers will need to consider throughout the case management process. These Client groups include:

(a) Children and young people

Children and young people are often viewed as more readily able to adapt to Australian life than adults. However, they face the same resettlement stresses and can carry a greater degree of responsibility for family members during the resettlement transition period. Children and young people may struggle to fit into the mainstream education system or find suitable employment. These factors leave humanitarian children and youth at risk of encountering settlement difficulties.

(b) Unaccompanied Humanitarian Minors

For Clients who are Unaccompanied Humanitarian Minors (UHMs), Service Providers must work in collaboration with other stakeholders that may also be providing services or support to the Client (e.g. state or territory child welfare authorities or custodian). This is to ensure a UHM's care, welfare and settlement needs are being met at all times.

(c) Women

Women may be particularly vulnerable and face barriers to full economic or social participation based on cultural or family related factors or other pre-arrival experiences. This includes Woman at Risk (subclass 204) visa holders; a category of visa established to prioritise the protection of refugee women and their dependents who are in particularly vulnerable situations (e.g. in danger of victimisation, harassment or serious abuse because of their gender and living without the protection of a male relative).

1.8. Interpreting

Clients must be given the opportunity to communicate their needs in the language of their choice. It is essential that information is communicated accurately to Clients and that cultural sensitivities and confidentiality are taken into account at all times.

When discussing issues that are technical or sensitive, such as health, legal or tenancy matters, a professional National Accreditation Authority for Translators and Interpreters (NAATI) credentialed interpreter must be used. It is not appropriate for family members, particularly children, to interpret in these situations.

Alternative arrangements must only be made where all options for professional interpreting services (including telephone interpreting) have been exhausted.

In some circumstances it is appropriate to call on bilingual workers or volunteers to act as an interpreter. Examples include social or informal settings and making appointments where complex or technical language is not required.

1.9. HSP System

The Department operates a web-based system (known as the HSP System) to manage Client referrals to the HSP, share Client travel information, record most HSP Services delivered to Clients, and make most payments to Service Providers.

The HSP System is the principal means of communication with the Department. It should be used by Service Providers when requesting, clarifying or updating information specific to Clients.

HSP System Task Cards are available to assist Service Providers to use the HSP System. The Guidelines refer to the HSP System Task Cards where relevant.

The HSP System does not provide detailed case management functionality. Service Providers will need to manage their own independent systems and processes for case management purposes.

To request access to the HSP System, Service Provider staff must complete a User Access Request Form available from GovTEAMS (see 1.11).

1.10. Qualtrics

Qualtrics is a data collection application which operates outside the HSP System.

From 1 March 2022, Service Providers are required to use Qualtrics to assess and record a Client's progress against the HSP Outcomes and DEX SCORE as part of the Formal Review (See 6.2.1) and Exit Interview (See 7.1.1) process.

Service Providers access Qualtrics via links provided by the Department.

1.11. GovTEAMS

GovTEAMS is an Australian Government online access controlled communications platform that supports collaboration across government entities and their stakeholders. The Department has created a community on GovTEAMS specific to the HSP.

From GovTEAMS, Service Providers can access the HSP Guidelines, forms and other useful guidance material and information relevant to the delivery of the HSP. Service Providers should check GovTEAMS regularly to obtain up-to-date information about the HSP.

To request access to GovTEAMS, Service Provider staff should email

s.22(1)(a)(ii) [\[redacted\]@homeaffairs.gov.au](mailto:[redacted]@homeaffairs.gov.au).

1.12. Privacy

Service Providers and Case Managers are responsible for protecting Clients' personal information, in accordance with the HSP Contract, the *Privacy Act 1988*, including the Australian Privacy Principles, and other relevant legislation and policies. This includes requirements relating to:

- the open and transparent management of personal information
- how personal information can be used and disclosed
- maintaining the quality of personal information
- keeping personal information secure, and
- the right for individuals to access and correct their personal information.

1.12.1. HSP Privacy Notice and Consent Form

The Service Provider must, in the initial stages of service delivery:

- provide the Client with a copy of the HSP Privacy Notice and Consent Form, and

- request the Client sign the HSP Consent Form.

Where a Client is under 18 years of age, a parent or guardian may sign on their behalf. If the Client provides their consent, but their signature cannot be obtained, their verbal consent should be recorded on the form. Service Providers should explain to Clients that consent may be required in order for HSP Services to be effectively delivered to them or referrals made on their behalf.

The HSP Privacy Notice and Consent Form is available in multiple languages from GovTEAMS.

1.13. Use of volunteers

Volunteers can be used to assist Service Provider personnel with the provision of services to HSP Clients, per clause 21.1 (c) and (d) of the HSP Contract. Volunteers cannot be solely or predominantly responsible for the provision of services. Service Provider Case Managers must assume overall and ultimate responsibility of service delivery. Case Managers must coordinate support to Clients and should be a central point of contact for Clients. Volunteers should not assume this role.

Volunteers should not be engaged to conduct key assessments in a Client's settlement journey, including pre-arrival assessments, tier re-classification, formal reviews, assessments against settlement outcomes or determining when a client is ready for exit from the HSP. Other critical services like essential registrations, lease arrangements or some medical appointments for Tier 3 Clients with complex needs should be managed by HSP Service Provider personnel.

Volunteers may be used to assist Clients develop skills, knowledge and confidence to independently access services. This may include practical elements of Orientation (for example, navigating public transport or attendance at AMEP). Skills that require repetition to develop or assistance to attend certain engagements can be an opportunity for Volunteer engagement.

Please note, per Clause 6.2 (b) of the Statement of Requirement, engaging Volunteers to interpret or translate for HSP clients may not be appropriate.

If Service Providers wish to implement a systematic approach to engaging Volunteers or have queries about which services can be supported by Volunteers, they should engage with HSP Contract Management.

1.14. Guidelines updates

The Guidelines will be periodically reviewed and updated by the Department. Service Providers will be notified of changes.

2. Intake

The Intake stage of the HSP Case Management Framework involves the Department referring people eligible to receive HSP Services to a Service Provider. For Clients resettling in Australia from overseas, the Intake stage includes the Service Provider preparing for their arrival.

Service Providers must only deliver HSP Services to Clients who have been referred to them by the Department. All Clients are referred to Service Providers through the HSP System.

There are two categories of referrals under the HSP:

- Humanitarian Program referrals (see 2.2)
- Specialised and Intensive Services (SIS) referrals (see 2.3).

A high-level diagram of the HSP referrals process is at Attachment B.

2.1. HSP eligibility

People granted one of the following visas are eligible to access the HSP on their arrival in Australia:

- Refugee (subclass 200, 201, 203 and 204)
- Global Special Humanitarian (subclass 202).

Subject to the Department's approval, people holding one of the following visas may be eligible to receive SIS under the HSP:

- Refugee (subclass 200, 201, 203 and 204)
- Global Special Humanitarian (subclass 202)
- Protection (subclass 866)
- Temporary Protection (subclass 785), Temporary Humanitarian Stay (subclass 449), Temporary Humanitarian Concern (subclass 786) and Safe Haven Enterprise (subclass 790).

Holders of these visas may be eligible for SIS up to five years after their arrival in Australia, or up to five years after the grant of their eligible onshore visa.

In exceptional circumstances, flexibility may be shown to this timeframe and holders of other visa subclasses.

People who are eligible for SIS must demonstrate an inability to independently engage with appropriate supports and be impacted by multiple or complex barriers that may include:

- disability
- health needs that are severe, critical, long term and/or unmanaged
- mental health issues
- homelessness or housing instability
- domestic and family violence
- child and youth welfare concerns
- family and/or relationship breakdown
- social isolation
- financial hardship
- legal issues.

2.1.1. Unaccompanied Humanitarian Minors

Unaccompanied Humanitarian Minors (UHMs) are persons under 18 years of age who arrive in Australia and who may have been granted a visa under Australia's Refugee and Humanitarian Program.

There are two categories of UHMs:

1. IGOC minor – refers to a non-citizen child (under 18 years) for whom the Minister for Immigration, Citizenship and Multicultural Affairs, or the Minister for Home Affairs is their legally recognised guardian, as provided by the *Immigration (Guardianship of Children) Act 1946* (Cth) (IGOC Act). The IGOC Act provides that the Minister is the legal guardian of a non-citizen child who:
 - enters Australia as a non-citizen; and
 - has not turned 18; and
 - intends, or is intending, to become a permanent resident of Australia; and
 - did not enter Australia in the charge of, or for the purposes of living in Australia under the care of, a parent, legal guardian, or relative who is 21 years of age or older.
2. Non-IGOC minor – refers to a non-citizen child who intends, or is intending to become a permanent resident of Australia, and entered Australia in the charge of, or for the purposes of living in the care of, a relative over the age of 21 who is not a parent.

Unlike IGOC minors, non-IGOC minors have no legal guardian in Australia. Their legal guardian may remain their parent/s in their country of origin.

The *Immigration (Guardianship of Children) 1946 (Cth)* (IGOC) Instrument of Delegation delegates some of the Minister's powers under the IGOC Act to certain officers of the Department and relevant state or territory child welfare authority (STCWAs), who are referred to as IGOC delegates. The role of the IGOC delegate is to ensure an IGOC minor's basic welfare needs are met and to make any critical decisions relating to the welfare of the IGOC minor.

Under section 7(1) of the IGOC Act, the Minister (or IGOC delegate) may place an IGOC minor in the care of a person who is willing and, in the opinion of the Minister (or IGOC delegate), suitable to be the custodian of that minor. A custodian has the same duties as those of a person, guardian or foster parent who cares for the child. Custodians provide accommodation, food, clothing, medication, support and guidance, as necessary for an IGOC minor's well-being and development. Custodians can make routine decisions, but non-routine decisions must be made by the IGOC delegate.

i) UHM Program

The UHM Program facilitates care, supervision, accommodation and settlement support to UHMs who have been assessed by the Department as entering and residing in Australia without a parent or legal guardian.

UHM Program services are delivered through either contracted service providers or STCWAs. Depending on the circumstances, the Department may refer a child to:

- a contracted service provider as the custodian of the child;
- an officer of the STCWA as delegated guardian of the child under the IGOC Act; or
- a contracted service provider or an officer of a STCWA for Case Management Only (CMO) services.

The Department works in partnership with STCWAs to deliver the UHM Program through a best practice case management model. IGOC minors receiving UHM services through the SCWA model will be appointed a custodian. STCWAs will be requested by the Department at the time of referral to assess and appoint a custodian as the IGOC delegate under section 7(1) of the IGOC Act.

Unlike the STCWA model, contracted service providers are appointed as custodians of IGOC minors and provide day-to-day care and accommodation to UHMs. Contracted service providers establish household rules and support UHMs' developing independent living skills.

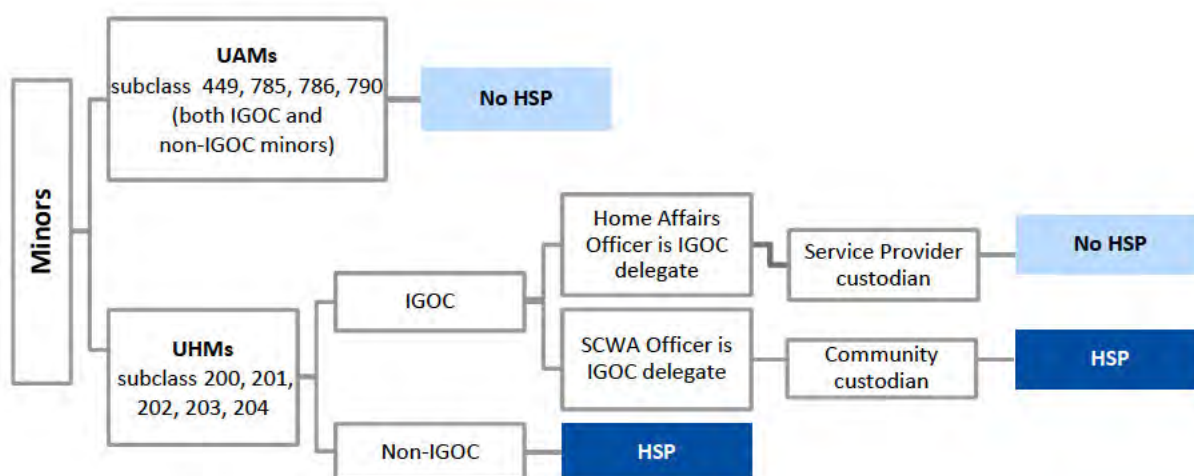
Non-IGOC minors will have a relative carer. Whether non-IGOC minors are eligible for the UHM Program services (e.g. CMO) is considered on a case-by-case basis.

IGOC and non-IGOC minors who have been granted an eligible protection or humanitarian visa will generally be referred to STCWAs on a case-by-case basis in line with STCWA service regions.

ii) HSP eligibility

All UHMs are eligible for the HSP, except where a contracted service provider under the UHM Program is appointed as a custodian to provide day-to-day care and accommodation to the UHM.

Figure 2: HSP eligibility and UHMs



2.1.2. Community Support Program

Individuals granted a Global Special Humanitarian (subclass 202) visa under the Community Support Program (CSP) are not eligible to access support under the HSP on their arrival in Australia as they receive settlement services from their Approved Proposing Organisation. Subject to the approval of the Department, CSP entrants may be eligible to receive SIS. Further information regarding the CSP is available from the Department's [website](#).

2.1.3. Children born in Australia to HSP Clients

Clients who resettle in Australia from offshore under the Refugee and Humanitarian Program are Australian permanent residents. Any child born in Australia to either a permanent resident or an Australian citizen automatically acquires Australian citizenship and is not eligible for the HSP, unless advised otherwise by the Department.

2.1.4. Other visas and cohorts

In rare and exceptional circumstances, and most likely to occur from a change in Government policy (e.g. the introduction of a new visa category), other visa holders (i.e. non-prescribed visas) and cohorts may be granted access to HSP Services.

2.2. Humanitarian Program referrals

A Humanitarian Program referral is initiated by the Department for a person located overseas to resettle in Australia under the Humanitarian Program and receive HSP Services on their arrival.

The size and composition of Australia's annual Humanitarian Program is determined by the Minister for Immigration, Citizenship, Migrant Services and Multicultural Affairs. Visa applications under the offshore component of the Humanitarian Program are processed offshore by the Department's Overseas Posts (Overseas Post).

Clients who enter the HSP as a Humanitarian Program referral will hold one of the following categories of permanent visa:

- **Refugee** – for people who are experiencing persecution in their home country, who are typically outside their home country, and are in need of resettlement. Categories include the Refugee (subclass 200), In-country Special Humanitarian (subclass 201), Emergency Rescue (subclass 203) and Woman at Risk (subclass 204) visa subclasses.

- **Special Humanitarian Program (SHP)** – for people outside their home country who are subject to substantial discrimination amounting to gross violation of human rights in their home country, and have an eligible Proposer. Applications for entry under the SHP must be supported by a Proposer who is an Australian citizen, permanent resident or eligible New Zealand citizen, or an organisation operating in Australia. The SHP category consists of the Global Special Humanitarian (subclass 202) visa subclass.

Once a visa has been granted, the Overseas Post ensures that all relevant Client details are available in the HSP System. This includes:

- biographical data
- details of associated parties (e.g. onshore links, Proposers, other related HSP Cases), including whether the Client intends to reside with their onshore link or Proposer
- education and employment information
- preferred language
- initial entry expiry date of the Principal Applicant's visa, and
- Clients who identify as LGBTQI.

The Overseas Post then refers the Client through the HSP System to the Department's Humanitarian Referrals and Regional Settlement Section which determines the location in Australia where the Client will settle.

Referral factors

The Department considers a range of factors when determining a Client's settlement location. Once the settlement location is determined, the Department will refer the Case to the Service Provider through the HSP System outlining the location for settlement within the relevant Contract Region. Referral factors include:

SHP Clients

SHP Clients are settled in the same location as their Proposer. The Department has no discretion to determine the settlement location for these Clients unless there are exceptional circumstances (e.g. the Proposer may reside in a remote location where complementary settlement services are unavailable).

