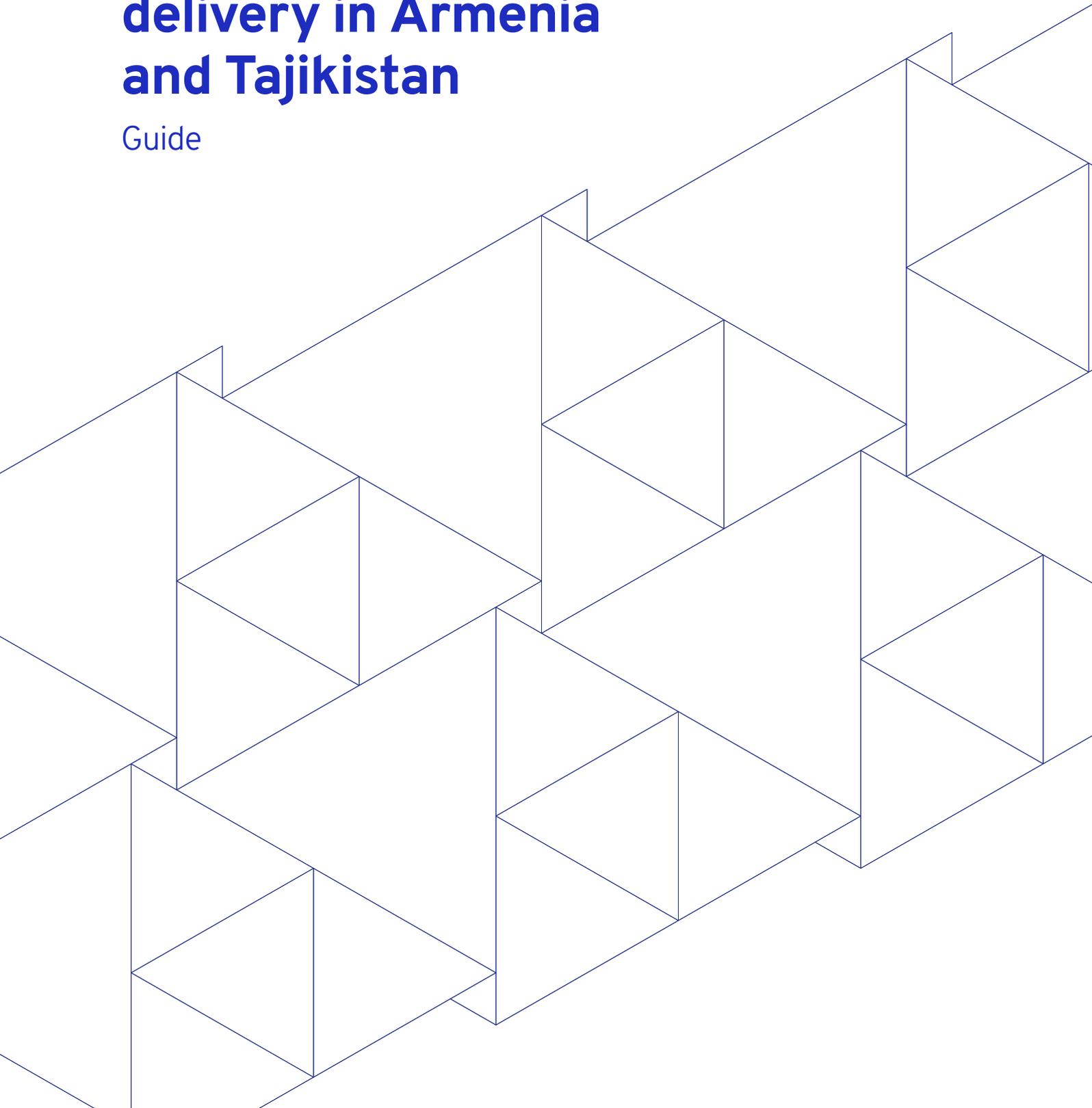




International
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► Improving coordination of social protection and employment service delivery in Armenia and Tajikistan

Guide



▶ **Improving coordination
of social protection
and employment service
delivery in Armenia
and Tajikistan**

Guide

Dr. Anette Scoppetta

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▶ Abstract

The Guide aims to assist the Republic of Armenia and the Republic of Tajikistan to build up integrated case management. Integrated case management is understood as an innovative practice which is employed collectively especially by respective agents of employment and social security to serve the most vulnerable with all available resources from both the labour market and the social protection system, and even beyond. The Guide recommends the setting up of integrated case management systems that are embedded in partnership structures.

