
“Drug users often have limited skills or employment experience, meaning that any options around employability can be complex...”

JOINT-WORKING PROTOCOL BETWEEN JOBCENTRE PLUS AND TREATMENT PROVIDERS

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Gateway number: 15028

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1. INTRODUCTION

This joint-working protocol between Jobcentre Plus (JCP) and the National Treatment Agency for Substance Misuse (NTA) has been developed to support closer collaboration between agencies, to promote more effective action to address the employment-related needs of substance misusers and to contribute towards more positive treatment outcomes.

The Department for Work and Pensions (DWP) and JCP have been working closely with the NTA and the treatment sector since April 2009 to develop a more joined-up response to working with drug users who claim Jobseeker's Allowance (JSA) and Employment and Support Allowance (ESA) and who identify their substance misuse as a barrier to work. The focus to date has been on people using heroin and/or crack cocaine, but this protocol applies equally to clients accessing treatment for all substances, including alcohol.

Drug users experience a range of disadvantages related to their substance misuse including physical/mental health problems and unstable accommodation. They often have drug-related offending histories and limited skills or employment experience, meaning any future options around employability can be complex. Routes into work are a key feature of recovery as there are clear benefits to the individual in getting a job, with the employment helping to sustain the gains made in treatment. There are also wider benefits to society from reduced costs to the welfare system and associated public health and crime costs.

Recovery is at the heart of the government's new drug strategy, with employment-related needs a key theme.

2. THE ROLE OF DRUG AND ALCOHOL TREATMENT PROVIDERS, AND EMPLOYABILITY

Drug and alcohol treatment providers already discuss education, skills and employment-related needs as part of the assessment, with goals being agreed between client and keyworker as part of the care plan.

This protocol outlines a common approach for treatment providers and JCP to work more closely through a series of steps to ensure that employment-related needs are addressed early on in the client's recovery journey.

If a client is supervised under the terms of a community sentence with a Drug Rehabilitation Requirement (DRR), coordination of the client's education, training and employment needs is usually part of the offender manager's remit. However, the treatment key worker may be best placed to undertake this role while the individual is in treatment. In these circumstances lead responsibility will be negotiated and agreed between the offender manager and keyworker, and clearly set out in the client's care plan.

The protocol includes as key themes:

a) **The sharing of relevant information** gathered as part of the assessment and care planning process with JCP. This can only be done with the client's consent informed by the knowledge that:

- Relevant information about the client's employment-related needs will be shared with the Jobcentre in order to provide more coordinated input between professionals
- The client's records at JCP will be updated to reflect the client's ongoing treatment-related needs
- Information shared will be used by JCP solely to support the client in addressing their barriers to work.

b) **A three-way employability review** (where the client has consented to sharing information) at the care plan review stage between the client, the keyworker and the JCP personal adviser (or JCP provider). The care plan review is the natural stage in the client's treatment journey at which to collaboratively agree employment-focused goals with coordinated input from the client and the relevant professionals.

3. JOINT WORKING BETWEEN JCP AND TREATMENT PROVIDERS

The benefits of improved joint-working between JCP and substance misuse treatment providers include:

- The client is supported to comply with their benefit conditionality or any mandatory interaction with Jobcentre Plus services. It enables the client's Jobseeker's Agreement (JSAg) to take account of their treatment status through the use of legitimate flexibilities within benefit regulations and JCP procedural guidance
- The client's employment, training and skills needs are identified as early as possible during their recovery journey, so that appropriate provision and funding can be put in place to support them at the right time, acknowledging that JCP is best-placed to provide specialist support.

Both JCP and treatment provider staff will be required to 'sell' the benefits of joint-working to promote recovery. Keyworkers may find they need to raise the ambitions and aspirations of their clients as a part of the care planning process. They may also need to help in challenging some of the historical barriers and perceptions of JCP that may exist among their clients.

Drug awareness training has been provided to Jobcentre staff since April 2009 and this has been particularly effective when provided in partnership with the local drug treatment provider. Similarly, drug treatment keyworkers have benefited from having a sufficient understanding about the role of JCP and the range of provision that is available for clients.

JCP has developed a training package for use by JCP staff to support treatment keyworkers with their familiarisation of JCP processes and to ensure that treatment keyworkers have sufficient information to assist them in their keywork sessions.

4. JOINT-WORKING PROCESS STEPS

The following joint-working steps have been agreed as the common approach between JCP and treatment providers. They build on the existing voluntary referral process that has been in place with drug treatment providers since April 2009.

Step 1: JCP refers the client to the initial assessment with the substance misuse treatment provider

a) Once JCP or their contracted providers identify that substance misuse is a barrier to work, they will provide a suitable level of information to the client about what happens at the initial assessment with the substance misuse treatment provider and will 'sell' the benefits of treatment and of attending the appointment.

