SRSS APPLICATIONS + MODEL OF SERVICE

November 2019
State Wide meeting Refugee Health Network

WE LIVE WITHOUT BARRIERS
SRSS MODEL - OVERVIEW

**Aim of the SRSS Model**
- To deliver a flexible approach for needs-based support to people who are actively engaged with the Department of Home Affairs in resolving their immigration status and unable to support themselves.

**The purpose of the SRSS model**
- To encourage the independence and confidence of clients to engage in the status resolution process including departure from Australia
- To manage risk to the individual, the community and the integrity of the migration program
- To offer services aligned with the policy intent, eligibility requirements and client needs
- To provide appropriate and targeted support until it is no longer needed, and
- To seek to empower clients to build their independence and capabilities.

**What are the underpinning principles of the SRSS model?**
- That services provided are to focus on status resolution outcomes, being a substantive visa grant or departure.
WHAT SERVICES ARE OFFERED UNDER THE SRSS MODEL?

**Baseline services**
Include access to work rights, access to health services, access to education for school-aged children

**Additional services**
Are provided to those with a genuine need, or have specific barriers preventing a status resolution outcome

**Transitional services**
Include assistance to those integrating into the Australian community, which may also be for those recipients who have spent an extended period of time in detention (Band 4)

**Supported living services**
Include services provided to those with a permanent impairment / condition, or those subject to a Residence Determination Agreement (Band 2-3)
WHAT SUPPORT WILL BE OFFERED

SRSS continues to deliver support to those who are vulnerable and in need by providing targeted assistance, such as:

- Specialised counselling, health or housing, and
- Individual support to bridge identified gaps or needs.

Support provided is no more than individuals need to address or remove barriers that may impair their ability to engage with the Department to resolve their immigration status, or what would be available to Australian citizens.

Those who have the capacity to work are expected to support themselves.

If an individual has demonstrated barriers to resolving their immigration status, they may be provided with short term, tailored support to resolve the identified barrier.
RECIPIENT RESPONSIBILITIES

In receiving Program Services, recipients must:

- Actively engage with the Department to resolve their immigration status. Failure to engage and comply with any milestones or reviews set by the Department may result in cessation of Program Services.

- Understand that resolving immigration status may include the recipient accessing the Return and Reintegration Assistance Program to facilitate a return to their country of origin, or a third party country as appropriate.

- Continue to comply with the terms and conditions of their visa or residence determination, including reporting to the Department and engaging with the SRSS Provider.

- Act honestly in all dealings with the Department.

- Contribute to a cohesive Australian community (for example, by engaging in social activities, learning English).
SRSS ELIGIBILITY

- A client may be eligible for SRSS support if they are actively engaged with the Department to resolve their immigration status AND have demonstrated barriers to resolving their immigration status.

- They may be provided with short term, tailored support to resolve the barrier, including services that support trauma counselling.

- Eligibility and individual circumstances are regularly reviewed, at minimum every 12 months.

- If the client does not engage with the Department, their circumstances change and they no longer meet the eligibility criteria, support may be ceased.
SRSS MEDICAL EVIDENCE

Evidence Required:

- Details of diagnosis by a qualified medical practitioner. What are the medical condition/s and symptoms?

- What is the client’s capacity to undertake/obtain employment to suit their current medical condition?

- Treatment plan including review periods outlined.

- If a specialist appointment (or diagnosis) is required, provide the date of appointment/s if known or a copy of referral.

- Medical certificate with evidenced timeframe that client/s are unfit to work – see New SRSS Medical Letter.
NEW APPLICATIONS FOR SRSS

Applications for SRSS can only be made with the assistance of SRSS Service Providers.

Clients can be referred to Service Providers through email, intake phone numbers and drop in – please see flyers provided at the door.

The SRSS provider assists recipients throughout the application process;

- Initial Service Provider Screening
- Collecting Evidence
- Completing Application
- Communicating with the Department of Home Affairs and medical professionals, where further information may be required
- Communicating the application outcome to the applicant.
The SRSS program model is regularly reviewed to ensure that it continues to meet the program intent.

A new procedural manual for SRSS service providers was released in March this year. Approval is now required for some services that were previously “pre-approved”.

All clients on program prior to March 2019 are required to complete a continued eligibility review (CER).