► 1. Introduction

The Guide has been developed to assist the Republic of Armenia and the Republic of Tajikistan to establish Integrated Case Management (ICM) systems embedded in partnership structures. Integrated case management is understood as an innovative practice employed collectively by the respective agents of employment and social protection to serve the most vulnerable with all available resources within both the labour market and the social policy system, and even beyond. It builds on the two assessment reports 'Improving coordination of social protection and employment service delivery' in Armenia and Tajikistan ("the Assessment Reports").

After the Introduction (Chapter 1), the Guide presents the Status Quo of ICM implementation in both countries (Chapter 2), followed by methods and tools for improving cooperation and policy delivery (Chapter 3). Examples of good practices of ICM implemented in European Union Member States are presented in the Annex.

▶ 2. The status quo of Integrated Case Management in Armenia and Tajikistan

The status quo regarding current practices of ICM in Armenia and Tajikistan was analysed during the period from January to March 2022. The findings of this analysis are presented in the Assessment Reports and summarized in this chapter.

The use of ICM in practice is very limited in both countries. It seems that the social policy system and the labour market system frequently operate separately from one another. Even when entities exist that aim at implementing integrated approaches such as the Integrated Social Service Centres in Armenia, interconnection between the policy systems is weak. There is no *collectively practiced* ICM system in place in the two countries that makes the best use of all available resources in helping clients throughout the entire integration and inclusion process.

The recommendations provided in the Assessment Reports emphasise the need for building up partnerships, i.e., practised intensified collaboration, especially at the interface of labour market and social policy, to deliver integrated services. Such partnerships could assist in the implementation of ICM, with verified priority-setting considering diverse local/regional/national contexts. Variations that need to be taken into account include different levels of (social) capital available in regions, with (proactive) local actors and institutions at various locations, different legal frameworks, and available sources of funding. In both countries, partnerships could provide an overall framework for the implementation of locally modified ICM actions. Partnerships between the two agents should be supported by legal and policy frameworks in both countries.

Analysis of the macro (policy level), meso (organisational level) and micro level (beneficiary level) has shown that much remains to be done for partnerships to flourish at the interface of labour market and social policies. The two systems, i.e., employment and social protection, should be interconnected instead of operating separately as 'policy silos'. It is necessary to increase flexibility and remove barriers that hinder collaboration between operating institutions. In addition, the workflow processes of the agents should be improved. It is recommended to organise comprehensive and joint capacity-building and training of social protection staff (social workers) and employment councillors to implement ICM system in practice.

To sum up, the Assessment Reports show that there is a lack of cooperation observed between the agents in Armenia and Tajikistan. We recommend enhanced cooperation for the implementation of ICM actions in both contexts.

► 3. Methods and tools for improving cooperation and policy delivery

As set out in the Assessment Reports, we recommend implementing ICM embedded in partnership structures. Consequently, there is a need to invest in the establishment of partnerships as a specific form of cooperation between employment and social protection agents that is characterised by *joint objective setting and decision making*, as well as shared commitment between actors (see, for instance, Scoppetta, 2013; Co-Ordination Unit of Austrian Territorial Employment Pacts, 2000).

A step-by-step approach towards building up intensified cooperation and improved ICM consist of the following five key steps for both countries:

- 1. Formalize cooperation between the social protection and employment departments
- 2. Expand offers of benefits & services
- 3. Human Resource Development – Invest in employees
- 4. Establish unified database
- 5. Implement ICM Standards
- 6. Expand partnership

STEP 1: Formalize cooperation between social protection and employment departments

As the **first step**, we recommend strengthening the systemic link between employment and social protection by formalizing cooperation via standard procedures, rules, and protocols at all levels of governance so that the best available services can be offered to clients.