Onshore links

Onshore links are family members or friends known to a Refugee Client. Refugee Clients are generally settled near their declared onshore link due to the social support that can be provided and the positive effect this has on a Client achieving their settlement outcomes. Settling Clients close to their links also reduces the likelihood that they will relocate from their initial settlement location. Onshore links do not formally propose or sponsor Clients and have no obligation to support a Client in Australia. The Department will not apply this policy if the decision would lead to poor outcomes for vulnerable clients, (i.e. Clients with severe health conditions or disabilities that cannot be met in a particular location).

Related Cases

Related Cases occur when a Client has indicated to the Overseas Post that they wish to be settled in the same location as a family member or friend who holds a Humanitarian visa. The Department will generally settle Related Cases in the same location. Related Cases involving friends may not be settled in the same location where there is a high demand for settlement and mainstream services.

Unlinked Clients

Clients without a Proposer or onshore link (known as unlinked Clients) will be considered for settlement in a regional HSP settlement location.

Multiple Cases

Where the Department needs to settle a new cohort of Clients that have not historically been part of Australia's Humanitarian Program, the Department will engage with Service Providers to determine the most appropriate settlement location. New cohorts may be managed in groups of multiple Cases (approximately five to eight Cases) so that all Cases arrive and settle at the same time, ensuring a critical mass of Clients is established in the settlement location in a short period of time.

The Department will liaise with the Service Provider to ascertain the maximum number of group arrivals that can be managed at any one time, as well as a location's total capacity.

Unaccompanied Humanitarian Minors

The determination of the settlement location for 'unlinked' UHMs is determined in consultation with the Department's UHM and Guardianship Section.

Emergency Rescue Cases

Emergency Rescue (subclass 203) visa holders face an immediate threat to their life or personal security in their home country. When an Overseas Post identifies an Emergency Rescue case, the Department will determine a suitable settlement location as a matter of urgency. The Department will engage with the potential Service Provider before making a referral to ensure it has the capacity to settle the Client at short notice.

2.2.1. Pre-Arrival Assessment (I01)

Immediate Deliverables – Pre-arrival to Australia

A Client has a Pre-Arrival Assessment in place prior to their arrival

A Client has suitable accommodation arranged

The Case Manager must conduct a Pre-Arrival Assessment (PAA) for all Clients who enter the HSP as a Humanitarian Program referral prior to their arrival in Australia. Clients who enter the HSP as a SIS referral are not eligible for a PAA.

The purpose of the PAA is to determine the needs of each Client on their arrival in Australia and undertake preparatory arrangements for the delivery of HSP Services.

In conducting the PAA, the Case Manager must consider the Client's needs in relation to the following issues:

- travel arrangements (see 2.2.1(a))
- pre-arrival health assessments (see 2.2.1(b))
- travel escorts (see 2.2.1(c))
- the capacity of the Client's Proposer to provide settlement support (see 2.2.1 – SHP Clients), and
- Immediate Services (see 3.1).

Client information relevant to the PAA is available to the Service Provider in the HSP System following referral. Prior to the Client's arrival, the Service Provider is expected to monitor the HSP System for any updates to Client information and adjust the PAA where necessary.

SHP Clients

For SHP Clients, the Case Manager will need to obtain additional information from the Proposer to complete the PAA.

Proposers are responsible for Clients' travel to Australia. Proposers are informed of their role to assist in providing settlement support to the Client at the time of visa application. This may include meeting Clients at the airport, providing accommodation on arrival, assisting the Client to find permanent accommodation and introducing the Client to relevant services.

Service Providers should encourage Proposers to assist where they can as learning from a relative or friend can be an effective way for a Client to become familiar with their new environment.

The Service Provider must not deliver HSP Services to a Client that they receive from their Proposer, but should fill any identified service gaps.

As part of the PAA, the Case Manager must contact the Proposer (where possible, in person) to:

- determine their capacity to provide settlement support to the Client
- determine whether they will be arranging the Client's post-arrival health appointments (see 2.2.1(b)(iv))

- confirm their address and whether the Client will be residing with them, and
- obtain the Client's travel arrangements to determine if the Client requires transit assistance (see 2.2.1 – SHP Clients requiring transit assistance).

The Case Manager should provide advice to the Proposer on:

- issues they may face in assisting Clients to settle in Australia
- understanding realistic expectations in relation to assisting Clients, and
- how they can assist Clients to access services. For example:
 - providing the Health Information Card (available from GovTEAMS) and explaining its contents, and
 - providing information on the Health Undertaking process (if applicable).

The Case Manager must not disclose a Client's personal health information to a Proposer, unless they have the express written consent of the Client.

Contact information for the Proposer is available through the HSP System. If contact information is not provided, or the Proposer cannot be reached, the Service Provider should contact the Department by sending a Task to NATO Referral in the HSP System. The Department will contact the Overseas Post to confirm the Proposer's contact details and advise the Service Provider.

In circumstances where a Proposer is under 18 years old, a responsible adult who assisted the Proposer to complete and lodge the sponsorship application should undertake the Proposer's responsibilities on the minor's behalf.

SHP Clients requiring transit assistance

Where a PAA identifies that a SHP Client requires transit assistance, the Service Provider conducting the PAA (i.e. the Service Provider in the Client's settlement location) must:

- obtain the Client's travel details from the Proposer, and
- input the travel details into the Travel screen of the Case record in the HSP System.

A transit case will then be created in the HSP System and referred to the Service Provider in the transit location.

If the Service Provider in the Client's settlement location becomes aware of any changes to the Client's itinerary prior to travel occurring, it must update the Travel screen of the Case record in the HSP System.

Where changes to the Client's itinerary occur within 24 hours of scheduled arrival, the Service Provider in the Client's settlement location should also notify the transit Service Provider directly by phone.

Claiming instructions:

Reference ID: I01

Claim point: On completion of Pre-Arrival Assessment (PAA)

Basis of claim: Per Case, according to Band Size

Maximum no. of instances: 1

Other: To allow for any updates to travel, health and Proposer information, the PAA should be claimed no earlier than two days prior to the Case's arrival in Australia.

Associated HSP System task card:

- Claiming a Pre-Arrival Assessment
- Adding travel for Special Humanitarian Program (SHP) Clients

(a) Travel arrangements

Travel for Refugee Clients is arranged by the International Organization for Migration (IOM) on behalf of the Department.

Travel for SHP Clients is the responsibility of the Proposer. If a Proposer approaches the Service Provider seeking assistance with booking travel for a SHP Client, the Service Provider may inform the Proposer of IOM's prepaid migration travel program. Further information is available from the [IOM Australia website](#).

(i) Arrival Window

When a Refugee Client is referred to the Service Provider, the HSP System populates an Arrival Window of four to ten weeks from the date of referral, and a notification is sent to the Overseas Post and IOM with the relevant details.

IOM is responsible for booking travel for Refugee Clients within the Arrival Window. The minimum length of four weeks is to allow appropriate lead time for offshore processes to take place (e.g. additional health clearances and Australian Cultural Orientation (AUSCO) classes). No Arrival Windows are generated for SHP Clients as the Proposer is responsible for all travel arrangements.

As far as practicable, IOM will arrange travel for Clients to arrive at their settlement location between Monday and Thursday, avoiding public holidays.

There may be emergency cases where Clients are required to travel with less than two weeks' notice (e.g. Emergency Rescue (subclass 203) visa, see 2.2 – Referral factors). The Department will engage with the potential Service Provider prior to making the referral to ensure it has the capacity to settle the Case at short notice.

Generally, SHP Clients arrive sooner than Refugee Clients (on average five weeks after the date of referral).

(ii) Monitoring Arrival Windows

The Service Provider must monitor their Arrival Windows and confirm they have capacity to receive arrivals as soon as the travel booking is received in the HSP System.

If travel has not been booked at the commencement of the Arrival Window, and there has been no advice on travel delays, the Service Provider should notify the Department by sending a Task to NATO Referral in the HSP System. The Department will follow-up with IOM regarding the Client's travel arrangements.

(iii) Adjustment to Arrival Window

The Department may need to adjust a Client's Arrival Window due to extenuating circumstances (e.g. delays in exit arrangements, Client health, flight availability, political unrest or natural disasters). The Service Provider will be notified of any adjustment to the Arrival Window through the HSP System.

The Service Provider may submit a request in the HSP System for the Arrival Window to be adjusted to ensure it has capacity to receive arrivals during peak referral periods. For example, if the Service Provider becomes aware of a large number of Cases with the same Arrival Window, the Service Provider may request that the Arrival Window for some of the Cases be moved 4-7 weeks into the future, and others are moved to 8-11 weeks into the future. The Service Provider should make such requests before travel is booked, due to the additional costs incurred for travel cancellations.

The Department will consider such requests on a case-by-case basis, taking into account the circumstances of both the Service Provider and Case. Requests will not be approved where a delay to travel would place the Client at unnecessary risk or cause the initial entry date of their visa to expire.

If the Service Provider cannot receive the Case within the Arrival Window, the Department may re-refer the Client to another Contract Region.

Associated HSP System task card:

- Requesting an adjustment to an Arrival Window

(iv) Travel bookings

When travel has been booked for a Refugee Client, the details are available in the HSP System. The Service Provider can monitor scheduled arrivals using filters available on the Case list screen of the HSP System.

The HSP System will generate notifications to the Service Provider when travel:

- is booked, and the Client is scheduled to arrive within two days
- is updated, and the Client was scheduled to arrive within two days, and
- is cancelled or postponed and new travel has not been booked.

Associated HSP System task card:

- Travel

(b) Health

An essential part of the PAA is identifying and planning for the management of a Client's on-arrival health needs.

Clients undergo a number of health checks before they arrive in Australia. This allows Clients to be assessed against the health requirements of Migration Legislation (i.e. to assess public health risks) and ensures Clients are fit-to-fly prior to departure. Table 2 provides an outline of Client health checks.

Health checks are conducted by offshore physicians on behalf of the Department and recorded in Department's Health Assessment Portal (HAP).

Table 2: Health checks

Immigration Medical Examination (IME) <i>Pre visa grant</i>	• Mandatory health examination undertaken as part of a Client's visa application. • Involves a general medical examination that may include a chest x-ray to screen for Tuberculosis, a HIV test, Hepatitis B test and any other additional tests as determined by the offshore physician. • Also includes an assessment of medical resettlement needs (e.g. mobility restrictions).
Departure Health Check (DHC) <i>Post visa grant</i>	• Voluntary health check undertaken within 72 hours prior to a Client's confirmed departure for Australia. • Offered in most places where humanitarian visa holders depart to Australia. • Involves a clinical consultation and physical examination (following review of the Client's medical history), including a mental health screening and update of medical resettlement needs if required. • If a Client is not well enough to travel, departure is delayed and the Client is treated until they are assessed as being fit-to-fly.

(i) Health information in the HSP System

After a visa is granted, the IME information in HAP that is relevant to the delivery of settlement services is populated in the Client's health record in the HSP System. The Client health record is updated with further information if a DHC is completed.

(ii) Medical indicators

Medical indicators are used to alert Service Providers to Clients with serious medical conditions that require medical attention on arrival in Australia. Two types of medical indicators are used in the HSP System:

- **Potential Medical Issue (PMI)** – triggered when the IME indicates the Client has a serious medical condition, possibly requiring medical follow-up immediately on arrival. The medical issue is classified as 'potential' as it may be resolved by the time the Client arrives in Australia.

- **Critical Medical Issue (CMI)** – triggered when a DHC confirms the Client still has the serious medical condition that was identified at the IME, or a new serious medical condition, requiring either urgent on-arrival medical support or other types of additional medical support. Clients with a CMI may be accompanied on their journey to Australia by a medical escort and require a health appointment within 24 or 72 hours of arrival (see 2.2.1(c)).

Confirmation of whether a Client's PMI becomes a CMI is not always possible, given DHCs are not mandatory. In such cases, Service Providers must act on the information provided in the IME.

Within 72 hours of referring a Client with a PMI or CMI to a Service Provider, the Department will extract health reports from HAP, including additional details from the IME or DHC, and attach them to the Client record in the HSP System. Service Providers should review these reports to arrange appropriate on-arrival settlement support.

Associated HSP System task card:

- Health

(iii) Clients found to have complex health needs or disability

If a Client is found to have complex health needs in their PAA, such as a disability that will likely require an application to the National Disability Insurance Scheme (NDIS) following arrival, the Service Provider should turn their mind to whether the Client would benefit from being classified as Tier 3 prior to arrival. See 4.1.3 Client Tiering.

(iv) On-arrival Ambulance

Clients may require an ambulance immediately on their arrival to Australia where:

- the client's Immigration Medical Examination (IME) or Departure Health Check (DHC) states it is required due to a known health issue, or
- the client experiences a medical emergency during the flight to Australia.

If the client is in a location where they will be charged a fee for the ambulance transfer, the HSP will fund the cost of the ambulance insurance. If insurance cannot be obtained, the HSP will fund the cost of the ambulance transfer.

To seek reimbursement:

- where an IME or DHC indicates that a client requires an on-arrival ambulance transfer, the Service Provider should:
 - contact the ambulance provider (or private health insurer where relevant) to inquire if the client can obtain ambulance-only insurance, and
 - send a Task to NATO Policy in the HSP System:
 - i. detailing the cost of insurance and seeking Departmental approval before purchase (if the insurance can be obtained), or
 - ii. detailing why insurance cannot be obtained and requesting Departmental approval to fund the cost of the ambulance transfer.
 - in the case of ii. seek a fee waiver if possible.
 - submit an F25 (Miscellaneous Services) request in the HSP System (only if Departmental approval has been given) when an invoice is issued, and if applicable include details of the attempts to obtain a fee-waiver.
- where an on-arrival ambulance transfer is needed due to an inflight medical emergency, the Service Provider should:
 - contact the relevant ambulance service to inquire if the client is eligible to have the fee waived.

- if the entire fee cannot be waived, submit an F25 (Miscellaneous Services) request in the HSP System and include:
 - i. a copy of the invoice, and
 - ii. details of the attempts made to obtain a fee-waiver.

For clarity, the HSP will only cover ambulance costs for clients who require it at their point of entry to Australia. Ambulance costs that are incurred by the client at any other point during their time in the HSP are the responsibility of the client and will not be covered by the Department.

(v) Health Undertaking

A Health Undertaking is an agreement signed by a Client with a significant health condition to seek medical treatment upon arrival in Australia. The need for a Health Undertaking is determined by a Medical Officer of the Commonwealth in order for the Client to meet the health requirement of their humanitarian visa.

Health Undertakings are primarily designed to help ensure that Clients with a significant health condition that may pose a public health risk are followed up by onshore health providers, when necessary. This mainly relates to Clients who might be at increased risk of developing active tuberculosis, although Clients with some other medical conditions (e.g. HIV, Hepatitis B or C, Syphilis, or Hansen's Disease), may also require follow up.

In signing the Health Undertaking, the Client agrees to contact the Department's Health Undertaking Service within four weeks of their arrival in Australia, attend an appointment with a health authority clinic for a follow-up health examination, and undergo any course of treatment or investigation that the health clinic directs. Further information regarding Health Undertakings is available from the Department's [website](#).

Where a Client has a Health Undertaking, it is flagged on their health record in the HSP System.

(vi) Providing a Client's HAP ID to medical practitioners in Australia

Medical practitioners in Australia may access a reduced version of HAP (known as HAPLite) via the internet when a Client is referred to them by a Service Provider. HAPLite health records are accessed using the Client's HAP ID.

When the Service Provider refers a Client for a health appointment they must provide the Client's HAP ID to the medical practitioner. This applies for all Clients, including those with a PMI or CMI.