The purpose of the CER is to ensure that required services are available to clients, based on individual need.

Until a CER is completed, clients can continue to receive the “pre-approved” services that they were accessing prior to March 2019.

All new services are required to be approved by the Department.
ANONYMOUS

CASE STUDIES
Single adult male in his 50s with no work rights and long term homeless
Client was a NONIMA arrival in 2014
Client was suffering from poor physical health as a result of being long term homeless
Client possibly has undiagnosed mental health concerns but refusing to get this addressed.

This client presented to LWB in a desperate state he had been homeless for 3-4 years and had serious physical health concerns. Client was linked in with Tierney house and St Vincent’s hospital for the short term trying to resolve his immediate physical health concerns.

Client’s physical health made obtaining bank statements difficult and LWB assisted him to do this online and liaised with the caseworkers at Tierney House and St Vincent’s to minimise clients travel.

Client’s mental health was unknown, client would appear with exaggerated versions of the truth and it was very difficult to obtain factual information from this client which was particularly important as he had arrived to Australia via NZ where he had a failed business.

Client was initially refused on the grounds that he had received money from overseas and additional bank accounts he had not supplied.

As all applications are reviewed on a case by case basis the client was able to provide a statutory declaration explaining that he had as a once off transaction received funds from NZ which was a tax return. Client also explained in his statutory declaration he had forgotten about the outstanding bank account. Client was subsequently approved.

Client remains on program, however continues to suffer from persecutory delusions and exaggerations of grandeur and refuses to acknowledge any mental health concerns. He has accommodation but it is not stable. Client has applied for work rights but this has been declined multiple times.
Young single mother with a child under 1 year old.
NONIMA arrival, had experienced DV and homelessness.
Client had sent money overseas in initial application however was able to explain this with a statutory declaration explaining this money was earned whilst she was working and was sent to her mother who was very ill.

Client was approved and on program for one year, she was doing very well, had found safe accommodation and was engaging with LWB and community supports such as playgroup. Client was aware she was not able to send funds overseas and agreed to comply with this in order to remain on SRSS.

Client has excellent English and has previously worked in the disability field. Client wanted to do more than stay at home with her child and was keen to contribute to Australia and maintain her skills. As such client applied at TAFE to do a course with the view to being able to put her child in child care and work following completion of the course.

Client was aware she was not able to study full time but as the course was only 14 hours per week she did not think this would be an issue. Unfortunately the course was called by TAFE full time despite the low number of hours and client was immediately exited from SRSS services.

Client was being threatened by her landlord to be kicked out of her accommodation as she could not pay, client was about to withdraw from TAFE in any case as she did not realise she could not take her child with her to classes. Furthermore client had since researched the cost of childcare relative to her expected income and realised that this was not feasible.

The caseworker for this client worked closely with the intake officer and the client and an application was submitted explaining the situation and including evidence of expected income and cost of childcare along with a statutory declaration from the client. Client was approved to re-enter SRSS and as this occurred quickly she was able to keep her accommodation.
CASE STUDY:  
A REFUSAL

- Client was a male in his late 20s, IMA arrival
- Client suffered from undiagnosed mental health concerns / torture and trauma, poor English levels, gambling addiction, at risk of homelessness and ongoing back issues.

Client had been exited from SRSS as he was working approximately 18 months prior. Client initially approached LWB as he had lost his employment due to poor attendance. During the time the client was gathering documents he had successfully found employment at Coles and the SRSS application was placed on hold.

Several weeks later the client returned to LWB as he was no longer getting any shifts at Coles due to poor attendance but remained on their books.

Client returned his bank statements and a gambling addiction was uncovered (he had saved over $50,000 from working and when he lost his job tried to earn an income via gambling). Client was encouraged to go to a multicultural gambling service and was referred to STARTTS as a non LWB client.

An application was submitted and client was refused SRSS support as he still retained his position as an employee at Coles.

This refusal was approximately 6 months ago and under new DHA “case by case” guidelines this client’s poor attendance is clearly a barrier to his being successfully employed and could be resolved with casework support with the caseworker working with the client to resolve any mental health concerns and ensuring he engages in T and T support as well as linking client to community and potentially engaging with client’s employer.
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