In improving collaboration between the two agents for an ICM system, we recommend clarifying the following issues between the two agents responsible for employment and social protection as the primary actors in the ICM system at this early stage¹:

- **Joint agreement on targets:** clarify and provide answers on questions such as *‘what do we want to achieve together to improve policy delivery for the benefit of the client?’*. This process may also involve clarification of the profiles of clients to be included in the ICM system.
- **Joint assessment of the available tools** of both agents that already have proved to work out successfully. These can comprise *jointly or individually* practiced needs assessment tools/profiling of clients, individual action plans (social and employment plans), codes of ethics (regarding interactions with clients), service planning tools, coordination mechanisms, and monitoring tools, etc.
- **Joint assessment of the available resources** of both agents: e.g., *‘which services can and should we together offer?’*, *‘what resources (knowledge, services, tools, etc) can each of us bring into the cooperation?’*, *‘where does it make sense to cooperate and where is no need (yet/at this stage)?’*
- **Clarification regarding the responsibility and accountability** for each single action and the tasks involved in these actions. At the very beginning of collaboration, shared responsibilities are to be favoured only when tasks are clearly distinguished. If tasks of actions are split between agents, it is advised to arrange agreements on who will be responsible for the coordination of each single action.

¹ Adapted from Scoppetta, A., Leichsenring, K. & Lelkes, O. (2018)

- ▶ Discussing the **role and function of each agent**, as well as those of the countries' ministries of labour and social policy (and other relevant central level actors).
- ▶ Clarification on the **joint assessment of the actions** to ensure that the proposed measures for improvement are complementary and coherent.
- ▶ Agree on **standards of procedures** (communication, etc.) with each other (management of cooperation) and on jointly implemented tools (measures).

The checklist on roles and functions in the info box below (Info Box 1) can be used to clarify these.

▶ **Info Box 1: Checklist on Roles and Functions**

- ▶ Discuss, define and jointly decide on the roles & functions of each agent;
- ▶ Reflect on roles and functions regularly;
- ▶ Clarify the obligations, responsibilities and constraints on the capacity of agents;
- ▶ Balance interests and contributions carefully;
- ▶ Make best use of the strengths of the two agents;
- ▶ Establish a strong management structure (see below);
- ▶ Ensure funding for partnership co-ordination

OECD LEED Forum on Partnerships and Local Governance, 2006 (adapted)

Experience shows that it is helpful to formalize agreements with each other in writing. These include agreements of targets, jointly or individually used tools, roles and functions, resources as well as interests and other contributions. The clarification processes are followed by a joint management of interventions during ICM implementation. To serve this goal it is recommended that a *Coordination Board* is set up as a formalized body.

► Info Box 2: Coordination Body

Coordination Bodies encompass all actors involved in the design, implementation, and evaluation of interventions. This includes all interventions jointly agreed to be implemented such as individual action plans of clients, referral processes, etc. The Body clearly defines the actions to be taken when implementing the ICM system.

In formalizing cooperation between the employment and social protection agents both countries can build on existing expertise, as described in the two experience boxes below (Experience Box 1 and Experience Box 2).

► Experience Box 1: Integrated Social Service Centres in Armenia

Armenia can build on the 49 **Integrated Social Service Centres (ISSC)**

Collaboration between Centre's staff and departments can easily become formalized, procedures standardized, and rules and protocols developed. Counsellors can thereby be assisted in the information exchange so that the best available services can be offered to the clients.

► Experience Box 2: Approach at local administration level in Tajikistan

Tajikistan can build on the approach applied at **local level**.

The integrated approach could be introduced at local level by the Chair/Deputy Chair of the local administration who already supervises various policy areas such as health care, education, employment, and social protection. (Funding) options can be gathered and respective specialists informed to assist the client holistically.

STEP 2: Expand offers of benefits and services

The assessment reports have shown that both Armenia and Tajikistan are lacking key measures that provide a poverty reduction:

- ▶ Armenia. The unemployment insurance system is not in place and activation measures supporting the working age population able to work to actively seek employment or to engage in measures of active labour market policy are limited in scope.
- ▶ Tajikistan. Overall investment into labour market measures, excluding the unemployment benefit is about 0.4% of the total social protection spending. This means that the scope, diversity, and coverage with active labour market policies is very limited. The amount of the Targeted Social Assistance (TSA) is small and intended primarily for persons/families living in extreme poverty.