As a minimum, advisors will explain that:

- The appointment is a voluntary initial assessment with the treatment provider to discuss the nature and extent of the client's substance misuse
- The initial assessment will identify whether a more comprehensive assessment is required to agree a specific type of treatment with a local treatment provider, based on the client's needs. It will also identify any immediate needs, such as urgent health issues that need to be addressed as a priority
- Engagement in treatment following the initial assessment is voluntary, however there are likely to be direct benefits for the client's health and social circumstances through accessing treatment.

b) Where a client consents to the recording of sensitive information on the JCP Labour Market System (LMS), the DPA1 form will be completed by the adviser. JCP contracted providers are also required to take this action and return the DPA1 to JCP so that the LMS record can be updated.

c) Where the client agrees, advisers will then complete the referral TPR1 form and send to the treatment provider or via the agreed Single Point of Contact (SPoC).

d) JSA clients will be allocated to a designated JCP personal advisor for caseloading, a process that is also considered good practice for the JCP providers. The caseload advisor should be the most appropriate advisor for the client, dependant on the stage of the JCP Flexible New Deal the client has reached.

Step 2: Client attends the initial assessment

a) The client's substance misuse will be discussed with the treatment provider at the initial assessment and, where required, an appointment made for a further, comprehensive assessment.

b) The treatment provider can inform JCP or their contracted provider that the client has attended their appointment by completing and returning the TPR1 to JCP or their contracted provider.

c) The JCP contracted provider will notify JCP using their notification form. For Pathways providers this will be NFP form and for Flexible New Deal providers, the FND4.

d) If the client does not attend, treatment providers can return the TPR1 to JCP or their contracted provider confirming non-attendance. Non-attendance will then be discussed with the client at their next attendance or interview at the Jobcentre and a re-referral to treatment will be considered.

Step 3: The comprehensive assessment, care planning process and employment-related needs

a) Treatment providers make an assessment of a range of client needs at the outset of treatment through a locally agreed comprehensive assessment tool. This includes a section on social functioning.

b) Social functioning refers to the needs identified with the client in relation to:

- Education and skills
- Employment
- Benefits
- Accommodation
- Family and child care issues.

A heightened focus on social functioning as part of the comprehensive assessment and care planning practices is likely to lead to improved recovery for clients in treatment, particularly if addressed early on in the treatment journey. As part of the comprehensive assessment, it would be beneficial to identify and record the following information in relation to employment and benefits:

- Whether the client is claiming JSA or ESA and, if so
- Whether the client has a JSAG and/or action plan
- Employment and skills-related needs and goals agreed with JCP as part of the JSAG or action plan
- Whether the client's needs and aspirations identified in the comprehensive assessment match those discussed with JCP
- The benefits of closer working between the treatment keyworker and the Jobcentre.

c) Care planning is the process by which mutually agreed goals and interventions based on the needs identified in the assessment are then agreed between the client and the appointed keyworker. The care plan will include the steps by which the goals will be achieved and will be reviewed at regular (usually every 12 week) stages.

Step 4: Sharing information using the TPR2 form

a) The new form TPR2 can be used by the treatment provider to:

- Share employment-related information with JCP gathered at the comprehensive assessment and care planning stages and to provide notification to JCP that the client has engaged in structured treatment
- To request a review of the client's employment goals with JCP, either by the client attending the Jobcentre alone or as part of the three-way employability review
- To inform the Jobcentre that the client has exited from the treatment system.

b) Following completion of the care plan, and where the client gives consent to do so, the keyworker may share the relevant employment-related information and goals with JCP or its contracted providers. Related information and client consent are recorded on the TPR2 and the form is returned to the Performance Team Leader (PTL) or nominated officer at the Jobcentre or the contracted provider. See Appendix 1 for a copy of the TPR2.

c) This will provide the first opportunity for information about the client's employment-related needs to be shared between agencies. It will also inform the Jobcentre or their provider that the client has begun structured treatment, allowing this information to inform JCP mandatory activities.

d) It would be beneficial for the treatment keyworkers to 'sell' the benefits of closer working with the Jobcentre to the client as part of the discussion about sharing information. To do this, keyworkers will need a sufficient understanding of the role of JCP. The training materials developed by JCP will assist keyworkers in having a more knowledgeable conversation with the client about their interaction with the Jobcentre.

Step 5: JCP action on receipt of the TPR2 for clients referred to treatment by JCP

a) If the client has started treatment as a result of a JCP referral the PTL will note receipt of the TPR2 in the Labour Market System (LMS) and pass the form to the relevant adviser.

b) The JCP adviser will take steps to ensure that the client's records are updated to reflect their treatment status and employment goals. The adviser will decide whether an ad hoc interview is appropriate to review the client's JSAG.

c) If the client has a mandatory 13 or 26-week interview planned and if JCP consider this to be an appropriate time, they can agree to this interview being used for the three-way employability review with the treatment provider keyworker, as outlined in Step 7.

d) At any stage the JCP personal adviser can consider fast tracking the client to stage 3 Flexible New Deal for intensive help if it is felt this would be appropriate for the client.

