

Interim evaluation of the Employ Diversity of Talents Project

JHCONSULTING

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Introduction

In March 2007, Refugees into Jobs (RiJ) commissioned an independent interim evaluation of the Employ Diversity of Talents (EDOT) project. Sponsored by the Department for Work and Pensions through the Invest to Save Budget Programme, this project is designed to help refugee professionals retrain and re-qualify to UK standards and move into appropriate careers. It is funded jointly by the Treasury and Home Office and involves a cross sectoral and cross departmental partnership.

The overall aim of the evaluation is to assess EDOT's achievements and impacts against its key objectives and targets. In particular, the evaluation seeks to:

- ◆ identify the impact and effectiveness of the project in enabling refugees to use their skills, gain employment and improve their lives;
- ◆ assess the contribution of the project to taking forward key Government policies and strategies including those embodied in *Integration Matters* and *Working to Rebuild Lives*;
- ◆ identify how the experience of the project can contribute to the implementation of new Government policies and strategies including the New Integration Model and the recommendations of the Leitch and Freud reports;
- ◆ assess the cost effectiveness of the project;
- ◆ provide a set of recommendations arising from the key findings, along with practical next steps that can inform the delivery of the remainder of the project and contribute to the development of national and regional refugee integration strategies.

This report begins with an executive summary of key findings and recommendations, followed by a brief background to EDOT and a description of the evaluation methodology. The detailed evaluation findings and analysis are then presented in sections that consider the findings in more detail.

Executive Summary

This interim evaluation demonstrates that there are many successful aspects of the EDOT project that are helping refugee professionals, and some significant challenges in its final months if the full benefit and potential of the project is to be realised beyond March 2008. The key findings and recommendations are:

A project delivering on two levels

- The EDOT project set out to provide a flexible and integrated re-training, re-qualification and employment service for refugee professionals. This group is not homogenous and it is clear that the project actually delivers on two levels. One responds to the needs and goals of refugee professionals who are highly motivated and able to move steadily through the challenging re-training and re-qualification routes required in their fields. The other supports those who despite having higher level skills have significant additional difficulties and need long-term help before they can “*shift a gear and really move towards employment*”. Some may have been in the UK for some time but do not have a professional work record because they have taken other jobs to support their families, or have not been able get work.
 - The dual target group is reflected in project data. To March 2007, the project has recruited 292 beneficiaries, nearly reaching its March 2008 target of 300. The 2006 intake was larger than profiled, due to changes in Home Office funding which resulted in over 60 refugees transferring from other RiJ projects. 56% of the 292 clients have drawn down grants and are at various stages of re-training and re-qualification. The remaining clients receive much valued support from RiJ staff, but have more complex pathways to employability which are outside EDOT's remit. Project monitoring requirements do not provide the level of detail needed to be clear about their progression.
 - Although Somali people make up the largest proportion of all beneficiaries registered on EDOT, only 9% of job outcomes are from this group. This finding mirrors much other research which highlights the particularly difficult barriers to work faced by Somali refugees. This group, and some others, experience a range of additional challenges that include not being able to practise their profession in their home countries as well as in the UK, leading to their skills being ‘outdated’ and a lack of English language.
- As planned, RiJ should urgently review the project cohort and identify how they can best be helped. This should be done with reference to the wider context of RiJ's development as an independent organisation, including exploring the most appropriate types of employability pathways, their fit with RiJ's strategic direction, and how they can be financed.
- Continue to build support for ‘active’ Somali beneficiaries to help improve their access to professional jobs, and, within the context of the previous recommendation, explore how best to support those further from the labour market.

Getting the offer right

- For those farthest from moving into appropriate employment, contact with RiJ is clearly extremely valuable in terms of keeping the door to progression open, and in some cases helping to prevent the slide into serious depression. For the ‘active’ cohort, the pathway is still daunting because of the long term and difficult nature of re-qualification and gaining employment. Getting the balance of the offer right for, and within, each group is challenging. It is crucial to be sensitive to needs, but it is equally vital to keep momentum going through a clear progression pathway. It is possible that the current system may lean too far towards individual pace and need.
 - Supporting clients with their personal and family issues is a valued and essential part of the service for many clients. Key policy documents (refugee and ‘mainstream’) underline the importance of such a holistic approach, and the vital role of the voluntary sector in delivering it. How this will translate into the funding of provision is not yet clear.
- Explore ways of tightening up the EDOT offer, packaging it and introducing more time bound milestones could help to boost employment rates and provide clearer indicators of progress. The Licence to Skill tool could help with this.
- Identify the proportion of time that is spent on pastoral support and that on employment support. This will help indicate to Government the range of agencies that need to be involved in pulling together a realistic package of support for

refugees. It may also help to inform the implementation of strategies arising from the Freud report and the New Integration Model (NIM).

Responding to demand and achieving outcomes

- 55% of EDOT clients are medical professionals (doctors, dentists, nurses and physiotherapists), reflecting the attraction that this project has for those in the sector, as well as the relatively clear route to re-qualification and employment for these professions. Other professionals are from teaching, accountancy and engineering backgrounds where there are less clear routes. RiJ recognises that these 'prequalification packages' require further development and is working with partners to establish accepted pathways to employment for these professions and for social work.
- Some routes into non-professional work, for example, bus driving, were trialled at the suggestion of the Department for Work and Pensions (DWP), or, in the case of security work, were introduced as part of a continual re-qualifying process. Neither has proved popular and some feel they detract from the professional focus of the project.
- Beneficiaries access training from a number of colleges across London, demonstrating the regional 'reach' of the project. Whilst this reflects this specialist nature of much of the training required, it would be helpful for local colleges to have stronger cross referral routes and tailored services for less specialist provision including ESOL
- Further develop 'documented agreed prequalification packages' for non-medical professions, including through discussions with the professional and regulatory bodies to explore how recognised routes to re-qualification could be established, especially where there are skills shortages or sector growth.
- Monitor the development of the different occupational strands and carry out thorough periodic review to test out which routes are most effective. Other organisations that are involved in this area of work should be closely involved so that experiences can be exchanged and ideas generated. These include the Employability Forum and the Trellis project.
- Local colleges and RiJ should work together to strengthen cross referral routes and to develop tailored training packages that respond to RiJ's clients – those on EDOT and other projects.