For an effective ICM which results with changes in client's situation (i.e., having basic income and inclusion into labour market) two key preconditions in the service offer need to be met: the availability of adequate monetary and non-monetary benefits and services for both employment and social assistance beneficiaries/clients.

In the **second step** we recommend expanding offers (benefits and services), especially by introducing unemployment benefits in adequate amounts and activation measures for active age population in Armenia and increasing the level of existing benefits in Tajikistan. Diversification of active labour market measures based on labour market demand is required in both countries.

STEP 3: Human Resource Development – Invest in employees

Knowledge about ICM of respective agent's staff is limited in the two countries. Staff fluctuations are reported to be high and in some regions of the countries the number of counsellors seem not to be adequate for implementing ICM.

In the **third step** we thus recommend investing in the employees of the agents via qualification measures and hiring new staff well-skilled in ICM. Comprehensive training on ICM and the use of the protocols and guidelines of staff is regarded a necessity in both countries and must be conducted on a regular basis (repeated annually for new staff and expanded/deepened for skilled staff).

Case Managers are a core function for an effective ICM and for coordination of use of all the locally available measures and services (see Info Box 3).

▶ Info Box 3: Case Managers

Case Managers are core function for an effective ICM. They coordinate the services for the pathway of clients throughout the entire social inclusion and integration chain. Case Managers make use of all the locally available measures and services of the two agents. Their goal is to assist the client progressively in the social inclusion process, including both labour market inclusion and inclusion into society.

Inclusion into society means empowerment and the provision of social services and low-threshold service that enable vulnerable groups to reintegrate, engage with other members of society and to improve their overall well-being. This can be achieved by various means incorporated into the ICM model, such as self-confidence training, integration chains, support from social workers, drug advice and debt counselling, alongside other measures. Case Managers advocate on behalf of their clients and ensure that gaps in services are brought to the attention of higher levels of local and regional governments. Case Managers may be employment counsellors, staff from social protection agents (e.g., social workers) or other local experts trained and experienced to use the ICM method. Case Managers are the key persons for implementing ICM and thus are responsible for the overall supply of measures and services to the client (e.g., needs assessment, individual action/activity plans, access to labour market, etc.).²

The key competencies of a Case Manager must include the ability to create a good quality relationship with service users, as this will fundamentally influence the process and outcome of case management. Professional relationships are often based on unequal power due to the position and specialized knowledge of Case Managers. Appropriate use of power protects the client's vulnerability. Developing and safeguarding trust is essential, and this depends on the Case Manager's ability to communicate clearly and openly, avoiding misunderstanding and disappointment. Respect for the client's dignity is also a crucial element. The Case Manager needs to understand the service user's culture and values and not become side-tracked by any behaviour that is not relevant to the outcome. The Case Manager should ensure that his/her actions and communication adequately reflect positive regard to sustain enduring empathy. Crucially, however, the Case Manager also must be able to ensure their own safety and physical and psychological wellbeing. In addition to overall qualifications criteria, Case Managers have a duty to ensure that their skills match each case. *"When accepting a case, it is the personal responsibility of the Case Manager to ensure that their skills, competencies, experience, and qualifications match the requirements of the case."* (CMSUK 2009 p. 9).³

STEP 4: Establish a unified database

In the **fourth step** we recommend extending cooperation between the two agents by including data exchange and the setting up of a joint database with which referrals can easier be undertaken. Until the unified database is functional, counsellors should use other tools for exchange such as case conferences (see Info Box 4).

► Info Box 4: Case conferences

Case Conferences are multidisciplinary meetings of professionals working with a client to share necessary information on the client (socio-economic status, history of benefits, services offered, etc.) and discuss risk factors; the needs of the client; required supervision and support interventions; and the roles of the professionals involved. The aim of Case Conferences is to review service options across sectors and agencies and to make formal decisions with the best interest of the client.⁴

² Adapted from Scoppetta, A., Leichsenring, K. & Lelkes, O. (2018).

³ *ibid.*

⁴ Adapted from https://bettercarenetwork.org/sites/default/files/2021-10/143.11_EN_SOP%20Case%20Conferencing_26Oct2021.pdf.