Step 6: JCP action on receipt of the TPR2 for client already in treatment and not referred by JCP

a) Where the client consents, keyworkers can share employment-related information with JCP following assessment and care planning regardless of the client's referral route into treatment. Keyworkers can use the TPR2 to record client consent and to share relevant information with JCP following the process outlined in Step 4.

b) Where the TPR2 is returned by the treatment provider for a client in treatment and the referral was not made by JCP, the PTL or nominated officer will check the DPA1 action is current, update the LMS client record with information detailed on the TPR2 and refer the client to an adviser to take appropriate action as detailed above in Step 5. Where no DPA1 exists, JCP or the contracted provider will complete one at the customer's next attendance and update LMS.

c) Where JCP has no trace of the client because the client may not be claiming benefit despite entitlement, the PTL or nominated officer will return the TPR2 to the treatment provider for further discussion with the client.

d) For clients already in treatment for some time and not referred by JCP, this process is likely to be initiated at the care plan review stage where the keyworker and client will have the opportunity to discuss the benefits of joint-working with JCP and of arranging a three-way employability review as outlined in Step 7 below.

Step 7: The three-way employability review at care plan review stage

a) At the care plan review stage (normally at 12 weeks) the keyworker will undertake a review of the goals agreed with the client and recorded in the care plan. This will include the goals related to social functioning, such as employment-related goals.

b) Where the client consents, the keyworker can arrange a three-way employability review with the client and JCP or their contracted provider. The three-way employability review is a face-to-face meeting and takes place at Jobcentre premises unless different local arrangements have been agreed.

c) The keyworker will contact the PTL or nominated officer at the client's Jobcentre or contracted provider to arrange the appointment for the three-way employability review to take place. Telephone contact details can be agreed at a local level between Jobcentre and treatment provider.

d) The PTL or nominated officer will check the date of the next scheduled appointment and offer this to the keyworker in the first instance. Where the client has no prearranged or mandatory outstanding appointment the PTL or nominated officer will offer the next available appointment with the relevant caseload adviser.

e) The key aims of the three-way employability review are to:

- Review the training and employment goals identified by the client at the initial care plan stage or the previous care plan review
- Ensure there is consistency between the care plan and the JCP JSAG or action plan and to reflect that the client is in treatment
- Agree an individual package of support for the client depending on their needs and assist them in accessing the range of available services, including:
 - Basic skills support
 - Work-focused training
 - Progress2work/employment-support programmes
 - Volunteering opportunities
 - Work trials
 - Advice and support around self-employment
- Raise awareness among Jobcentre staff of the client's progress in treatment and for this to be discussed in relation to the client's ability to manage their benefit conditionality and the type of benefit the client is claiming
- Ensure that training and employment aspirations identified by the client are achievable and realistic within the labour market
- Support those clients in treatment who are at an appropriately stable point in their recovery to apply for jobs
- Support and advise clients around disclosure to employers.

Step 8: Joint actions throughout the client’s recovery journey

a) It is the role of JCP and their contracted providers to discuss the client’s employment and skills needs and ensure access to the appropriate provision and support is made available. The client’s JSAg/action plan will be amended as appropriate to include information shared by the treatment provider at both treatment engagement stage and as discussed at the three-way employability review. This is an opportunity for JCP interventions to reflect the client’s current treatment status and progress.

b) Further three-way employability reviews may be aligned to ongoing care plan reviews, although the frequency and method may be dependent on client needs. Under current arrangements, the advisor can consider fast-tracking the client to Stage 3 Flexible New Deal for intensive help if it is felt this would be appropriate for the client.

c) If a customer requests that a three-way employability review is arranged while attending an appointment at the Jobcentre or the contracted provider, they will be advised to contact their keyworker who will liaise with the PTL or nominated officer to arrange this as outlined above.