The Service Provider must provide the Client's HAP ID as soon as possible after the Client's referral. This ensures medical practitioners are aware of any critical or potential medical concerns, allows them to triage cases and prepare for any necessary medical support prior to the Client's arrival. Service Providers must also advise the medical practitioner when a DHC has been completed for the Client. This allows medical practitioners to review any updated health information in HAPLite prior to the Client's health appointment.

Immediately following the provision of the HAP ID to a medical practitioner or Refugee Health Service, Service Provider staff should submit a Task to the Department noting "*HAP ID provided to *name of medical practice or refugee health service* on *date**". If the GP or Refugee Health Service is unable to see the client after the Task has been sent and the Client is referred to another provider, a new Task is to be sent in the HSP System.

For SHP Clients, if the Proposer has agreed to arrange health appointments, Service Providers should provide the Proposer with:

- the Client's HAP ID and request it be passed on to the medical practitioner, and
- a copy of the 'Frequently Asked Questions: Health Assessment Portal (HAP) for Refugee Clinics and General Practitioners (GPs)' document (available from GovTEAMS).

If medical practitioners contact Service Providers regarding HAPLite access, Service Providers should refer them to the HAPLite Organisation Administrator in their state. Medical practitioners can obtain the contact details of their Administrator by emailing [s222\(1\)\(a\)\(ii\)@homeaffairs.gov.au](mailto:s222(1)(a)(ii)@homeaffairs.gov.au).

From time to time, the Department may contact Service Providers to confirm that a medical practitioner with HAPLite access is being referred HSP Clients for onshore health appointments and/or medical follow-up.

(vii) Support to access to the National Disability Insurance Scheme (NDIS)

Assessments

Clients who have a disability or permanent impairment that requires disability-specific support to complete daily life activities may be eligible to receive support through the NDIS. Clients with a disability may require health assessments to support their NDIS application.

Service Providers can seek approval for the cost of these assessments in these situations by submitting an F24 Purchased Services request prior to appointments.

Disability support

If a Client has a need for urgent disability support while waiting for NDIS support to commence, it may be appropriate for Service Providers to seek approval for costs through the Purchased Services (F24) request process.

To support an F24 request in these circumstances Service Providers need to provide a statement to demonstrate:

- they have investigated the availability of suitable free services offered through other government programs or other channels, and found that the client cannot access them,
- the disability support is essential to maintain the Client's day-to-day wellbeing,
- supporting evidence provided by Refugee Health Services, or other medical practitioner, obtained during pre-arrival assessments.

(c) Travel escorts

The role of travel escorts is to accompany and support Clients with high needs from their point of departure overseas to their settlement location in Australia. There are two types of travel escorts:

- medical escorts
- operational escorts.

IOM is responsible for arranging travel escort services following approval by the Department. IOM will arrange accommodation for travel escorts for the duration of their stay in Australia and is responsible for all of the travel escort's expenses.

(i) Medical escorts

Medical escorts accompany Clients with high medical needs to provide any medical assistance that is required during travel. Medical escorts remain with the Client until hand-over to an appropriately qualified medical practitioner in Australia.

The Service Provider is responsible for facilitating the hand-over of the Client from the medical escort to the medical practitioner.

If the Client's hand-over to the medical practitioner is on the day after arrival, IOM will arrange for the medical escort to stay overnight in the same accommodation or nearby to the Client in order to provide medical support and monitoring. However, it should be noted that medical escorts are unable to provide medical treatment after arrival in Australia due to licensing restrictions.

For Clients with a transit leg in Australia, the medical escort is responsible for decisions regarding whether a Client requires immediate medical intervention (e.g. direct transfer to hospital) or whether medical intervention can occur once the Client arrives at their settlement location.

If the medical escort determines that immediate medical assistance at the point of transit is required, it may be necessary for the Service Provider to provide overnight accommodation for the Client and accompanying family members (see 3.1.1(b)).

If a Client is arriving with a medical escort, the escort's name, language proficiency and global roaming phone number is recorded in the Client Critical Medical Issue screen in the HSP System. To assist IOM make arrangements for the escort, the Service Provider is required to provide the following details in the Critical Medical Issue screen:

- medical appointments
- on-arrival accommodation, and
- on-arrival arrangements.

For Clients with a transit leg, the transit Service Provider is required to provide details of the Client's transit arrangements in the Critical Medical Issue screen.

The Service Provider may provide feedback to the Department regarding the performance of medical escorts by emailing [s.22\(1\)\(a\)\(ii\)@homeaffairs.gov.au](mailto:s.22(1)(a)(ii)@homeaffairs.gov.au). The email should be titled 'Feedback on Medical Escort - HAP ID [insert Client's HAP ID]'.

(i) Operational escorts

Operational escorts accompany Clients with high needs who require support during their travel to Australia, but not specific medical assistance. The need may be related to age, language difficulties, a background of significant hardship, or unfamiliarity with urban environments.

Operational escorts remain with the Client until hand-over to the Service Provider.

Multiple escorts may be required for a group. This may be necessary when a large group of Clients are travelling together, but its members have different settlement locations.

Where IOM has provided the operational escort's name, it will be recorded in the Travel screen on the Client record in the HSP System.

(ii) Travel escorts for SHP Clients

Proposers are responsible for the cost of travel escorts for SHP Clients. If a Proposer approaches the Service Provider seeking assistance with booking travel for a SHP Client, the Service Provider may inform the Proposer of IOM's prepaid migration travel program. Further information is available from the IOM Australia website - <https://australia.iom.int/travel-assistance-migration-australia-iom-australia>.

(d) Change of settlement location before the Client has arrived

It may be necessary for a Client's referral to a settlement location to be changed prior to their arrival in Australia. For example, where:

- the Client identifies or confirms a previously unidentified onshore link located in a different settlement location
- an onshore link or Proposer has moved to a new settlement location
- a health need arises that cannot be met in the original settlement location
- the Service Provider advises it is unable to settle the Client due to capacity issues (e.g. accommodation shortages)
- there was a Departmental error in making the initial referral.

If the Service Provider believes that a Client should be referred to a new settlement location for any of the above reasons, and the Client has not yet arrived in Australia, it should contact the Department by sending a Task to NATO Referral in the HSP System. The Task should detail the reason for the re-referral.

Requests to change the settlement location should be avoided if a Client's travel is booked and they are arriving within the scheduled Arrival Window.

Requests to re-refer a Client will not impact on a Service Provider's Annual Indicative Referral Level.

(i) Processing a change of settlement location pre-arrival

If travel is not yet booked, or if travel is booked and it is more than seven days from the Client's scheduled travel, the Department will process the change of settlement location as a re-referral in the HSP System.

If travel is booked, and it is within seven days of the Case's scheduled travel, the Department will process the change of settlement location as a transfer in the HSP System. This allows the initial Service Provider (and/or transit Service Provider, if applicable) to claim a cancellation payment (see 2.2.1(f)). With the Department's approval, this may include an I09 claim (arranging on-arrival accommodation) if the Service Provider had already secured on-arrival accommodation. See 2.2.1(i).

For guidance regarding a change of settlement location after a Client has arrived in Australia, see 8.1.

(e) Changes or delays to scheduled travel

Clients may experience travel delays en-route to Australia, for example due to failing to board their departing flight, rescheduling of connecting flights or bad weather affecting flights. Service Providers should be sufficiently flexible to unavoidable changes to arrival times.

The Department will inform the Service Provider if it becomes aware of offshore issues that may delay Client travel.

(f) Cancellations (C01, C02, C03)

Occasionally, Clients do not travel to Australia as expected. Reasons may include:

- a medical condition that affects the scheduled departure
- cancellation due to death of a family member
- unavailability of travel escorts
- re-referral to a new settlement location prior to arrival.

(i) Cancellation (less than one calendar weeks' notice) (C01)

Where cancellation occurs with less than one calendar weeks' notice, the Service Provider is eligible to claim a cancellation payment. The Service Provider may also be eligible to request an I09 claim if on-arrival accommodation has been secured. A task should be submitted to the Department for approval. If the Service Provider received an I09 payment as a result of cancelled or delayed travel, approval for a further I09 claim once the Client arrives can be sought through a service cap increase request.

Claiming instructions:

Reference ID: C01

Claim point: Notification from Department of cancellation

Basis of claim: Per Group, according to Band size

Maximum no. of instances: 1

Other: If a Pre-Arrival Assessment (I01) has been claimed, it must be withdrawn in the HSP System before C01 is claimed.

Associated HSP System task card:

- Claiming for Services

(ii) Cancellation of transit assistance with accommodation, with less than 48 hours' notice (C03)

Where a cancellation relating to transit assistance with accommodation (see 3.1.1(b)) occurs with less than 48 hours' notice, the Service Provider is eligible to claim a cancellation payment.

Claiming instructions:

Reference ID: C03

Claim point: Notification from Department of cancellation

Basis of claim: Per Group, according to Band size

Maximum no. of instances: 1

Other: Where a transit Service Provider becomes the Service Provider in the Client's settlement location, it is ineligible to claim for transit cancellation.

Associated HSP System task card:

- Claiming for Services

(iii) Cancellation of transit assistance without accommodation with less than 24 hours' notice (C02)

Where a cancellation relating to transit assistance without accommodation (see 3.1.1(a)) occurs with less than 24 hours' notice, the Service Provider is eligible to claim a cancellation payment.

Claiming instructions:

Reference ID: C02

Claim point: Notification from Department of cancellation

Basis of claim: Per Group, according to Band size

Maximum no. of instances: 1

Other: Where a transit Service Provider becomes the Service Provider in the Client's settlement location, it is ineligible to claim for transit cancellation.

Associated HSP System task card:

- Claiming for Services

(iv) **Claiming cancellation payments for SHP Clients**

For SHP Clients, in addition to submitting a claim for the relevant cancellation service (i.e. C01, C02 or C03) in the HSP System, the Service Provider must send a Task to NATO Policy in the HSP System that includes:

- details of the Client's travel itinerary
- the immediate services that the Proposer was unable to provide to the Client (hence the need for Service Provider assistance), and
- the date the Proposer informed the Service Provider that the Client's travel had been cancelled.

The Service Provider is not required to attach supporting documentation to the Task at the time of claiming. However, the Service Provider must retain this documentation should the Department request it as part of compliance activities.

On receipt of the Task, the Department will assess the claim and approve or reject it. The HSP System will automatically send an email notification to the Service Provider advising it of the outcome.

Service Providers should note that the above requirements relate to SHP Clients only. Service Providers are not required to submit a Task to accompany claims for cancellation payments for Refugee Clients.

2.3. Specialised and Intensive Services referrals

A Specialised and Intensive Services (SIS) referral may be initiated by any individual or organisation for a person to receive SIS under the HSP. SIS referrals may be either internal or external to the HSP.

2.3.1. Internal SIS referrals

An internal SIS referral relates to an existing HSP Client and can only be initiated by the Client's HSP Service Provider. Referrals can be considered prior to a client's arrival as part of the Pre-Arrival Assessment, or after they have arrived. For further guidance, see 4.1.3(a).

2.3.2. External SIS referrals

An external SIS referral may be initiated by any organisation or individual (i.e. it is not limited to HSP Service Providers) using the SIS Referral Form available from the Department's [website](#).

On receipt of a complete SIS Referral Form, the Department will assess the person's eligibility and provide a decision to the referrer within two business days.

(a) Processing external SIS referrals involving new HSP Clients

Where a person is approved for SIS, and they are not an existing HSP Client, the Department will refer them to the Service Provider in the relevant Contract Region in the HSP System. Information available in the HSP System will include the Client's:

- biographical data
- contact details
- SIS Referral Form.

Upon approval, the Client will be classified as Tier 3 in the HSP System, prior to referral to the relevant Service Provider.

(b) Processing external SIS referrals involving existing HSP Clients

Where an external SIS referral is approved, and the person is an existing HSP Client, the Client will be reclassified as Tier 3 in the HSP System. A Task will be sent to the Service Provider informing it of the new external SIS referral.

Where an external SIS referral is rejected, and the person is an existing HSP Client, a notification will be sent to the referrer by the Department informing them of this decision.

3. Arrival

The Arrival stage of the HSP Case Management Framework ensures that Clients who enter the HSP as a Humanitarian Program referral are provided with the practical support they need when they first arrive in Australia.

As part of this stage, and on a needs basis, the Service Provider must provide Clients who enter the HSP as a Humanitarian Program referral with Immediate Services.

Unless stated otherwise in the Guidelines, Clients who enter the HSP as a SIS referral may also receive Immediate Services, subject to Departmental approval. Service Providers should seek Departmental approval by submitting a Service Cap Increase request for the relevant service (see 8.5).

3.1. Immediate Services

Immediate Deliverables – Post arrival

- A Client is met and welcomed on-arrival to Australia
- A Client's immediate cultural and religious, nutritional, hygiene, clothing and footwear needs are met
- A Client is transported to suitable accommodation
- A Client knows what to do in an emergency situation
- A Client's immediate health needs are met
- A Client can utilise translating and interpreting services
- A Client is registered with Centrelink, Medicare and bank
- A Client is orientated to local services

3.1.1. Transit assistance (I02, I03)

On the journey from overseas to their settlement location in Australia, Clients may require assistance to transit through one or more Contract Regions.

Service Providers that are required to provide transit assistance to Clients will be referred a transit case by the Department through the HSP System.

(a) Transit assistance without accommodation (I02)

The Service Provider must provide transit assistance to Clients requiring help with their connecting flights or onward travel arrangements. This may include:

- assistance to clear customs and quarantine
- emergency medical assistance
- assistance to check-in and board connecting flights
- provision of food/refreshments
- provision of baby care items
- provision of emergency clothing/footwear
- arrangement of transport.

The transit Service Provider must contact the Service Provider in the Client's settlement location directly by phone if there are changes to travel arrangements or any other requirements not previously known (e.g. non-urgent medical issues or additional language requirements).

(i) Missed or cancelled connecting flights in Australia

If Clients miss their scheduled connecting flight in Australia (e.g. due to the delayed arrival of their international flight, or a Client's connecting flight is cancelled), the airline operator will typically make new arrangements and cover any expenses incurred.

However, in circumstances where the airline operator is not liable to cover expenses (e.g. if the international and domestic flights were booked separately), the Client will require new connecting flights to be arranged. Service Providers should not arrange and pay for these flights themselves. Instead, Service Providers must contact IOM Canberra by calling 02 6267 6600. If calling outside of business hours, the Service Provider should contact IOM Canberra staff members s.22(1)(a)(ii) or s.22(1)(a)(ii). IOM will arrange new connecting flights and notify the Service Provider directly.

Where Clients miss a connecting flight in Australia, or their flight is cancelled, the transit Service Provider must, as soon as possible, notify the Service Provider in the Client's settlement location directly by phone. For UHMs, the transit Service Provider should also inform the Department's UHM and Guardianship Section by emailing s.22(1)(a)(ii) @homeaffairs.gov.au.

As a result of a missed flight or cancellation, a Client may be required to spend a night at the transit location. Where this occurs, the transit Service Provider must provide accommodation as per the standards set out at 3.1.1(b) and is eligible to claim I03 (Transit assistance with accommodation) instead of I02 (Transit assistance without accommodation).

(ii) Medical issues

The Service Provider must assist Clients to access appropriate medical services during transit, if required.

If a Client experiences difficulty accessing health services because they do not have a Medicare card, the transit Service Provider should complete and provide a Medicare Eligibility Letter (available from GovTEAMS) to the healthcare provider. Service Providers should note that the Medicare Eligibility Letter does not replace the requirement to register Clients with Medicare.

If a major medical incident such as hospitalisation occurs, the transit Service Provider must notify the Service Provider in the Client's settlement location directly by phone. For UHMs, the transit Service Provider must also inform the Department's UHM and Guardianship Section by emailing s.22(1)(a)(ii) @homeaffairs.gov.au. Minor medical issues can be relayed to the Service Provider in the Client's settlement location when the Client arrives at their settlement location.