STEP 5: Implement ICM Standards

To support streamlined implementation and to facilitate institutionalised models of interventions such as the ICM system, it is recommended in the **fifth step** that *Integrated Case Management Standards* are developed, such as practiced in Scotland/the UK (see CMSUK, 2014).

Suggestions for standards required for case management processes comprise the definition and purpose of integrated case management (and each process and action undertaken), the needs assessment process, the selection of the case management model, the action/activity plan and its updates, monitoring and evaluation of the implementation (ensuring quality assessment of the actions), crisis intervention and, finally, case closure (see Info Box 5). It is important to note that standards must be discussed, developed and *agreed upon jointly amongst all actors* to ensure ownership.

▶ Info Box 5: Case management standards

- ▶ The definition and purpose of ICM (and each process and action undertaken)
- ▶ The needs assessment process
- ▶ Selection of the ICM model (different actions may be chosen in various contexts)
- ▶ Action/activity plan
- ▶ Monitoring and evaluation of the implementation (including quality assessment)
- ▶ Plan update
- ▶ (Optional) Crisis intervention; and
- ▶ Case closure

(see Scoppetta, A., Leichsenring, K. & Lelkes, O., 2018)

STEP 6: Expand partnership

Partnerships can help not only to improve workflow processes between the two agents, but even beyond. The bilateral cooperation of employment and social protection agents should be expanded to other actors such as NGOs offering services, municipalities assisting in embedding measures to local contexts, enterprises offering jobs and research assisting in measuring effectiveness of the policies jointly implemented by actors. This is necessary since the two agents working alone may fail in serving clients with all available resources due to a lack of know-how and resources. This Guide thus aims to help develop institutionalised cooperation amongst all relevant actors on the ground.

In the **sixth step** we recommend extending the formalized cooperation between the two agents and develop locally based partnerships with actors such as municipalities, companies, NGOs, etc.

Both countries can already build on respective expertise in this area:

- In Armenia, the ISSCs already cooperate with the private sector (firms, NGOs, research institutions). Already established Social Dialogue Committees on local level⁵ could play an important role not only for assigning benefits but providing support to Case Managers and establishing the link to businesses (see Experience Box 3).
- In Tajikistan, the Centres for Adult Learning⁶ and Centres for Career Guidance⁷ could serve as entry points of enhanced cooperation. In addition, job fairs are taking place regularly and conferences with employers, trade unions and the State Agency of Labour and Employment (SALE) implemented that may be used for strengthening cooperation with the private sector (see Experience Box 4).

► Experience Box 3: Social Dialogue Committees in Armenia

Armenia can build on the **Social Dialogue Committees**.

The Social Dialogue Committees (territorial conciliatory committees) are designed to organize the adoption of the various collaboration agreements at community level.⁸ Currently, the committees are mainly involved in establishing the eligibility of families to receive cash benefits, but their functions could be expanded to support employment services and referral to employment programmes.

► Experience Box 4: Cooperation with companies practiced in Tajikistan

Tajikistan can build on the cooperation with the **private sector**.

Job fairs are taking place regularly and conferences with employers, trade unions and the SALE implemented. Well-functioning collaboration is reported especially with international companies. Building on that, Memoranda of Understandings (Cooperation agreements) could be signed that formalize cooperation with the private sector.

5 Republican Tripartite Commission; see e.g., https://www.ilo.org/wcmsp5/groups/public/---ed_mas/---program/documents/genericdocument/wcms_724816.pdf.

6 <http://aeat.tj/ru/main/>.

7 See for instance, <https://www.adb.org/sites/default/files/publication/691671/tvet-tajikistan-central-asia.pdf> (page 43); <http://www.uniwork-project.eu/content/%E2%80%9Ccareer-centres-and-students-job-preparation-training-internships%E2%80%9D-4th-uniwork-training>.

8 Government of Armenia, Unified social service charter, law no.37/L, 2021

Partnerships apply a *formalised approach to collaboration* by signing agreements. Some disadvantages of such formalised approaches have been recorded, such as inflexibility and excessive administration (Scoppetta, 2013). Nevertheless, the advantages of a formal approach outweigh these drawbacks and encompass a clear framework and rules for joint actions, greater partner responsibility, legal power, and results.