Step 9: Client exits from the treatment programme

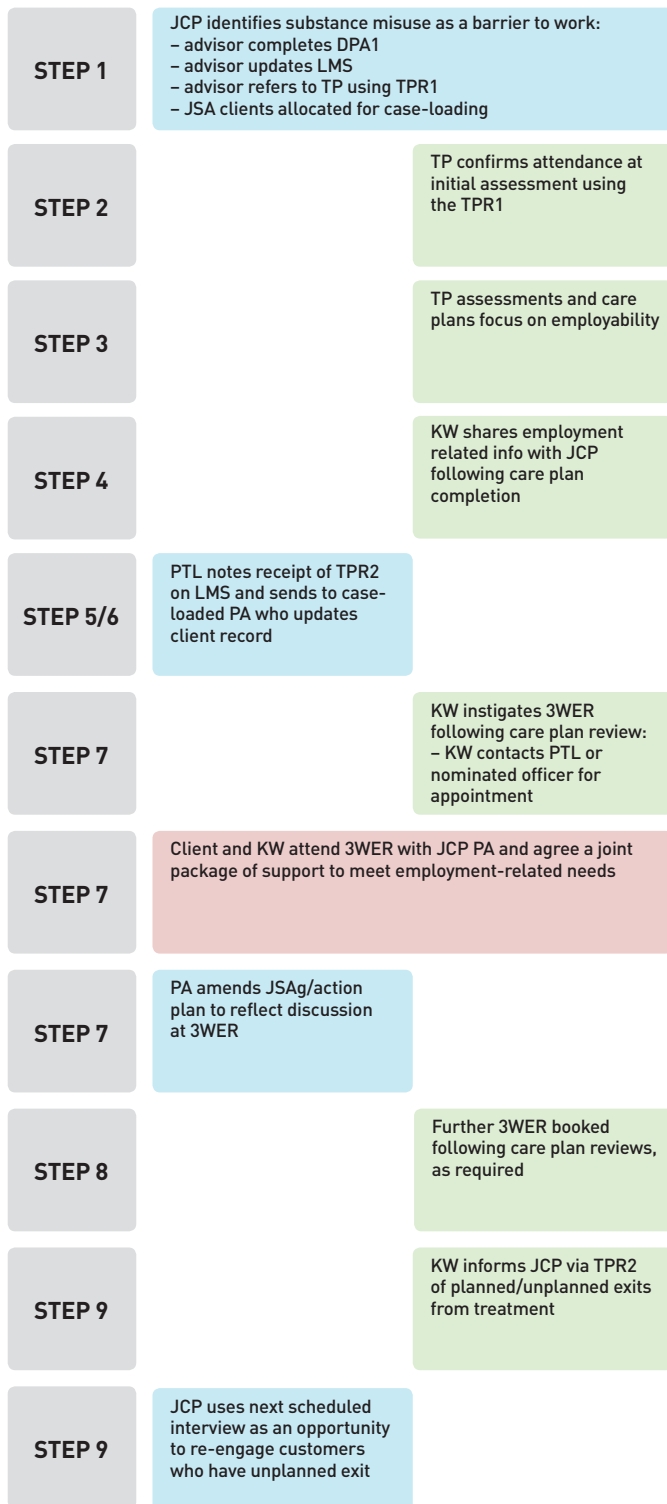
a) Where the client has already given consent to share employment-related information with JCP, this will have been recorded on the TPR2 and sent to JCP. This process includes consent to inform JCP when the client has either a planned or an unplanned exit from the treatment system.

b) Where this is the case, the keyworker can use the TPR2 to notify JCP or their contracted provider of any planned or unplanned exit from treatment and send the TPR2 with Part 6 completed to JCP or the contracted provider. JCP remains in regular contact with clients who may have dropped out of treatment. On receipt of the TPR2 and where the exit is unplanned, JCP and its contracted providers are in a key position to talk to clients about their treatment and to assist in their re-engagement.

c) Treatment providers will have local discharge protocols in place for clients who disengage from structured treatment and JCP and its contracted providers may therefore be included in local discharge protocols, clarifying their re-engagement role.

d) Where the exit is planned, JCP or its contracted provider will take appropriate action to ensure that the client record is updated.

5. FLOWCHART



Light Blue	Steps for JCP	3WER	Three-way employability review	
Light Green	Steps for providers	PA	JCP personal advisor	
Light Red	Steps for both	LMS	Labour Market System	
	DPA1	Consent to record sensitive info on LMS	TPR2	Information sharing form
	TPR1	JCP referral to treatment form	JSA	Jobseeker’s Allowance
	TP	Treatment provider	JSAg	Jobseeker’s Agreement
	PTL	Performance team leader	KW	Keyworker

APPENDIX 1: COPY OF FORM TPR2

jobcentreplus

Treatment provider referral form

Part of the Department for Work and Pensions

From: Treatment provider name, address and telephone number

To: Jobcentre Plus or contracted provider

Drug strategy referral see completion notes
 ESA JSA

Other benefit or other substance referral Benefit not known

Part 1 Customer's personal details – Treatment provider to complete

Title Mr Mrs Miss Other

Surname

Other names

Address

 Postcode

Date of birth / /

NI number Letters Numbers Letter

Current contact number

Treatment accessed via Self referral GP or Medical professional referral Jobcentre Plus or provider referral Criminal justice referral

Part 2 Employment, education and skill needs – Treatment provider to complete

Reason for referral include employment goals, training and support required

Personal advisor name

Contact number