Where flights are missed due to medical needs of the Client in the transit location, the transit Service Provider must, as soon as possible, notify the Service Provider in the Client's settlement location about the delay directly by phone. Should new flights need to be booked and paid for, the transit Service Provider must contact IOM (see 3.1.1(a)(i) for IOM contact information).

In the circumstances of a medical emergency requiring accommodation at the point of transit, the transit Service Provider must provide accommodation as per the standards set out at 3.1.1(b) and is eligible to claim I03 (Transit assistance with accommodation) instead of I02 (Transit assistance without accommodation).

(iii) Clients with a Critical Medical Issue

Where a Client has a Critical Medical Issue, they are likely to be traveling with a medical escort who is responsible for providing medical care and support to the Client during their travel to Australia (see 2.2.1(c)(i)).

If immediate medical assistance at the point of transit is required, then it may be necessary for the transit Service Provider to provide accommodation for the Client as per the standards set out at 3.1.1(b). In these circumstances, the Service Provider is eligible to claim I03 (Transit assistance with accommodation) instead of I02 (Transit assistance without accommodation). IOM is responsible for the accommodation costs of the medical escort, not the Service Provider.

(iv) Excess baggage

In the event that a Client has excess baggage, the Client is responsible for any charges levied by the carrying airline. Clients are informed of this prior to departure through Australian Cultural Orientation (AUSCO) classes and other information provided by the Overseas Post and IOM.

Claiming instructions:

Reference ID: I02

Claim point: Provision of transit assistance without accommodation

Basis of claim: Per Group, according to Band size

Maximum no. of instances: 1

Associated HSP System task card:

- Claiming for Services

(b) Transit assistance with accommodation (I03)

If Clients will be in transit for more than eight hours between their arrival in Australia and their onward travel, in addition to the support detailed at 3.1.1(a), the Service Provider must provide Clients with accommodation. The accommodation must:

- be at, or close to, the transit airport
- be a minimum of two-and-a-half star hotel rating, and
- have adequate beds for all Clients.

For UHMs, or minors travelling alone, the minor must not be placed in shared accommodation with adult Clients unless the adult is the UHM's recognised carer.

The Service Provider must transport Clients and their luggage to their accommodation and then return the Clients and their luggage to the airport (or other departure point) in time to make their connecting travel.

(i) Transport

All transportation provided or arranged by the Service Provider must comply with state or territory motor vehicle and licensing standards. This includes baby seats and child restraints, where required.

(ii) Missed or cancelled connecting flights in Australia

As a result of a flight cancellation, a Client may be required to spend a further night at the transit location. Where this occurs, the transit Service Provider must provide accommodation as per the standards set out at 3.1.1(b). In this circumstance, the Service Provider is eligible to claim an additional instance of I03 (Transit assistance with accommodation) by submitting a Service Cap Increase request (see 8.5).

Claiming instructions:

Reference ID: I03

Claim point: Provision of transit assistance with accommodation

Basis of claim: Per Group, according to Band size

Maximum no. of instances: 1

Associated HSP System task card:

- Claiming for Services

3.1.2. Initial Services (I16)**(a) Meeting on-arrival and logistical needs**

The Service Provider must meet Clients on arrival in Australia no later than the arrival time as per their travel itinerary available through the HSP System.

The Service Provider should arrange for airside access, where possible, to allow staff to assist Clients through customs and quarantine.

The Service Provider must meet the Client's on-arrival logistical needs, which may include:

- **Cultural and religious needs** – for example, access to a prayer room or the provision of a female interpreter for a Woman at Risk Client
- **Food, clothing/footwear and personal hygiene** – for example, cold weather clothes, baby items, sanitary products
- **Transportation to accommodation** – vehicles must comply with state or territory vehicle and licensing standards and be appropriate to the Client's needs (e.g. suitable luggage space, baby seats and child restraints, wheelchair accessibility).

The Service Provider must ensure the presence of an interpreter or bilingual caseworker, or where appropriate, access to a telephone interpreter.

(b) Client safety

(i) Emergency services

The Service Provider must provide to Clients, in their first language, visual aids and details of emergency services (e.g. police, fire, and ambulance) and how to contact them.

The Service Provider must also provide instructions to Clients on how they can contact their Service Provider, including after-hours arrangements.

(ii) Property induction

The Service Provider must provide a property induction to Clients in their own language on arrival at their accommodation, including advising Clients if the accommodation is temporary.

The induction must include safety instructions (e.g. the use of keys and locks, operation of fire alarms, safe use of hot water, electrical and gas appliances) and an emergency evacuation plan for the accommodation.

The Service Provider must ensure that Clients have the knowledge and skills to safely utilise their accommodation and its facilities by giving explanations and practical examples on how to use, among other things:

- cooking equipment and appliances
- heating and cooling appliances
- refrigerator, washing machine and dishwasher
- household cleaning facilities.

Where Clients stay in on-arrival accommodation not sourced by the Service Provider (e.g. SHP Clients staying with their Proposer), it is the responsibility of the individual who arranged that accommodation to conduct the property induction, not the Service Provider.

(iii) Interpreting services

The Service Provider must provide to Clients, in their first language, visual aids and details of how to access an interpreter. This should include an 'I need an interpreter card' (available from the Translating and Interpreting Services [website](#)), or similar product containing the contact details of an interpreting service provider.

(c) Mobile phone

On a needs basis, the Service Provider must provide each Case with a smartphone and access to cellular data to make and receive calls and access online services for the first six weeks after their arrival. The mobile phone is to remain the Client's property.

(i) Provision of mobile phone to SIS referrals / provision of additional mobile phone to Humanitarian Program referrals

Subject to the approval of the Department, the Service Provider may provide a mobile phone to Clients who enter the HSP as a SIS referral, and provide an additional mobile phone to Groups who enter the

HSP as a Humanitarian Program referral, in exceptional circumstances. For example, where concerns are expressed around the safety of a Client, or a Group is large in size and has multiple adult members.

To seek approval, the Service Provider should send a Task in the HSP System to:

- NATO Tier 3 (for Tier 3 Clients), or
- NATO Policy (for all other Clients).

The Task must include details of the Client's exceptional circumstances, and the cost of the phone (and data, if applicable).

If approved, the Service Provider will be invited to submit a F25 (Miscellaneous Services) request in the HSP System to be reimbursed for costs incurred (see 5.11).

(d) On-arrival food and products

The Service Provider must arrange a package of culturally appropriate goods (including fresh food products, essential personal hygiene items, basic cleaning products, and baby products, if applicable) for the Group's arrival at their accommodation.

The Service Provider must ensure the package provided is sufficient to last seven days and be suitable to the size of the Group.

(e) Essential registrations

Within three business days of a Client arriving in their settlement location, the Service Provider must arrange appointments, including assistance with document preparation and transport, for the Client to:

- register with Centrelink
- register with Medicare, and
- open a bank account with an institution registered with the Australian Prudential Regulation Authority (APRA).

For details about Services Australia's process for registration with Centrelink and Medicare, refer to attachment G – Services Australia Refugee Service Offer.

If the Client has not received their phone appointment with Services Australia by day three, the Service Provider should contact [s.22\(1\)\(a\)\(ii\)@servicesaustralia.gov.au](mailto:s.22(1)(a)(ii)@servicesaustralia.gov.au).

If a Client has not received their first income support payment within five days of arrival and the Service Provider has already escalated the case to [s.22\(1\)\(a\)\(ii\)@servicesaustralia.gov.au](mailto:s.22(1)(a)(ii)@servicesaustralia.gov.au), the Service Provider should contact their Contract Manager via email. Details should include the Client's HSP ID, name, date of birth, the client's date of arrival and the date the client's registrations forms were emailed to [s.22\(1\)\(a\)\(ii\)@servicesaustralia.gov.au](mailto:s.22(1)(a)(ii)@servicesaustralia.gov.au).

Their Contract Manager will escalate the Client's case with Services Australia.

(i) Essential registrations for SHP Clients

Proposers are expected to arrange essential registrations for SHP Clients. Where a Proposer is unable to complete all registrations within three business days, the Service Provider should discuss with the Proposer to address any barriers.

In circumstances where a Proposer is unable to assist with all registrations, the Service Provider must fill the service gap.

(ii) ImmiCards

To assist Clients to complete essential registrations, they will need to provide appropriate identification. For most Clients this will be an ImmiCard issued by the Department for the purposes of travelling to Australia.

Where a Client has lost their ImmiCard, or their personal details are incorrect, they can apply for a new ImmiCard through the Department's [website](#).

Claiming instructions:

Reference ID: I16

Claim point:

- Group has been met at the airport on arrival to Australia and logistical needs met
- Provision of visual aids and details of emergency services, property induction and how to access an interpreter
- Provision of mobile phone
- Provision of on-arrival food and products
- Completion of Centrelink, Medicare and bank registrations

Basis of claim: Per Group, according to Band size

Maximum no. of instances: 1

Associated HSP System task card:

- Claiming for Services

3.1.3. Health (F05, I08)**(a) Immediate health needs (F05)**

The Service Provider must address any immediate health needs (i.e. within 72 hours of arrival in Australia) of the Client. This may include:

- initial management of medical indicators, and/or
- unforeseen urgent health issues.

The Service Provider may be required to accompany a Client to a hospital or medical centre, or assist the Client to attend specialist medical appointments.

If a Client experiences difficulty accessing health services because they do not have a Medicare card, the Service Provider should complete a Medicare Eligibility Letter (available from GovTEAMS) and provide it to the health provider. Service Providers should note that the Medicare Eligibility Letter does not replace the requirement to register Clients with Medicare.

(i) Assisting SHP Clients with immediate health needs

Proposers are responsible for assisting SHP Clients with their immediate health needs. However, where the Service Provider identifies that the Proposer does not have the capacity to address the immediate health needs of the Client, the Service Provider must fill the service gap.

(ii) Meeting medical escorts

The Service Provider must meet all Refugee Clients with a medical escort at the initial point of arrival and facilitate the handover of these Clients to a medical practitioner (see also 2.2.1(c)(i)). For SHP Clients, if the Proposer does not have the capacity to undertake this task, the Service Provider must fill the service gap.

Claiming instructions:

- Refer to claiming instructions at 5.2.2

(b) Mobility aids (I08)

The Service Provider must provide mobility aids for Clients who require them on-arrival in Australia.

Service provision must be based on the mobility needs of the Client as identified by:

- pre-arrival health assessments, and/or

- other relevant information used to determine the Client's on-arrival mobility needs (e.g. information provided by the Proposer of an SHP Client).

Service Providers will be reimbursed for the cost of purchasing or hiring mobility aids up to the maximum amount as per the HSP Contract. The Client is responsible for all costs over the maximum reimbursement amount. Any purchased items will remain the property of the Client.

Mobility aids must meet relevant Australian standards and may include, but are not limited to:

- walking sticks
- crutches
- walking frames
- bathroom commodes/shower chairs
- non-electric wheel chairs.

Reference ID: I08

Claim point: Provision of mobility aid

Basis of claim: Per Client

Maximum no. of instances: 1 (up to the maximum reimbursement amount as stated in the HSP Contract)

Associated HSP System task card:

- Claiming for Services

(c) Health Undertaking (I13)

Within one week of a Client arriving in Australia, the Service Provider must ensure the Client has registered any Health Undertaking they signed to meet the health requirement for the grant of their visa (see 2.2.1(b)(iii)). This may include following up with a Proposer of an SHP Client to ensure they have completed the registration.

Information on how to register a Client's Health Undertaking is available from the Department's [website](#).

Claiming instructions:

Reference ID: I13

Claim point: On registration of Client's Health Undertaking

Basis of claim: Per Client

Maximum no. of instances: 1

Associated HSP System task card:

- Claiming for Services

3.1.4. Accommodation (I09, I10)

(a) Arranging on-arrival accommodation (I09)

On a needs basis, the Service Provider must ensure that it provides accommodation for Clients upon their arrival in Australia in a property that meets the standards and conditions set out in Attachment C.

On-arrival accommodation is defined as temporary accommodation that Clients are placed in on arrival to their settlement location, prior to moving into a property where they enter into an initial lease agreement (see 5.1.2). Service Providers can claim I09 where Clients on-arrival accommodation becomes their initial lease agreement accommodation.

Where the Client resides with a Proposer, onshore link, family or friends on arrival to their settlement location, the Service Provider is not eligible to claim I09.

On-arrival accommodation must be fully furnished (suitable to the family size, or the number of Clients living in the property, and local climate) with all fittings and equipment functioning properly and contain the following items as a minimum:

- beds, including mattresses with mattress protectors for each Client
- bedding (pillows, doonas or blankets) and linen (sheets, pillowcases and towels) for all Clients (these must be clean and in good condition)
- a wardrobe or set of drawers for each bedroom
- a dining table and adequate chairs for all occupants (accessible in a communal dining area for group housing arrangements) or rug (if culturally appropriate)
- lounge chairs or sofas (accessible in a communal living area for group housing arrangements)
- glassware, crockery, cutlery, and pots and pans, and cooking utensils (accessible in a communal kitchen area for group housing arrangements)
- access to a washing machine
- a refrigerator (accessible in a communal kitchen area for group housing arrangements)
- a heater or fan (depending on local climate and season) (accessible in a communal living area for group housing arrangements)
- window coverings for all windows
- cleaning equipment (including mop, broom, bucket, dustpan and broom, dish brush, tea towels and dish cloths) (accessible in a communal area for group housing arrangements)
- a clock.

(i) Additional instances of on-arrival accommodation

Clients who relocate after receiving on-arrival accommodation (I09) are not eligible to receive an additional instance of the Service, however the Department will consider additional instances on a case-by-case basis. See 8.1 – Client Transfers.

The Department may consider approving an additional instance of I09 through a Service Cap Increase request (see 8.5) if the Client's relocation is due to a Departmental error when determining the Client's initial settlement location.

Claiming instructions:

Reference ID: I09

Claim point: When Case enters on-arrival accommodation arranged by the Service Provider. In circumstances where a Client's on-arrival accommodation becomes their initial lease agreement accommodation, the Service Provider is eligible to claim this Service. The claim point is on commencement of the lease agreement arranged by the Service Provider.

Basis of claim: Per Case, according to Band size

Maximum no. of instances: 1

Other:

Where Clients reside with a Proposer, onshore link, family or friends, the Service Provider is ineligible to claim for this Service.

Associated HSP System task card:

- Claiming for Services

(b) Initial Accommodation Support (I10)

The purpose of the Initial Accommodation Support (IAS) is to ease the financial pressures Clients are likely to experience shortly after their arrival in Australia.

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The Service Provider must arrange and pay the full costs for suitable accommodation, including utilities, for all Clients needing to reside in accommodation arranged by the Service Provider (i.e. the Client is not residing with their Proposer, onshore link, family or friends) for their first 28 days in Australia that meets the standards and conditions set out in Attachment C.

At the conclusion of the IAS period, Clients are responsible for the payment of full market rent and utilities to the Service Provider, agent, or property owner, as applicable to their particular accommodation arrangements.

(i) Pro-rata IAS payments

If a Client voluntarily relocates to another Contract Region within the first 28 days of arrival in Australia:

- the initial Service Provider may claim a pro-rata IAS payment based on the amount of days the Client was in the on-arrival accommodation in the initial Contract Region, and
- the receiving Service Provider is able to claim a pro-rata IAS payment for the number of days remaining in the Client's initial 28 day period.

Service Providers are also entitled to receive a pro-rata IAS payment if Clients who initially reside with a Proposer, onshore link, family or friends, but are later required to move to separate accommodation in their initial Contract Region within the first 28 days of arrival. For example, if an SHP Client moved into accommodation arranged by the Service Provider 10 days after arrival, the Service Provider may claim a pro-rata IAS payment for the remaining 18 days.

(ii) Clients who enter the HSP as a SIS referral

Clients who enter the HSP as a SIS referral are not eligible for I10 (IAS).

Service Providers must not provide I10 (IAS) to such Clients unless directed to do so by the Department.