Partners together hence:

- ▶ discuss problems of social exclusion and employment, and especially specific causes of unemployment, as well as the strengths and weaknesses of the areas and regions concerned and possible ways of improving the situation and encouraging job access and creation for vulnerable groups;
- ▶ discuss the current collaborative situation and already-practised forms of cooperation and ways to improve these, including challenges and obstacles to cooperation, by also assessing institutional capacities such as skills, staff, resources in terms of space and internet, etc;
- ▶ improve methods for measuring and analysing the social and employment situation, evaluating social and employment policies and improve the know-how and technical skills of the various partners;
- ▶ identify and analyse previous and new initiatives or pilot schemes that may have a significant impact in terms of job creation (i.e., pooling the experience of the various participants in the partnership);
- ▶ connect with other partnerships to learn from their experiences;
- ▶ devise (new) arrangements for cooperation and consultation between the various partners;
- ▶ identify the margins for manoeuvre and resources available to each partner; and
- ▶ seek a consensus to develop **joint solutions for the problems** analysed (see also European Commission, 1999).

When jointly implementing interventions under the roof of a partnership, extended clarification processes must be accomplished. The partners will have to discuss, agree, and clearly define their roles, functions, responsibilities, resources, and budgets allocated for the intervention per partner institution. All interventions should be integrated in the work programme of the partnership and a partnership agreement signed between all partners.

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► Annex

Examples of good practices in EU countries

Examples of good practices implemented in EU countries can assist in the process of setting up ICM. The following practices are presented in full in the “Integrated Case Management of Employment and Social Welfare Users in the Western Balkans – Guidelines and Good Practices”.⁹ They can also serve as an orientation for improving ICM approaches in Armenia and Tajikistan.

The one-stop shop of the NAV Reform (Norway)

Title	NAV Reform – One-stop shops
Country	Norway (implemented across all municipalities)
Rationale	In Norway the division between employment and social welfare administrations and services has been a major challenge. Norwegian policymakers perceived the separate administration of pensions (including disability pensions) as a major obstacle for the effective implementation of strategies for activating workers rather than paying (disability) pensions or social assistance benefits. By merging three institutions – i.e., employment services and pension administration at national level, social welfare offices at local level – all service staff in one-stop shops would be able to provide a more integrated service.
Type/level of intervention	Multi-level governance reform based on ‘mandatory partnership agreements’
Stakeholders involved	The central government (responsible ministries); the Norwegian Parliament; the Association of Local and Regional Authorities; national social insurance and employment services - the Norwegian Welfare and Labour Service (NAV). Local one-stop shops have been established at municipal level. The larger organisation, the Norwegian Welfare and Labour Service (NAV), is represented at three administrative levels: national, regional, and local. At national level, two central agencies for employment and pensions (i.e., the Directorate of Labour and the National Insurance Administration) have been merged to form a new Directorate for Labour and Welfare. At municipal level, the administration of social services has been included. ¹⁰
Objectives	This new type of multi-level governance aims at making services seamless for service-users at local level. The overall goals are <ul style="list-style-type: none"> ► to increase the size of the working population through activation and to reduce the number of people dependent on welfare benefits; ► to make services more accessible and user-friendly; and ► to increase the efficiency of employment and social welfare administration.

⁹ <https://www.euro.centre.org/publications/detail/3209>.

¹⁰ Lægneid, P. and Rykkja, L.H. (2013). *Coordinating Norwegian Welfare: The NAV Reform*. Bergen, University of Bergen (COCOPS Paper, www.cocops.eu).