(iii) Additional instances of IAS

Clients are not eligible to receive an additional instance of I10 (IAS).

Service Providers must not provide an additional instance of I10 (IAS) to Clients unless directed to do so by the Department.

Claiming instructions:

Reference ID: I10

Claim point: On payment of the Initial Accommodation Support costs (28 days rent and utilities)

Basis of claim: Per Case, according to Band size

Maximum no. of instances: 1

Associated HSP System task card:

- Claiming for Services

3.1.5. Settlement Services Orientation

Settlement Services is the first topic of HSP Orientation. It is categorised as an Immediate Service in recognition that Clients will require some of the content covered in this topic (e.g. Orientation to local services) immediately after their arrival in Australia and prior to the establishment of their case management plan.

On a needs basis, the Service Provider must deliver the Settlement Services Orientation Topic to Clients aged 15 years and over in accordance with the HSP Orientation Guidelines (available from GovTEAMS). Clients must be supported to achieve the three Key Outcome levels of awareness, knowledge and application.

Table 3: Key Outcomes – Settlement Services Orientation Topic

Level	Key Outcomes – Settlement Services Orientation Topic
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Awareness	• Clients are aware there are a number of government and non-government services available to them. • Clients are aware they need to make appointments in order to access most services.
Knowledge	• Clients know which services to go to for different needs. • Clients know that a free interpreting service is available to them. • Clients know they and their families are eligible to have up to 10 specified personal documents translated into English within the first two years of their eligible visa grant date. • Clients know why it is important to be punctual for appointments, and the consequences of being late.
Application	• Clients can independently make an appointment with the appropriate service (e.g. Centrelink or a doctor) by using the telephone or in person (with or without the use of an interpreter).

Claiming instructions:

1. For Clients who arrived/entered the HSP prior to 1 March 2022

Method: Claims for this Service must be submitted via the HSP System. See HSP System task card – Claiming for Services.

Reference IDs: I15b, I15c

Claim point: I15b: Client has achieved the 'knowledge' Key Outcomes of the Settlement Services Orientation Topic

I15c: Client has achieved the 'application' Key Outcome of the Settlement Services Orientation Topic

Basis of claim: Per Client

Maximum no. of instances: 1

Other: A Service Provider can only claim for the achievement levels that it has assisted the Client to achieve.

2. For Clients who arrived/entered the HSP on or after 1 March 2022

Method: Claims for this Service must not be submitted via the HSP System. Instead, Service Providers will be paid for the delivery of Orientation Services to eligible Clients for up to 12 months in the HSP via the Monthly Orientation Service Delivery Charge (MOSDC).

On the first business day of each month, the Department will calculate the number of eligible Clients for each Service Provider by Tier and advise each Service Provider via email.

Service Providers must then prepare an invoice and provide this to the Department via email at [s.22\(1\)\(a\)\(ii\)@homeaffairs.gov.au](mailto:s.22(1)(a)(ii)@homeaffairs.gov.au).

Subject to receipt of a correctly rendered invoice, the Department will reconcile and process the invoice.

Other: The MOSDC applies to eligible clients in the HSP for up to 12 months. Service Providers are not eligible to receive MOSDC payments for the delivery of Orientation Services to Clients who exit the HSP prior to 12 months in the program or to Clients who remain in the program beyond 12 months.

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4. Planning

Immediate Deliverables – Post Arrival

A Client has a case management plan in place

The Planning stage of the HSP Case Management Framework involves assessing a Client's circumstances and preparing a case management plan with the Client to identify the actions, responsibilities and timeframes needed to help the Client achieve the Foundation Outcomes.

The Foundation Outcomes are grouped under the following areas:

Figure 2: Foundation Outcome areas



4.1. Case management plan (G01)

The Case Manager must develop a case management plan for each Client. Case management plans must address the Client's needs on an individual basis, not on a Case or family basis.

For Clients who enter the HSP as a Humanitarian Program referral, the Service Provider must develop a case management plan within three weeks of the Client arriving in Australia.

For Clients who enter the HSP as a SIS referral, the Service Provider must develop a case management plan within five Business Days of receiving the referral through the HSP System.

(a) Tier 2 Clients who are reclassified as Tier 3

For Tier 2 Clients who are reclassified as Tier 3, the Service Provider is eligible to claim an additional instance of G01 to develop a Tier 3 case management plan reflecting the Client's new needs. This may involve an update to the Client's existing case management plan, or the development of a new case management plan.

The Tier 3 case management plan must be developed within five Business Days of the Service Provider receiving approval from the Department to reclassify the Client as Tier 3 (see also 6.2.2).

(b) Clients who transfer to a new settlement location with a different lead Service Provider

Where a Client has a case management plan, and they transfer to a new settlement location with a different lead Service Provider, the new lead Service Provider may claim an additional instance of G01 for developing a new case management plan for the Client.

The new lead Service Provider must develop a case management plan within three weeks of the Client being transferred in the HSP System.

4.1.1. Assessment

To inform the development of the case management plan, the Case Manager should conduct a needs assessment. The purpose of the assessment is to:

- begin to build a trusting working relationship with the Client
- identify Client strengths
- understand the Client's needs and any barriers to achieving the Foundation Outcomes
- in conjunction with Orientation Facilitators, assess the Client's proficiency against, and their capacity to achieve, the Key Outcomes of Orientation (see 4.1.1(a))
- establish mutual expectations between the Case Manager and the Client regarding roles and responsibilities
- understand the Client's individual short and long term goals (e.g. employment, education), and
- identify current supports (e.g. the Proposer of an SHP Client).

(a) Orientation

Orientation is a key component of the HSP that aims to provide Clients with the basic skills and knowledge to allow them to independently access services and achieve their Foundation Outcomes.

Clients should commence Orientation within six weeks of arrival in Australia, except Settlement Services Orientation which must begin on arrival (see 3.1.5). Each Orientation topic has a number of Key Outcomes written at three levels – awareness, knowledge and application. These provide a nationally consistent description of Orientation outcomes that Clients need to achieve to confidently and independently continue their settlement journey beyond the HSP. It is expected that Clients will build these skills cumulatively over the initial 12 months of the HSP.

All Clients aged 15 years and over may participate in Orientation. This includes Clients who turn 15 years old during the provision of the HSP. Service Providers are not eligible to claim Orientation Services for Clients aged under 15 years.

Detailed guidance on the delivery of the Orientation component of the HSP is provided in the Orientation Guidelines (available from GovTEAMS).

4.1.2. Planning

The Case Manager should:

- use the Client's needs assessment to develop the case management plan and determine the Client's Tier
- encourage the Client to be involved in developing the case management plan and ensure that the Client understands its contents
- provide the Client with a full explanation of HSP support, including the respective roles of the Service Provider and the Department
- encourage the Client to sign the case management plan to indicate their understanding of, and agreement to, its contents

- give a copy of the case management plan to the Client and suggest they share it with other support services they may interact with, and
- place a copy of the case management plan on the Client's case file.

The case management plan should include:

- the Foundation Outcomes relevant to the Client
- management of all health related needs, including referrals
- the HSP Services that will be delivered to the Client, and how each Service links to the achievement of the Foundation Outcomes relevant to the Client. This may include referral to the Settlement Engagement and Transition Support (SETS) program and other settlement support programs/services.

Clients can be referred to SETS at any point during their time in the HSP. However, services accessed by Clients under SETS must complement those available under the HSP, not duplicate them. This could include activities such as driver's licence sessions, homework centres and opportunities to practice conversing in English in small groups.

- the Key Outcome levels of Orientation that the Client needs to achieve
- responsibilities for implementing the plan, including those of the Case Manager and the Client
- identified timeframes for the implementation of HSP Services and progress towards Foundation Outcomes
- mechanisms, including timeframes, to track progress and enable review of the plan to identify what is working and where changes to the plan are needed, and
- consideration of exit or transition planning for when HSP Services to the Client will end.

The HSP is a needs based program, therefore not all Clients will necessarily require assistance to meet all Foundation Outcomes. The case management plan should record only those Outcomes relevant to the Client. This will then provide the basis for tracking the Client's progress against the relevant Outcomes throughout the case management, from establishment of the case management plan, through to review, and exit.

(a) Case management plans for children and young people

For Clients aged under 15 years, the development of the case management plan should be undertaken with the Client and their parent or recognised carer.

For UHMs, Service Providers should provide all relevant stakeholders who may also be providing services to or supporting the Client (e.g. state or territory child welfare authority or custodian) with the opportunity to be involved in the development of the case management plan.

(b) Case management plans for SHP Clients

In developing a case management plan, the Case Manager should endeavour to involve the Proposer.

4.1.3. Client Tiering

Case Managers are responsible for classifying Clients who enter the HSP as a Humanitarian Program referral into a Tier. Clients must be classified into a Tier according to their level of need and the complexity of their circumstances in accordance with the Guidelines for Client Tiering (see Attachment E).

The Case Manager is not required to classify Clients who enter the HSP as a SIS referral into a Tier. The Department classifies these Clients as Tier 3 before referring them to the Service Provider in the HSP System.

(a) Requesting approval to classify a Client as Tier 3 (internal SIS referral)

To request approval to classify a Client as Tier 3, the Service Provider must submit a SIS referral in the HSP System that includes details of the Client's:

- inability to independently engage with appropriate supports, and

- multiple or complex needs.

If a Client is identified as having complex health needs in their Pre-Arrival Assessment, for example a disability that will likely require an application to the National Disability Insurance Scheme (NDIS) following arrival, the Service Provider can request approval to classify a Client as Tier 3 from the time of their arrival. Supporting documentation (including any information provided by Refugee Health Services or local GPs) should be uploaded in the 'Attachments' screen of the Client record and must be referenced in the SIS referral.

The Department will notify the Service Provider of its decision through the HSP System within one to two working days of receiving the request. If approved, the Client's classification will be changed to Tier 3 in the HSP System.

For Clients who have exhausted the Tier 2 instances for relevant Foundation Services when referred into SIS, see 8.5.1 - Service Cap Increases for Tier 3 Clients.

(i) Children

While the HSP has a strong focus on assessing and responding to individual need, it also requires that the best interests of children and young people be considered as a priority. In the context of referring Clients to receive SIS (Tier 3), it is important to consider children as members of the family unit and recognise the inherent dependence children have on their parents.

Although a child might individually be assessed as not having multiple or complex needs, consideration must also be given to what impact a parent's complex issues may have on them. For example, a parent's complex health issues may result in the child having to take on significant caring duties and/or become socially withdrawn. In circumstances where a parent's complex issues are affecting a child, it is appropriate for the Service Provider to refer the child to receive SIS (Tier 3).

(ii) Requesting approval for multiple Clients in a Case

If approval is being sought to classify multiple Clients in a Case as Tier 3, the Service Provider must submit a separate referral for each Client via the SIS referral screen of the Client record in the HSP System. In doing so, the Service Provider must identify the issue/s impacting each Client from the drop-down menu. Information that is relevant to all Clients in the Case may be uploaded in the 'Attachments' screen of either the primary applicant's Client record or the Case record.

(iii) Timeframe of SIS

The delivery of SIS is intended to be a short-term intervention to help the Client access appropriate mainstream services and develop the necessary skills to manage their complex needs independently. It is expected that most Tier 3 Clients should be ready to exit the HSP (see Part 7), or be reclassified to a lower Tier (see 6.2.2), after receiving SIS for six months. The provision of SIS to a Client for more than six months is subject to Departmental approval (see 6.1.2).

4.1.4. Client reporting

As part of developing the case management plan, the Service Provider must record Client reporting (known as an Initial Review) in the HSP System. Further guidance on Client reporting under the HSP is at Attachment D.

Claiming instructions:

Reference ID: G01

Claim point: On development of case management plan on entry into the HSP, or reclassification to Tier 3, or transfer to a new settlement location with a different lead Service Provider.

Basis of claim: Per Client

Maximum no. of instances: Tier 2: 2
Tier 3: 3

Associated HSP System task cards:

- Recording a Client as Tier 2

- Submitting an internal SIS referral
- Submitting an Initial Review

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5. Implementation

The Implementation stage of the HSP Case Management Framework involves delivering the support required to help a Client achieve the Foundation Outcomes, in accordance with the case management plan.

Implementation of the case management plan will include direct service provision, service coordination and advocacy.

5.1. Housing

Foundation Outcomes - Housing

A Client is in secure and suitable accommodation

A Client can navigate the housing market to secure and maintain suitable rental accommodation

5.1.1. Housing Orientation (F01)

On a needs basis, the Service Provider must deliver the Housing Orientation Topic to Clients aged 15 years and over in accordance with the HSP Orientation Guidelines (available from GovTEAMS). Clients must be supported to achieve the three Key Outcome levels of awareness, knowledge and application.

Table 4: Key Outcomes - Housing Orientation Topic

Level	Key Outcomes – Housing Orientation Topic
Awareness	Clients are aware their first accommodation is usually temporary, and they are usually responsible for locating more permanent rental accommodation.
Knowledge	- Clients know how to locate rental accommodation through a variety of sources. - Clients know their tenancy obligations, including property maintenance. - Clients know that landlords also have obligations, including property maintenance. - Clients know the importance of changing address with essential agencies when moving house. - Clients know the fire risks in the home and how to respond to them.
Application	- Clients can complete tenancy application processes (with assistance from support agencies if necessary). - Clients can connect household utilities (with assistance from support agencies if necessary).

Claiming instructions:

1. For Clients who arrived/entered the HSP prior to 1 March 2022

Method: Claims for this Service must be submitted via the HSP System. See HSP System task card – Claiming for Services.

Reference IDs: F01b, F01c

Claim point: F01b: Client has achieved the 'knowledge' Key Outcomes of the Housing Orientation Topic

F01c: Client has achieved the 'application' Key Outcomes of the Housing Orientation Topic

Basis of claim: Per Client, according to Tier

Maximum no. of instances: 1

Other: A Service Provider can only claim for the achievement levels that they have assisted the Client to achieve.

2. For Clients who arrived/entered the HSP on or after 1 March 2022

Method: Claims for this Service must not be submitted via the HSP System. Instead, Service Providers will be paid for the delivery of Orientation Services to eligible Clients over a 12 month duration via the Monthly Orientation Service Delivery Charge (MOSDC).

On the first business day of each month, the Department will calculate the number of eligible Clients for each Service Provider by Tier and advise each Service Provider via email.

Service Providers must then prepare an invoice and provide this to the Department via email at [s.22\(1\)\(a\)\(ii\)@homeaffairs.gov.au](mailto:s.22(1)(a)(ii)@homeaffairs.gov.au).

Subject to receipt of a correctly rendered invoice, the Department will reconcile and process the invoice.

Other: Service Providers are not eligible to receive MOSDC payments for the delivery of Orientation Services to Clients beyond the 12 month period. This is because Service Providers will have already been fully paid for achievement of all Client orientation outcomes to the application level.

5.1.2. Initial lease agreement (F02)

On a needs basis, the Service Provider must assist Clients to enter into an initial lease agreement of at least six months (12 months preferred) on a property that meets the standards and conditions set out in Attachment C. For Clients who enter the HSP as a Humanitarian Program referral, this should ideally occur within three months of arrival.

Clients are expected to accept suitable accommodation that has been sourced for them (see also 5.1.5(b)).

The Service Provider must also support Clients to apply for relevant government assistance where required (e.g. rental assistance, government bond).

5.1.3. Sourcing a new lease agreement (F02)

On a needs basis, if a Client is unable to, or does not choose to, renew or extend their initial lease, the Service Provider must support the Client to source and secure a new lease agreement of at least six months (12 months preferred) on a property that meets the standards and conditions set out in Attachment C.

Claiming instructions:

Reference ID: F02

Claim point: On commencement of initial lease agreement (arranged by the Service Provider for at least 6 months) and application for relevant government assistance or on commencement of a new lease agreement arranged by the Service Provider.

Basis of claim: Per Case, according to Band size

Maximum no. of instances: 2

Other: In circumstances where a Client's on-arrival accommodation becomes their initial lease agreement accommodation, the Service Provider is eligible to claim this Service. The claim point is on commencement of the lease agreement arranged by the Service Provider.

Associated HSP System task card:

- Claiming for Services

5.1.4. Renew / extend lease or source crisis accommodation (F03)

(a) Renew / extend lease

On a needs basis, prior to the expiry of a Client's initial lease, the Service Provider must support the Client to renew or extend their lease agreement where they choose to remain in the same property.

(b) Sourcing crisis accommodation

The Service Provider must source crisis accommodation for Clients who require it by assisting them to access crisis and emergency accommodation services. This may include circumstances where Clients are:

- escaping domestic and family violence
- homeless or at risk of homelessness, or
- other emergencies.

(i) Unavailability of crisis and emergency accommodation services

In the event that crisis and emergency accommodation services are unavailable, the Service Provider should contact the Department.

On a case-by-case basis, the Department may consider approving the Service Provider to source crisis accommodation for the Client:

- through hotels or motels (as a minimum the accommodation must be equivalent to a two and half star rating and have adequate beds for all Clients), or
- from the Service Provider's housing stock (if available).

The Department will ordinarily approve up to a maximum of five nights' accommodation per request, but may consider approving longer timeframes where appropriate.

The Service Provider should contact the Department by sending a Task in the HSP System to:

- NATO Tier 3 (for Tier 3 Clients), or
- NATO Policy (all other Clients).

The Task must include:

- a summary of the Client's circumstances
- evidence that crisis and emergency accommodation services are unavailable
- cost of providing accommodation through hotels, motels or the Service Provider's housing stock, and
- details of how the Service Provider will support the Client to obtain stable housing.

The Department will notify the Service Provider of its decision through the HSP System within one working day of receiving a request.

To alert the Department to a request that requires urgent assessment, the Service Provider should contact their Contract Manager (during business hours) or the Director, Humanitarian Settlement Programs Section (out-of-hours). Service Providers should refer to the HSP Contact List available from GovTEAMS for relevant contact details.

If the Department approves the request, Service Provider is eligible to claim F03 (Renew / extend lease or source crisis accommodation), in addition to being reimbursed for accommodation costs by submitting a F25 (Miscellaneous Services) request (see 5.11).

Claiming instructions:

Reference ID: F03

Claim point: On renewal/extension of initial lease agreement or sourcing of crisis accommodation

Basis of claim: Per Case, according to Band size

Maximum no. of instances: 2

Associated HSP System task card:

- Claiming for Services

5.1.5. Housing – other issues

(a) Additional costs

There are a number of additional costs regarding accommodation that Service Providers should make Clients aware they are responsible for, including:

- removalist costs
- any relocation costs on transfer of settlement location
- breaking a rental lease agreement
- utilities and rent costs (after Initial Accommodation Support has expired (see also 3.1.4(b)), and
- costs of repairs due to intentional damage or neglect.

(b) Refusal to accept accommodation

Clients are expected to accept suitable accommodation that has been sourced for them. If the Client does not find the property suitable, or is not agreeable to leasing the property, the Service Provider must make reasonable efforts to source an alternative property.

If the Client rejects the alternative property without reasonable excuse, the Service Provider should discuss the issue with the Client to ensure they fully understand the impact of their decision and that this may result in the Service Provider no longer assisting them to find accommodation. The Department does not consider a Client's personal tastes regarding decor or fittings as a reasonable excuse to reject the alternative property sourced for them by the Service Provider.

Before declining to assist the Client to source further properties, the Service Provider must seek approval from the Department (see 7.2.3).

5.1.6. Basic Household Goods (F04)

The provision of basic household goods (BHG) is designed to assist Clients to establish their initial place of residence in Australia.

Clients are only eligible for BHG when they are in the HSP. Clients cannot be provided with BHG after exiting the HSP. Clients must not be kept in the HSP for the sole purpose of receiving BHG.

BHG is not an entitlement. The provision of BHG must be tailored to the assessed needs of the Client. This assessment should be done in consultation with the Client and include consideration of cultural needs, factors specific to the region where the Client will reside (such as climate) and items already supplied at the property. The Service Provider must detail these considerations in a BHG needs assessment document, in addition to a completed checklist of BHG items provided to the Client.

While many Clients may require the full list of goods specified at Attachment F of the Guidelines, some Clients (e.g. Clients living with Proposers or onshore links, Clients living in share housing) may only require specific items. Where the Client's needs are met without reaching the maximum reimbursement amount, the Client is not entitled to use the remaining funds for the purchase of other items.

Clients are only eligible for BHG if residing in accommodation that meets the standards and conditions outlined in Attachment C. BHG must not be provided to Clients who independently source substandard accommodation and refuse assistance from the Service Provider to source suitable accommodation.

The Service Provider must source all required items and is responsible for the supply and installation of BHG ready for use when the Client moves into their initial place of residence.

The Service Provider must ensure Clients understand they are responsible for BHG provided to them, and that once provided, they own the BHG.

The Service Provider will be reimbursed for the purchase cost of BHG (F04) and a fixed administration amount (F04a), as per the HSP Contract.

(a) Initial place of residence

For the purpose of receiving BHG, a Client is considered to be residing in their initial place of residence when the Client has:

- signed a lease of at least six months duration, or

- provided other evidence to prove that they are permitted to lawfully reside at the property for at least six months (e.g. amended lease, Centrelink rent certificate or statutory declaration signed by the property owner).

A Client who has been living in a property that is owned or leased by their Proposer or onshore link should also provide evidence that they are permitted to lawfully reside at the property.

If Clients have difficulty providing the aforementioned documentation, BHG may be supplied where the Service Provider has assessed the living arrangement as likely to be long term based on other available evidence (e.g. a property inspection conducted by the Service Provider, discussions with property owner etc).

Some BHG items may be provided to Clients while they are living in on-arrival accommodation (see 5.1.6(d)).

(b) Substitution of items

Clients are only eligible to receive BHG items listed at Attachment F of the Guidelines unless the Service Provider has determined, in consultation with the Client, that an alternate item is appropriate based on assessed need and within the maximum amount set out in the Payment Schedule. This can include culturally appropriate items not listed at Attachment F.

(c) Quality of items

All BHG provided must meet relevant Australian standards and be of good quality. Where the Department determines the quality of BHG items is not of a sufficient standard, the Service Provider will be required to provide alternative items at its own expense.

(d) Provision of BHG in two parts

Service Providers may elect to provide BHG in two parts:

Part 1 – the provision of personal BHG items (e.g. linen, bedding, toiletries) to Clients while they are living in on-arrival accommodation

Part 2 – the provision of the remainder of BHG items when the Client moves into their initial place of residence.

Both Part 1 and Part 2 must be provided to the Client before the Service Provider is eligible to claim the BHG fixed administration amount (F04a).

(i) Single clients who are subsequently merged with another HSP Case

Clients may be eligible for a third part of BHG if they received Part 1 and Part 2 of BHG as a single person, including in a share house arrangement, but are subsequently merged with another HSP case.

If the Client is merged with another HSP case (e.g. family members who arrived in Australia after the Client's arrival) and it results in a band size increase, Service Providers can provide items up to the maximum reimbursement amount of the higher band size, minus the amount already provided to the first Client. Service Providers will need to seek approval from the Department in these situations, via an SCI, to access a third Part of BHG within the total allowable reimbursement amount for F04.

(e) Share house arrangements

Where Clients live in a share house arrangement, communal items (e.g. couch, fridge, washing machine etc.) will be provided to the household one time only. Clients living in shared accommodation will not each receive BHG to furnish a full household.

The cost of communal items must be attributed to the BHG allocation of a specific Client (or Case) residing at the property. Service Providers should assist Clients to determine the ownership of household items in the event that the shared house arrangement ends.

Where a single client initially receives BHG in shared accommodation, but subsequently secures their own place of residence, providers may re-assess BHG needs and provide items not previously supplied to furnish the Client's new accommodation. Providers will need to seek approval from the Department via an SCI up to the maximum reimbursement amount remaining for F04.

(f) Clients living with a Proposer or onshore link

SHP Clients who live with a Proposer or onshore link are eligible for BHG, based on assessed need. However, it is expected that these Clients will not require all BHG items.

BHG can only be provided for the use of eligible HSP Clients, and must not be used to replace goods already owned by Proposers or onshore links.

(i) Provision of BHG to Proposer or onshore link's property prior to Client's arrival

There may be circumstances where it is appropriate for the Service Provider to supply certain BHG items to a Proposer or onshore link's property prior to the Client's arrival. For example, the provision of a mattress and bedding for the Client to use on their first night in Australia.

If within one month of their arrival, the Client decides they do not want to live with the Proposer or onshore link, and moves into new accommodation, the Client is eligible to receive BHG items not previously supplied to furnish their new accommodation, up to the maximum reimbursement amount. The Client is responsible for relocating and installing BHG items located at the Proposer or onshore link's property to their new accommodation.

(g) Abandoned BHG

Where possible, the Service Provider should work with Clients to ensure they do not abandon BHG items at properties they intend to vacate.

In the event Clients do leave behind BHG items when relocating, Service Providers should refer to relevant state and territory abandoned/uncollected goods laws for guidance.

(h) Clients who give birth after arriving in Australia

Clients who resettle in Australia from offshore under the Refugee and Humanitarian Program are Australian permanent residents. Any child born in Australia to either a permanent resident or an Australian citizen automatically acquires Australian citizenship and is not eligible for the HSP (including BHG), unless advised otherwise by the Department.

(i) Clients who enter the HSP as an external SIS referral

Clients who enter the HSP as an external SIS referral are not eligible to receive BHG.

Service Providers must not provide BHG to these Clients unless directed to do so by the Department.

(j) Clients who relocate**(i) Clients who relocate after receiving part of their BHG**

Where a Client receives part of their BHG (e.g. personal items on-arrival), and then voluntarily relocates to a location in a different Contract Region, the Service Provider in the new location may provide the Client with other BHG items from what remains of the total maximum reimbursement amount.

(ii) Clients who relocate after receiving all of their BHG

Clients who voluntarily relocate after receiving all of their BHG are not eligible to receive an additional instance of the Service.

The Department may consider approving an additional instance of BHG, if the Client's relocation is due to exceptional circumstances. These may include, but are not limited to, circumstances where Client is:

- escaping domestic and family violence
- other emergencies, or
- a Departmental error occurred when determining the Client's initial settlement location.

Service Providers should seek Departmental approval before purchasing BHG by submitting a Service Cap Increase request (see 8.5).

Claiming instructions:

Reference ID: F04, F04a

Claim point: F04: On provision of BHG

F04a: Following finalisation of F04

Basis of claim: Per Case, according to Band size

Maximum no. of instances: F04: 2 (if BHG is delivered in two parts), up to the maximum reimbursement amount as stated in the HSP Contract

F04a: 1

Associated HSP System task card:

- Claiming for Services

5.2. Physical and mental health and wellbeing

Foundation Outcome - Physical and mental health and wellbeing

A Client can use services and implement strategies to improve or maintain physical and mental health and lifestyle

5.2.1. Health Orientation (F06)

On a needs basis, the Service Provider must deliver the Health Orientation Topic to Clients aged 15 years and over in accordance with the HSP Orientation Guidelines (available from GovTEAMS). Clients must be supported to achieve the three Key Outcome levels of awareness, knowledge and application.

Table 5: Key Outcomes - Health Orientation Topic

Level	Key Outcomes – Health Orientation Topic
Awareness	• Clients are aware they are required to complete health checks upon arrival in Australia. • Clients are aware that health services in Australia treat physical and mental health conditions.
Knowledge	• Clients know the different functions of Health Care and Medicare cards. • Clients know which services different healthcare providers provide (e.g. hospital emergency departments, GPs and counselling services). • Clients know how health services are charged in Australia, including bulk billing. • Clients know children must be immunised before they can attend school.
Application	• Clients can locate and make use of the appropriate health services (with the support of interpreters or support agencies if necessary).

Claiming instructions:

1. For Clients who arrived/entered the HSP prior to 1 March 2022

Method: Claims for this Service must be submitted via the HSP System. See HSP System task card – Claiming for Services.

Reference IDs: F06b, F06c

Claim point: F06b: Client has achieved the 'knowledge' Key Outcomes of the Health Orientation Topic

F06b: Client has achieved the 'application' Key Outcome of the Health Orientation Topic

Basis of claim: Per Client, according to Tier

Maximum no. of instances: 1

Other: A Service Provider can only claim for the achievement levels that they have assisted the Client to achieve.

2. For Clients who arrived/entered the HSP on or after 1 March 2022

Method: Claims for this Service must not be submitted via the HSP System. Instead, Service Providers will be paid for the delivery of Orientation Services to eligible Clients over a 12 month duration via the Monthly Orientation Service Delivery Charge (MOSDC).

On the first business day of each month, the Department will calculate the number of eligible Clients for each Service Provider by Tier and advise each Service Provider via email.

Service Providers must then prepare an invoice and provide this to the Department via email at [s.22\(1\)\(a\)\(ii\)@homeaffairs.gov.au](mailto:s.22(1)(a)(ii)@homeaffairs.gov.au).

Subject to receipt of a correctly rendered invoice, the Department will reconcile and process the invoice.

Other: Service Providers are not eligible to receive MOSDC payments for the delivery of Orientation Services to Clients beyond the 12 month period. This is because Service Providers will have already been fully paid for achievement of all Client orientation outcomes to the application level.

5.2.2. Health (F05)

On a needs basis, the Service Provider must:

- address any immediate health needs (within 72 hours of arrival in Australia) of the Client (see 3.1.3(a))
- coordinate and support the Client's attendance at health appointments, which may include:
 - health assessments following a Client's arrival in Australia, and/or
 - other health appointments (including specialised health services) to address a Client's health needs.

(a) Health assessments

Humanitarian entrants attend a Comprehensive Health Assessment (CHA) following their arrival in Australia.

For the purposes of the HSP, a CHA is the health assessment for refugees and other humanitarian entrants under the Medicare Benefits Schedule (MBS) Item 701 (brief), 703 (standard), 705 (long) or 707 (prolonged). Further information on these MBS items is available from the Department of Health [website](#).

On a needs basis, the Service Provider must coordinate and support all Clients to attend a CHA within 28 days of their arrival in Australia.

The appointment should, where possible, be made with a specialist migrant or refugee health service, or with a general practitioner experienced in dealing with refugee health issues.

(b) Early childhood health

In addition to the CHA, all children aged five years or under must be linked with an early childhood health clinic (or equivalent) for developmental screening and immunisation. The Service Provider should inform parents or carers that children may require a documented immunisation history to attend school and that appropriate vaccinations will need to be given to children prior to school enrolment.

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(c) Other health appointments

On a needs basis, at any time after the Client has attended their CHA, the Service Provider must coordinate and support their attendance at additional health appointments. These appointments may include:

- testing or screening requested by the medical practitioner at the CHA, and/or
- health appointments unrelated to the CHA.

The extent to which ongoing assistance is required will depend on the Client's capacity to independently manage their own health needs as they progress through Orientation.

(d) Mental health and wellbeing

The Service Provider must be familiar with, and attentive to, mental health issues that may affect Clients, including the need for specialist torture and trauma counselling services.

The Service Provider must arrange referral to an appropriate mental health service where there is concern for the Client's mental health or where the Service Provider becomes aware that a Client is identified as being at risk.

The Service Provider should be familiar with the services provided through the Program of Assistance for Survivors of Torture and Trauma (PASTT) administered by the Department of Health and refer Clients where appropriate. Further information regarding PASTT is available from the Department of Health's [website](#).

Claiming instructions:

Reference ID: F05

Claim point: Immediate health needs of the Client addressed or Client attendance at appointment.

Basis of claim: Per Client, according to Tier

Maximum no. of instances: Tier 2: 8

Tier 3: 8

Note: The Department acknowledges that there will be instances when the Client chooses not to attend an appointment despite the support provided by the Service Provider. In these circumstances, the Service Provider may claim F05 if it has exhausted all reasonable efforts to support the Client to attend.