Title	NAV Reform – One-stop shops
Activities, methods and funding	<p>In 2006 the Norwegian government implemented a reform of the Employment and Welfare Administration (NAV) by merging the national insurance and PES administrations. Although the administration of social services (social assistance) remained a local government responsibility (following intense negotiations), the reform established a one-stop shop as a joint front-line service in each municipality.¹¹</p> <p>A written partnership agreement was signed between the municipalities and the central government. Local governments could thus choose which other municipal social services, in addition to social benefits, could be included in the 'NAV office'.</p> <p>To date, there are a total of 457 local NAV offices and 19 county offices.¹² An important instrument in this reform has been the introduction of case work and case management offering a broader support portfolio. This entailed intensive (re-)training of staff and the development of structural solutions incl. standardized rules, IT systems and related software.</p>
Challenges	<p>This reform has been one of the largest in Norwegian history. It faced a wide range of challenges concerning coordination, partnership arrangements and other issues related to the complexity of merging diverse types of organizational cultures.¹³ (Christensen et al., 2013), e.g., reactive approaches in providing pensions (pension agencies) as against activation approaches in PES. The establishment of one-stop shops was not only a joining-up at the base. The NAV reform also involved joining-up at the top through the establishment of a new Employment and Welfare administration under the Ministry of Labour. This led to ambiguous accountability relations, since NAVs report both to municipalities and to central government. The establishment of the NAV offices was thus largely a case of policy design from the top of a comprehensive and structural reform.</p>
Achievements	<p>The reform tried to overcome existing fragmentation but could "<i>hardly be characterized as an unqualified success</i>".¹⁴ General case management includes needs clarification, assessment of the client's ability to work, and the construction of an activity plan. As a result, some decision-making has been transferred to specialized units at regional level. For the most vulnerable groups this reform has improved the possibilities of getting back into work, since it is now easier for social workers (and other Case Managers) to work across sectors. It still seems to be too early to assess the results of the reform, however, as many effects of the reform may only become clear over a longer period.</p>

11 Askim, J., Fimreite, A.L., Moseley, A. and Holm Pedersen, L. (2011). One Stop Shops for Social Welfare: The adaptation of an organisational form in three countries. *Public Administration*, 89(4), 1451–1468.

12 Læg Reid, P. and Rykkja, L.H. (2013). *Coordinating Norwegian Welfare: The NAV Reform*. Bergen, University of Bergen (COCOPS Paper, www.cocops.eu).

13 Christensen, T., Fimreite, A.L. and Læg Reid, P. (2013). Joined-up government for welfare administration reform in Norway. *Public Organization Review*, DOI 10.1007/s11115-013-0237-8, 1–19.

14 Ibid, p.15.

Cooperation for clients with complex problems (Slovenia)

Title	Cooperation in cases of clients with complex problems
Country	Slovenia (implemented across all regions)
Rationale	<p>Staff from the Public Employment Service (PES) and the Centres for Social Work (CSW) hold regular meetings to jointly discuss cases of unemployed clients with complex problems that cannot be solved by the PES on its own (e.g., drug or alcohol abuse, mental health problems, serious social problems). They have set up committees made up of experts from the two organisations and rehabilitation specialists.</p> <p>An unemployed person who is presumed to have problems with addiction, mental health and/or other major social problems is referred to a special inter-institutional committee. The committee consists of at least three members: an employment counsellor, a social worker and a rehabilitation counsellor. The committee meets twice a year. If the committee is of the opinion that the unemployed person needs help/support aimed at the elimination of his/her social problems or distress prior to his/her active participation in the labour market, on the basis of the agreement recorded in the Employment Plan the person is referred to the relevant CSW. The Employment Plan also contains a deadline for the unemployed person to appear at the CSW for further treatment. Once the personal problems are solved, the CSW informs the Employment Office and instructs the unemployed person to report to the Employment Office.¹⁵</p>
Type/level of intervention	Micro and meso level, based on national guidelines; policies at macro level
Stakeholders involved	<p>Three actors are involved: the national, regional and local offices of the PES of Slovenia, regional and local offices of the CSW, and the Slovenian Human Resources Development and Scholarship Fund. (The Fund performs activities such as life-long career orientation, on-the-job placement, job-sharing and education and training based on a contract with the respective ministry.)</p> <p>The actors cooperate at national and local level. Cooperation between the Employment Service of Slovenia (its Employment Offices) and the CSWs is facilitated by an information system. Their registers are linked and allow an effective exchange of two sets of relevant data: whether the person is included in the Register of Unemployed Persons and whether they are a beneficiary of social assistance in the form of cash. The data are refreshed at the e-Social portal every night.</p>

¹⁵ Stropnik, N. (2015). ESPN Thematic Report on Integrated Support for the Long-Term Unemployed: Slovenia. European Commission. URL:ec.europa.eu/social/BlobServlet?docId=14283&langId=en.