Associated HSP System task card:

- Claiming for Services

5.3. Managing money

Foundation Outcome - Managing money

A Client can manage and access finances

5.3.1. Money Orientation (F07)

On a needs basis, the Service Provider must deliver the Money Orientation Topic to Clients aged 15 years and over in accordance with the HSP Orientation Guidelines (available from GovTEAMS). Clients must be supported to achieve the three Key Outcome levels of awareness, knowledge and application.

Table 6: Key Outcomes - Money Orientation Topic

Level	Key Outcomes – Money Orientation Topic
Awareness	• Clients are aware of the differences in the cost of living in Australia compared to their previous experiences (e.g. housing, utilities, food, transport, clothing).

	• Clients are aware there are different kinds of shopping outlets, some of which offer the opportunity to reduce household expenditure (e.g. budget supermarkets).
Knowledge	• Clients know what their weekly income is projected to be in the initial stages of settlement. • Clients know what their projected outgoings are expected to be in the initial stages of settlement.
Application	• Clients can develop a household budget based on their current income and expenditure. • Clients can access their money, including using an automatic teller machine (ATM), and use it to shop and pay bills without assistance.

Claiming instructions:

1. For Clients who arrived/entered the HSP prior to 1 March 2022

Method: Claims for this Service must be submitted via the HSP System. See HSP System task card – Claiming for Services.

Reference IDs: F07b, F07c

Claim point: F07b: Client has achieved the 'knowledge' Key Outcomes of the Money Orientation Topic

F07c: Client has achieved the 'application' Key Outcomes of the Money Orientation Topic

Basis of claim: Per Client, according to Tier

Maximum no. of instances: 1

Other: A Service Provider can only claim for the achievement levels that they have assisted the Client to achieve.

2. For Clients who arrived/entered the HSP on or after 1 March 2022

Method: Claims for this Service must not be submitted via the HSP System. Instead, Service Providers will be paid for the delivery of Orientation Services to eligible Clients over a 12 month duration via the Monthly Orientation Service Delivery Charge (MOSDC).

On the first business day of each month, the Department will calculate the number of eligible Clients for each Service Provider by Tier and advise each Service Provider via email.

Service Providers must then prepare an invoice and provide this to the Department via email at [s.22\(1\)\(a\)\(ii\)@homeaffairs.gov.au](mailto:s.22(1)(a)(ii)@homeaffairs.gov.au).

Subject to receipt of a correctly rendered invoice, the Department will reconcile and process the invoice.

Other: Service Providers are not eligible to receive MOSDC payments for the delivery of Orientation Services to Clients beyond the 12 month period. This is because Service Providers will have already been fully paid for achievement of all Client orientation outcomes to the application level.

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5.4. Community participation and networking

Foundation Outcomes - Community participation and networking

A Client can develop and maintain links with local communities and continue cultural practices

A Client knows about Australian way of life and values

A Client can safely use transport

5.4.1. Feeling at Home in Australia Orientation (F08)

On a needs basis, the Service Provider must deliver the Feeling at Home in Australia Orientation Topic to Clients aged 15 years and over in accordance with the HSP Orientation Guidelines (available from GovTEAMS). Clients must be supported to achieve the three Key Outcome levels of awareness, knowledge and application.

Table 7: Key Outcomes – Feeling at Home in Australia Orientation Topic

Level	Key Outcomes – Feeling at Home in Australia Orientation Topic
Awareness	- Clients are aware that Australia's history begins with its Indigenous people, followed by colonisation by England and subsequent waves of immigration from all over the world. - Clients are aware that Australia has a multicultural policy which values the languages and cultures of all its citizens.
Knowledge	Clients know there are community groups, including religious, cultural and sporting organisations which they can join.
Application	Clients can access public libraries, SBS TV and radio, and the internet to locate information in their home languages.

Claiming instructions:

1. For Clients who arrived/entered the HSP prior to 1 March 2022

Method: Claims for this Service must be submitted via the HSP System. See HSP System task card – Claiming for Services.

Reference IDs: F08b, F08c

Claim point: F08b: Client has achieved the 'knowledge' Key Outcome of the Feeling and Home in Australia Orientation Topic

F08c: Client has achieved the 'application' Key Outcome of the Feeling and Home in Australia Orientation Topic

Basis of claim: Per Client, according to Tier

Maximum no. of instances: 1

Other: A Service Provider can only claim for the achievement levels that they have assisted the Client to achieve.

2. For Clients who arrived/entered the HSP on or after 1 March 2022

Method: Claims for this Service must not be submitted via the HSP System. Instead, Service Providers will be paid for the delivery of Orientation Services to eligible Clients over a 12 month duration via the Monthly Orientation Service Delivery Charge (MOSDC).

On the first business day of each month, the Department will calculate the number of eligible Clients for each Service Provider by Tier and advise each Service Provider via email.

Service Providers must then prepare an invoice and provide this to the Department via email at [s.22\(1\)\(a\)\(ii\)@homeaffairs.gov.au](mailto:s.22(1)(a)(ii)@homeaffairs.gov.au).

Subject to receipt of a correctly rendered invoice, the Department will reconcile and process the invoice.

Other: Service Providers are not eligible to receive MOSDC payments for the delivery of Orientation Services to Clients beyond the 12 month period. This is because Service Providers will have already been fully paid for achievement of all Client orientation outcomes to the application level.

5.4.2. Participation in a local group, activity or event (F09)

On a needs basis, the Service Provider must assist a Client to participate in local groups, activities or community events. This may include:

- engagement with local community groups and programs
- enrolment in pre-primary school programs
- providing links to recreational activities
- linking with activities available through the Settlement Engagement and Transition Support (SETS) Program

Claiming instructions:

Reference ID: F09

Claim point: On Client participation in a local group, activity or event

Basis of claim: Per Client, according to Tier

Maximum no. of instances: Tier 2: 2

Tier 3: 1

Note: The Department acknowledges that there will be instances when the Client chooses not to participate in a local group, activity or event despite the support provided by the Service Provider. In these circumstances, the Service Provider may claim F09 if it has exhausted all reasonable efforts to support the Client to participate.

Associated HSP System task card:

- Claiming for Services

5.4.3. Transport Orientation (F10)

On a needs basis, the Service Provider must deliver the Transport Orientation Topic to Clients aged 15 years and over in accordance with the HSP Orientation Guidelines (available from GovTEAMS). Clients must be supported to achieve the three Key Outcome levels of awareness, knowledge and application.

Table 8: Key Outcomes – Transport Orientation Topic

Level	Key Outcomes – Transport Orientation Topic
Awareness	• Clients are aware they will initially be reliant on public transport and that options vary in different locations.
Knowledge	• Clients know the most efficient public transport routes to get them to shopping, educational institutions, services and community events. • Clients know they must learn Australian road rules and undertake licensing requirements in order to drive a car.
Application	• Clients can independently use public transport routes to get them to shopping, educational institutions, services and community events.

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Claiming instructions:**1. For Clients who arrived/entered the HSP prior to 1 March 2022**

Method: Claims for this Service must be submitted via the HSP System. See HSP System task card – Claiming for Services.

Reference IDs: F10b, F10c

Claim point: F10b: Client has achieved the 'knowledge' Key Outcomes of the Transport Orientation Topic

F10c: Client has achieved the 'application' Key Outcome of the Transport Orientation Topic

Basis of claim: Per Client, according to Tier

Maximum no. of instances: 1

Other: A Service Provider can only claim for the achievement levels that they have assisted the Client to achieve.

2. For Clients who arrived/entered the HSP on or after 1 March 2022

Method: Claims for this Service must not be submitted via the HSP System. Instead, Service Providers will be paid for the delivery of Orientation Services to eligible Clients over a 12 month duration via the Monthly Orientation Service Delivery Charge (MOSDC).

On the first business day of each month, the Department will calculate the number of eligible Clients for each Service Provider by Tier and advise each Service Provider via email.

Service Providers must then prepare an invoice and provide this to the Department via email at [s.22\(1\)\(a\)\(ii\)@homeaffairs.gov.au](mailto:s.22(1)(a)(ii)@homeaffairs.gov.au).

Subject to receipt of a correctly rendered invoice, the Department will reconcile and process the invoice.

Other: Service Providers are not eligible to receive MOSDC payments for the delivery of Orientation Services to Clients beyond the 12 month period. This is because Service Providers will have already been fully paid for achievement of all Client orientation outcomes to the application level.

5.5. Family functioning and social support**Foundation Outcome - Family functioning and social support**

A client can access government services and other support

5.5.1. Family Functioning and Social Support Orientation (F12)

On a needs basis, the Service Provider must deliver the Family Functioning and Social Support Orientation Topic to Clients aged 15 years and over in accordance with the HSP Orientation Guidelines (available from GovTEAMS). Clients must be supported to achieve the three Key Outcome levels of awareness, knowledge and application.

Table 9: Key Outcomes – Family Functioning and Social Support Orientation Topic

Level	Key Outcomes – Family Functioning and Social Support Orientation Topic
Awareness	Clients are aware that the ways in which their family will work together in Australia will probably be differently from their home country.

Knowledge	• Clients know the ways in which their children may be affected by the journey and resettlement. • Clients know strategies for working through relationship issues – with partners, children or family – which typically occur when resettling into a new life.
Application	• Clients can locate services to support their family to build strong relationships as they settle into a new life. • Clients can articulate a plan for escaping violent or unhealthy relationships – for themselves or others.

Claiming instructions:

1. For Clients who arrived/entered the HSP prior to 1 March 2022

Method: Claims for this Service must be submitted via the HSP System. See HSP System task card – Claiming for Services.

Reference IDs: F12b, I12c

Claim point: F12b: Client has achieved the 'knowledge' Key Outcomes of the Family Functioning and Social Support Orientation Topic

F12c: Client has achieved the 'application' Key Outcomes of the Family Functioning and Social Support Orientation Topic

Basis of claim: Per Client, according to Tier

Maximum no. of instances: 1 per claim point

Other: A Service Provider can only claim for the achievement levels that they have assisted the Client to achieve.

2. For Clients who arrived/entered the HSP on or after 1 March 2022

Method: Claims for this Service must not be submitted via the HSP System. Instead, Service Providers will be paid for the delivery of Orientation Services to eligible Clients over a 12 month duration via the Monthly Orientation Service Delivery Charge (MOSDC).

On the first business day of each month, the Department will calculate the number of eligible Clients for each Service Provider by Tier and advise each Service Provider via email.

Service Providers must then prepare an invoice and provide this to the Department via email at [s.22\(1\)\(a\)\(ii\)@homeaffairs.gov.au](mailto:s.22(1)(a)(ii)@homeaffairs.gov.au).

Subject to receipt of a correctly rendered invoice, the Department will reconcile and process the invoice.

Other: Service Providers are not eligible to receive MOSDC payments for the delivery of Orientation Services to Clients beyond the 12 month period. This is because Service Providers will have already been fully paid for achievement of all Client orientation outcomes to the application level.

5.5.2. Family and social support services (F11)

On a needs basis, the Service Provider must support a Client to access family and social support services. This could include services relating to issues involving:

- family relationships
- domestic and family violence
- drugs and alcohol
- child and youth welfare
- child protection
- legal matters

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- managing finances
- homelessness
- disability (including the National Disability Insurance Scheme)
- ageing (including My Aged Care)
- disability (including the National Disability Insurance Scheme – see 2.2.1 (b)(vii) for detail about claims relevant to NDIS applications).

Claiming instructions:

Reference ID: F11

Claim point: On Client accessing family and social support services

Basis of claim: Per Client, according to Tier

Maximum no. of instances: Tier 2: 4

Tier 3: 7

Note: The Department acknowledges that there will be instances when the Client chooses not to access family support services despite the support provided by the Service Provider. In these circumstances, the Service Provider may claim F11 if it has exhausted all reasonable efforts to support the Client to access family support services.

Associated HSP System task card:

- Claiming for Services

5.6. Justice

Foundation Outcome - Justice

A Client knows that they have legal rights and responsibilities and how to obtain legal assistance

5.6.1. Australian Law Orientation (F13)

On a needs basis, the Service Provider must deliver the Australian Law Orientation Topic to Clients aged 15 years and over in accordance with the HSP Orientation Guidelines (available from GovTEAMS). Clients must be supported to achieve the three Key Outcome levels of awareness, knowledge and application.

Table 10: Key Outcomes – Australian Law Orientation Topic

Level	Key Outcomes – Australian Law Orientation Topic
Awareness	• Clients are aware all people are equal under the law in Australia. • Clients are aware of the basic freedoms that underpin Australian law – speech, association, assembly, religion, LGBTI and movement across borders.
Knowledge	• Clients know what constitutes domestic violence and child abuse under Australian law. • Clients know the rights of women and children in Australia. • Clients know the role of police and legal services.
Application	• Clients can contact police and legal services if needed.

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Claiming instructions:**1. For Clients who arrived/entered the HSP prior to 1 March 2022**

Method: Claims for this Service must be submitted via the HSP System. See HSP System task card – Claiming for Services.

Reference IDs: F13b, F13c

Claim point: F13b: Client has achieved the 'knowledge' Key Outcomes of the Australian Law Orientation Topic

F13c: Client has achieved the 'application' Key Outcome of the Australian Law Orientation Topic

Basis of claim: Per Client, according to Tier

Maximum no. of instances: 1

Other: A Service Provider can only claim for the achievement levels that they have assisted the Client to achieve.

2. For Clients who arrived/entered the HSP on or after 1 March 2022

Method: Claims for this Service must not be submitted via the HSP System. Instead, Service Providers will be paid for the delivery of Orientation Services to eligible Clients over a 12 month duration via the Monthly Orientation Service Delivery Charge (MOSDC).

On the first business day of each month, the Department will calculate the number of eligible Clients for each Service Provider by Tier and advise each Service Provider via email. Service Providers must then prepare an invoice and provide this to the Department via email at [s.22\(1\)\(a\)\(ii\)@homeaffairs.gov.au](mailto:s.22(1)(a)(ii)@homeaffairs.gov.au).

Subject to receipt of a correctly rendered invoice, the Department will reconcile and process the invoice.

Other: Service Providers are not eligible to receive MOSDC payments for the delivery of Orientation Services to Clients beyond the 12 month period. This is because Service Providers will have already been fully paid for achievement of all Client orientation outcomes to the application level.

5.7. Language services

Foundation Outcome - Language services

A Client participates in AMEP and other English language learning

5.7.1. English language registration (F14)

On a needs basis, the Service Provider must register a Client with appropriate English language opportunities.

The Australian Government funds the Adult Migrant English Program (AMEP) to provide eligible Clients with tuition in foundation English language and information about Australian society.

The Service Provider must register Clients who have low or no English skills, and are over 18 years of age, with an AMEP service provider (youth aged between 15 and 17 years may also be eligible in some circumstances) within the requisite timeframes. Clients who under 15 years of age not eligible for the AMEP.

Service Providers should be aware of eligibility and commencement timeframes for AMEP and AMEP sub programs (including the Special Preparatory Program, Settlement Language Pathways to Employment and Training and Volunteer Tutor Scheme), available from the Department's [website](#).

Where Clients are registering in AMEP, the Service Provider should support the AMEP Service Provider to determine the most suitable AMEP tuition stream and mode of learning (class-based tuition, distance learning, or home tutoring) by providing information on barriers affecting the Client's attendance and learning.

(e.g. health concerns, caring responsibilities etc). The Service Provider should also assist the Client to understand any implications for non-attendance at AMEP classes.

Where Clients are ineligible for AMEP because they are assessed as having attained vocational English, the Service Provider must assist the Client to register with other appropriate English language learning opportunities.

These may include English classes provided by volunteer based organisations such as Community Hubs or participation in Skills for Education and Employment (SEE), administered by the Department of Education, Skills and Employment.