Digitalised case management (Denmark)

Title	Digitalised case management
Country	Denmark (covering nearly all municipalities)
Rationale	Danish multidisciplinary teams use digitalised case management that provides access to all stakeholders involved in the support of clients. Not only municipal departments but also external experts can access and edit these digital profiles, which significantly enhances the transparency of the actions taken by the stakeholders. The claimants are required to submit job applications and upload these to a job log (jobnet.dk) that is part of the file on the person. The data protection policy is an integral part of this scheme and is publicly available. The Ministry of Employment also runs an online database (jobindsats.dk) with information on social security and activation for everyone in Denmark. Anybody can access the database. Municipalities can, for example, see how they are performing in comparison with other municipalities or the country average on any dimension of their work, such as the number of persons activated or social assistance.
Type/level of intervention	Micro and meso level
Stakeholders involved	Job centres, municipalities, the Ministry of Employment, the Agency for Labour and Recruitment, the Danish Agency for Labour Market and Recruitment (STAR), the Data Protection Agency, the Ministry for Children and Social Affairs, Ministry of Education and the Ministry for Equality, unemployment funds, training and activation providers, Statistics Denmark
Achievements	Job centres are the single point of contact (one-stop shop) for the long-term unemployed receiving unemployment insurance benefits, temporary benefits and social assistance. There are 94 job centres in Denmark's 98 municipalities. Almost all municipalities have a job centre and some municipalities have joint job centres. Jobnet has approximately 2 million visitors a month. There is a high degree of autonomy, combined with strong performance incentives (a transparent benchmarking system).
Sources	Jobnet: https://job.jobnet.dk/CV/Frontpage

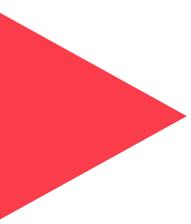
Coordination Associations (Sweden)

Title	CA – Coordination Associations (Samordningsförbund)
Country	Sweden (covering all counties and nearly all municipalities)
Rationale	CA is a voluntary scheme at local level, aiming to facilitate institutional coordination between the PES, the social and health sector and municipalities. CAs are independent legal entities and are led by a local political board. CAs harmonize the goals of the participating organisations and launch joint projects (e.g., for the integration of immigrants). They maintain inter-organisational teams in the form of CA Boards that support the reintegration of the long-term unemployed.
Type/level of intervention	Micro and meso level, based on national guidelines and policies (macro)
Stakeholders involved	CA Boards are made up of representatives of the PES, the social and health sector, and political representatives of the municipality and the country council.
Achievements	During 2010, CAs financed nearly 600 activities with approximately 34,000 participants. Most of these activities were directed at unemployed persons on sick leave and/or persons aged 16–64 with income support (Arbetsförmedlingen / Försäkringskassan, 2011). Evaluations suggest that inter-organisational cooperation on rehabilitation is perceived as promoting coherence and communication. Nevertheless, inflexible regulations on sickness insurance may be a barrier. ¹⁶ Potential tensions between actors arising from the divergent definitions of “workability” (i.e., the medical approach versus the social insurance approach) need to be addressed to facilitate effective collaboration. ¹⁷
Status	At the end of 2014, there were 85 such associations, incorporating 240 of Sweden's 290 local municipalities and all counties. ¹⁸

16 Ståhl, C., Svensson, T. and Ekberg, K. (2011). From Cooperation to Conflict? Swedish Rehabilitation Professionals' Experiences of Interorganizational Cooperation. *Journal of Occupational Rehabilitation*, (21), 3: 441–448.

17 Ståhl, C., Svensson, T., Petersson, G. and Ekberg, K. (2009). The work ability divide: holistic and reductionist approaches in Swedish interdisciplinary rehabilitation teams. *Journal of Occupational Rehabilitation*, 19(3):264–73. doi: 10.1007/s10926-009-9183-2.

18 Fredriksson, D. S. S., and Fritzell, J. (2015). ESPN Thematic Report on Integrated Support for the Long-term Unemployed: Sweden. European Commission. Link: ec.europa.eu/social/BlobServlet?docId=14282&langId=en



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