Claiming instructions:

Reference ID: F14

Claim point: On Client registration with AMEP, or other English language learning options

Basis of claim: Per Client, according to Tier

Maximum no. of instances: 1

Associated HSP System task card:

- Claiming for Services

5.7.2. English language lessons (F15)

On a needs basis, the Service Provider must support the Client to attend English language lessons and continue their participation in classes.

The Service Provider should assist the Client to understand the importance of learning English and be aware of and address barriers that may affect their attendance at English lessons. This may include:

- health concerns
- caring for children and other immediate family members
- Workforce Australia or employment obligations
- transport
- availability of classes, and/or
- awareness of, and ability to connect with, a AMEP Service Provider (e.g. in the event the Client is required to change AMEP Service Provider as a result of transferring to a new settlement location or moving house within a settlement location).

For AMEP clients with under school-aged children, publically-funded childcare is available while they are participating in AMEP classes. AMEP Service Providers are responsible for sourcing, matching and confirming childcare places for under school-aged children of AMEP clients. However, HSP Service Providers may be required to provide additional orientation support in order for the Client to access childcare arranged by the AMEP Service Provider. For example, Clients may not have used formal centre-based childcare before and require assistance from the HSP Service Provider to become familiar with the environment in which their children will be cared for. In such circumstances, the HSP Service Provider is eligible to claim F15 (English language lessons).

As part of routine case management activities (i.e. not claimable under F15 (English language lessons)), the Service Provider should regularly confirm with the Client that they are attending AMEP classes.

Claiming instructions:

Reference ID: F15

Claim point: On Client attendance at English language lessons

Basis of claim: Per Client, according to Tier

Maximum no. of instances: Tier 2: 2

Tier 3: 3

Note: The Department acknowledges that there will be instances when the Client chooses not to attend English language lessons despite the support provided by the Service Provider. In these

circumstances, the Service Provider may claim F15 if it has exhausted all reasonable efforts to support the Client to attend English language lessons.

Associated HSP System task card:

- Claiming for Services

5.8. Education and training

Foundation Outcomes - Education and Training

A Client has sought recognition of pre-arrival skills and qualifications

A school-aged Client is enrolled in mandatory education

A Client can apply for and participate in education and training

5.8.1. Education Orientation (F16)

On a needs basis, the Service Provider must deliver the Education Orientation Topic to Clients aged 15 years and over in accordance with the HSP Orientation Guidelines (available from GovTEAMS). Clients must be supported to achieve the three Key Outcome levels of awareness, knowledge and application.

Table 11: Key Outcomes – Education Orientation Topic

Level	Key Outcomes – Education Orientation Topic
Awareness	• Clients are aware that educational opportunities are available for all ages and for all levels of ability, through a range of recreational, vocational and academic courses. • Clients are aware that extracts of their overseas qualifications can be translated free of charge, but not all their overseas qualifications will be recognised or have equivalency in Australia.
Knowledge	• Clients (18 years and over) know they may be entitled to free English tuition through the AMEP, and they must register within the first six months of arrival in Australia, commence their tuition within 12 months, and complete their tuition within five years, and that English competency is a key to successful settlement outcomes. • Clients know the different institutions in their location that offer educational opportunities. • Clients know how the Australian school systems operate (e.g. public vs. private, attendance, start/finish times, holidays, school lunches, behaviour at school, homework etc.).
Application	• Clients can meet school obligations (e.g. parent-teacher interviews, complete permission forms, with the support of the TIS as necessary). • Clients can articulate an educational pathway for themselves or for family members (e.g. supporting a child to map a study pathway through secondary school into vocational or tertiary studies, with the support of school staff as necessary).

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Claiming instructions:**1. For Clients who arrived/entered the HSP prior to 1 March 2022**

Method: Claims for this Service must be submitted via the HSP System. See HSP System task card – Claiming for Services.

Reference IDs: F16b, F16c

Claim point: F16b: Client has achieved the 'knowledge' Key Outcomes of the Education Orientation Topic

F16c: Client has achieved the 'application' Key Outcomes of the Education Orientation Topic

Basis of claim: Per Client, according to Tier

Maximum no. of instances: 1

Other: A Service Provider can only claim for the achievement levels that they have assisted a Client to achieve.

2. For Clients who arrived/entered the HSP on or after 1 March 2022

Method: Claims for this Service must not be submitted via the HSP System. Instead, Service Providers will be paid for the delivery of Orientation Services to eligible Clients over a 12 month duration via the Monthly Orientation Service Delivery Charge (MOSDC).

On the first business day of each month, the Department will calculate the number of eligible Clients for each Service Provider by Tier and advise each Service Provider via email.

Service Providers must then prepare an invoice and provide this to the Department via email at [s.22\(1\)\(a\)\(ii\)@homeaffairs.gov.au](mailto:s.22(1)(a)(ii)@homeaffairs.gov.au).

Subject to receipt of a correctly rendered invoice, the Department will reconcile and process the invoice.

Other: Service Providers are not eligible to receive MOSDC payments for the delivery of Orientation Services to Clients beyond the 12 month period. This is because Service Providers will have already been fully paid for achievement of all Client orientation outcomes to the application level.

5.8.2. Education and training enrolment (F17)

On a needs basis, the Service Provider must support the Client to enrol in relevant education and training. This may include engagement and coordination with education and training providers (including schools, universities, and TAFEs).

In determining the most appropriate education or training option for a Client, the Service Provider should consider the Client's:

- goals and aspirations
- education level, including English language proficiency
- skills and qualifications
- previous work experience
- special learning needs
- transport needs
- other responsibilities (e.g. family care and health)
- cost of education and training
- eligibility for the Skills for Education and Employment (SEE) program, which provides language, literacy and numeracy training to eligible job seekers, to help them to participate more effectively in training or in the labour force (see Department of Education, Skills and Employment [website](#))
- understanding of education pathways and relevant courses in Australia.

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Claiming instructions:

Reference ID: F17

Claim point: On Client enrolment in education and training

Basis of claim: Per Client, according to Tier

Maximum no. of instances: 1

Note: The Department acknowledges that there will be instances when the Client chooses not to enrol in education and training despite the support provided by the Service Provider. In these circumstances, the Service Provider may claim F17 if it has exhausted all reasonable efforts to support the Client to enrol in education and training.

Associated HSP System task card:

- Claiming for Services

5.8.3. School enrolment (F18)

The Service Provider must enrol school-aged Clients in primary or secondary school as soon as possible, and no later than six weeks after arrival in Australia.

If Clients transfer to a different settlement location and have school-aged children who require enrolment at a new primary or secondary school, Service Providers can submit an SCI request for a further instance F18. The Department will consider additional instances of F18 on a case-by-case basis.

Claiming instructions:

Reference ID: F18

Claim point: On school-aged Client's enrolment in school

Basis of claim: Per Client

Maximum no. of instances: 1

Associated HSP System task card:

- Claiming for Services

5.8.4. Recognition of pre-arrival skills and qualifications (F19)

On a needs basis, the Service Provider must support the Client to seek recognition of their pre-arrival skills and qualifications.

There are different recognition authorities, each with their own policies and processes. Employment providers such as Workforce Australia have principal responsibility for assisting the Client in regards to skills and qualifications recognition, but the Service Provider should provide additional support as needed.

Together with the employment services provider, the Service Provider should consider:

- identifying the Client's skills, qualifications and experience
- documentary evidence of the Client's skills and qualifications
- translation of the Client's existing documentation
- identifying and connecting the Client with the authority responsible for registration or licensing
- other pathways or bridging programs, such as gap training for equivalent Australian qualifications (it may be appropriate or necessary to undertake this through Workforce Australia)
- cost of skills/qualifications recognition and the use of the Workforce Australia Employment Fund (at the determination of the Workforce Australia provider) or funding available through other programs to assist the Client to pay for the cost of this process.

Claiming instructions:

Reference ID: F19

Claim point: On Client application for recognition of pre-arrival skills and qualifications

Basis of claim: Per Client, according to Tier

Maximum no. of instances: 1

Note: The Department acknowledges that there will be instances when the Client chooses not to apply for recognition of pre-arrival skills and qualifications despite the support provided by the Service Provider. In these circumstances, the Service Provider may claim F19 if it has exhausted all reasonable efforts to support the Client to apply for recognition of pre-arrival skills and qualifications.

Associated HSP System task card:

- Claiming for Services

5.9. Employment

Foundation Outcomes - Employment

A Client can engage with employment services and seek and apply for jobs

A Client is on a pathway to achieve their employment goals

A Client can access support services for establishing a business

5.9.1. Employment Orientation (F20)

On a needs basis, the Service Provider must deliver the Employment Orientation Topic to Clients aged 15 years and over in accordance with the HSP Orientation Guidelines (available from GovTEAMS). Clients must be supported to achieve the three Key Outcome levels of awareness, knowledge and application.

Table 12: Key Outcomes – Employment Orientation Topic

Level	Key Outcomes – Employment Orientation Topic
Awareness	• Clients are aware that Australia has a competitive job market, and jobs are generally awarded on merit. • Clients are aware there are different pathways to preferred jobs, including volunteering and starting out in lower skilled positions.
Knowledge	• Clients know there are a number of employment services to assist in finding work or planning new careers or business enterprises.
Application	• Clients can develop a job resume and complete a job application, (with assistance from support agencies if necessary).

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Claiming instructions:**1. For Clients who arrived/entered the HSP prior to 1 March 2022**

Method: Claims for this Service must be submitted via the HSP System. See HSP System task card – Claiming for Services.

Reference IDs: F20b, F20c

Claim point: F20b: Client has achieved the 'knowledge' Key Outcome of the Employment Orientation Topic

F20c: Client has achieved the 'application' Key Outcome of the Employment Orientation Topic

Basis of claim: Per Client, according to Tier

Maximum no. of instances: 1

Other: A Service Provider can only claim for the achievement levels that they have assisted the Client to achieve.

2. For Clients who arrived/entered the HSP on or after 1 March 2022

Method: Claims for this Service must not be submitted via the HSP System. Instead, Service Providers will be paid for the delivery of Orientation Services to eligible Clients over a 12 month duration via the Monthly Orientation Service Delivery Charge (MOSDC).

On the first business day of each month, the Department will calculate the number of eligible Clients for each Service Provider by Tier and advise each Service Provider via email.

Service Providers must then prepare an invoice and provide this to the Department via email at [s.22\(1\)\(a\)\(ii\)@homeaffairs.gov.au](mailto:s.22(1)(a)(ii)@homeaffairs.gov.au).

Subject to receipt of a correctly rendered invoice, the Department will reconcile and process the invoice.

Other: Service Providers are not eligible to receive MOSDC payments for the delivery of Orientation Services to Clients beyond the 12 month period. This is because Service Providers will have already been fully paid for achievement of all Client orientation outcomes to the application level.

5.9.2. Initial employment services appointment (F21)

The Case Manager must attend the initial employment services appointment with the Client (if agreed with the Client), and contribute to the development of the Client's Job Plan. Clients may need to complete a Centrelink consent form to allow Case Managers to access Client information.

The Case Manager should:

- ensure that an interpreter in the Client's preferred language is present, if required
- provide the employment services provider with an understanding of the Client's potential barriers to employment (including relevant health issues), educational/employment background and career aspirations
- assist in the development of a Job Plan so that it accurately reflects the Client's circumstances and takes account of their other responsibilities (e.g. family caring responsibilities, AMEP or other English language classes, living situation)
- assist the Client to understand the role of the employment services provider
- assist the Client to understand their rights and responsibilities under mutual obligation
- requirements and the Job Plan including, when required, looking for paid work (job search), attendance at appointments with the employment service provider, attendance at activities and letting their employment services provider know if they will miss appointments before they occur

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- assist the Client to understand the consequences (e.g. suspension of payment or in some cases financial penalties) of a failure to meet their mutual obligation requirements or other obligations, including signing a Job Plan, and what they can do to re-engage if they have missed appointments
- encourage the employment services provider to communicate regularly and share information in order to support their shared Client.

(a) Simultaneous appointments for multiple Clients of a Case

There may be occasions when multiple Clients from a Case are required to attend their initial employment services appointment at the same time, and the Case Manager is therefore unable to attend all appointments simultaneously. In such circumstances, a substitute Case Manager may attend the appointment that the Client's Case Manager cannot. The Service Provider must ensure that the substitute Case Manager has sufficient knowledge of the Client's needs and circumstances to deliver the Service.

Claiming instructions:

Reference ID: F21

Claim point: On Case Manager's attendance at the Client's initial employment services appointment

Basis of claim: Per Client, according to Tier

Maximum no. of instances: 1

Associated HSP System task card:

- Claiming for Services

5.9.3. Implementing employment strategies (F22)

On a needs basis, the Case Manager must assist the Client to implement employment strategies identified through the case management plan or Workforce Australia Job Plan.

Job Plan activities are designed to help the Client become job ready and satisfy their mutual obligation requirements. Activities can range from employment services provider appointments and job searches to attendance at English language classes and work experience.

Case Managers are encouraged to provide additional support to complement assistance provided through employment services providers with a view to improving outcomes for a Client. The Case Manager, in consultation with the employment services provider (where relevant) and the Client, may consider activities such as:

- supporting the Client with job searches and finding information and further support relevant to their area of job interest
- facilitating referrals to programs such as SETS, mentoring or work experience schemes, state, territory or local government or private sector employment initiatives and/or other job readiness initiatives
- exploring how financial support, including the Workforce Australia Employment Fund, can be utilised for the Client to improve their job readiness.

Claiming instructions:

Reference ID: F22

Claim point: On Client being assisted by the Case Manager to implement employment strategies

Basis of claim: Per Client, according to Tier

Maximum no. of instances: 3

Associated HSP System task card:

- Claiming for Services

5.9.4. Support services for establishing a business (F23)

On a needs basis, the Service Provider must support Clients interested in establishing a business to access relevant support and services. These services may be provided by local government or private sector business advisory bodies.

Types of assistance that may be considered by the Service Provider, in consultation with the employment services provider (where relevant) and the Client may include:

- supporting the Client to find relevant information and resources
- linking the Client with business advisory services
- facilitating connections to existing services or programs to mentor entrepreneurs such as the New Enterprise Incentive Scheme
- linking the Client with financial institutions, for instance to access microfinance.

Claiming instructions:

Reference ID: F23

Claim point: On Client accessing support services to establish a business

Basis of claim: Per Client, according to Tier

Maximum no. of instances: 1

Note: The Department acknowledges that there will be instances when the Client chooses not to access support services to establish a business despite the support provided by the Service Provider. In these circumstances, the Service Provider may claim F23 if it has exhausted all reasonable efforts to support the Client to access support services to establish a business.

Associated HSP System task card:

- Claiming for Services

5.10. Purchased services for Tier 3 Clients (F24)

The Service Provider may request to purchase services for Tier 3 Clients to assist in achieving their Foundation Outcomes where:

- the services required extend beyond the expertise or capacity of the Service Provider, and
- there are no suitable free services available through government programs or other channels (e.g. non-government organisations, community groups, volunteers, church groups etc).

The Service Provider should obtain the Department's approval before engaging purchased services by submitting a F24 (Purchased Services) request in the HSP System. Requests should be submitted as early as possible before the planned service delivery date. Where purchased services are engaged without prior approval, the Service Provider may not receive payment from the Department.

For the Department to assess a request, the Service Provider must include:

- details of the service required (including the cost)
- an explanation of why the Client's case management plan would not progress without the service being provided
- details of the Service Provider's investigation and exhaustion of all other suitable services available through other government programs or other channels (including details of any referrals or pending applications for government services like the NDIS, aged care services etc).

The Service Provider may upload supporting documentation using the 'Add Attachment' function in the HSP System and must be referenced in the request.

The Department will not approve purchased services that:

- create a level of dependency for the Client by paying for unsustainable, ongoing supports
- duplicate other material or in-kind assistance provided by the Department
- are for the purchase of goods.