Rising to the employment challenge

- Refugees have been able to achieve qualifications and move into work experience placements and jobs. Of the 28 beneficiaries achieving 44 qualifications between them, 50% have moved into jobs or placements. Beneficiaries from Iraq and Afghanistan represent 44% of all job outcomes. The proportion of those getting qualifications moving into jobs reflects three key features of the project to date. First, refugee professionals have varying needs and the project is able to provide a personalised response that is appropriate to need. Second, 'complete packages' have to date been delivered on a relatively small scale, but are in the process of further development. Finally, some beneficiaries, particularly doctors, have to achieve a number of qualifications before they can move into a work placement or job.
- EDOT includes some exemplary practice in the way in which employment-focused pathways are supported. The numbers into employment are in line with contract profile, and, if taken as a proportion of the 'active' cohort of 164 beneficiaries, give a conversion rate of 30%. This shows good progress against the 40% project target rate, and compares favourably with mainstream employment focused programmes. This is encouraging given that employment outcomes are a particular challenge for refugees. For medical professionals, recent NHS cuts and the move away from centralised budgets reduce the job opportunities further. 'Competition' from new EU migrants is also seen as a threat.
- RiJ has made efforts to engage directly with employers and has had some success with public sector employers. Staff have particularly strong relationships with 'brokers' and intermediary organisations that are effective 'interpreters' between the particular profession and the refugee professionals, working with RiJ's project staff. This model is sound

as long as staff continue to develop and broaden good brokerage relationships with organisations that have an excellent understanding of what employers want and that can act as the interface to help refugees into work.

- Continue to find additional ways of developing direct routes to employment where possible, and continue to develop relationships with other employment-facing organisations in the public and private sectors eg: recruitment agencies etc. This should include building RiJ's 'knowledge base' of labour market intelligence to provide a clearer picture of employment opportunities.
- Further develop the 'non-medical' aspects of the project, particularly in view of the reduction in job opportunities in the NHS, and explore the potential for jobs in the private health care sector. Explore the potential for more support for self employment and enterprise for some professionals, for example, accountants.
- Begin to increase the volume of the project in terms of the number of active beneficiaries. This should help to explore the potential 'economies of scale' and inform how such a project can be rolled out to a wider group.

The financial equation

- EDOT is a resource heavy project, but does enable refugee professionals to contribute their skills and expertise for the benefit of UK society. Clients receive grants to access existing training provision funded through the Learning and Skills Council and other sources, maximising synergy and enabling refugees to be part of mainstream training. Although job and qualification outcomes are small scale in comparison to the funding invested, EDOT delivers other activity including developing re-qualification packages and referral networks for this particularly disadvantaged group.
- The project set out to find 'alternative financial packages', including providing refugees with an allowance equivalent to their Jobseekers Allowance whilst on intermediate labour market placements that are essential to the re-qualification process. However, JSA benefit rules resulted in RiJ needing to develop an alternative model that provides salary subsidies that pay a 'living wage' and that are intended to lead to permanent jobs. This highlights key issues for national policy and practice for refugee professionals and other groups whose route into work does not fit with current benefit rules. The flexible New Deal and Jobs Pledge may provide opportunities to explore these issues.
- Estimates show that it is likely to take about two years to recoup the costs of retraining a refugee doctor. This is based on costs recovered through tax payments once a paid job is secured. However, if the salary subsidy paid to doctors is taken into account, costs will take about 3 years to recover, highlighting the importance of trying to find a better financial solution. The costs of retraining, even taking into account salary subsidies, still represent a saving of around £200,000 in comparison to training a doctor 'from scratch'.
- EDOT provides significant impacts and benefits for individuals, families, communities, employers and for public services. In the longer term, the investment is likely to be offset not only by the tax recouped once professionals are working, but also in improved educational attainment for children, better health and community cohesion.
- DWP and RiJ, including Steering Group partners, should continue to explore how benefits issues can be resolved so that refugee professionals are able to follow the path to re-qualification that is required by their professions. The experience of EDOT should also be fed into policy development and implementation plans and may be of interest in terms of work with other types of refugees or disadvantaged groups.

Developing partnerships at all levels

- The EDOT project has enabled partnership development at a number of levels. HM Treasury, the Department for Work and Pensions, Home Office and Department of Health have worked together in various ways to support and facilitate the project. The EDOT Steering Group membership is also indicative of the range of interest in, and support for the project. RiJ has developed working relationships with Jobcentre Plus and has involved its wide network of Refugee Community Organisations and others to maximise recruitment and raise awareness of the project. That said, there remain some challenges in finding the most effective way of working with a wider network of Jobcentre Plus offices.

- Continue the work to develop effective relationships with Jobcentre Plus, especially as details become clearer of how key policy documents such as the Leitch and Freud reports are to be implemented on the ground.
- Continue to make links with other relevant initiatives such as the BME doctors data base, RED (Refugee Engineers database), Refugee Council teachers work and CARA (Council for Assisting Refugee Academics), and other services such as the Time Together mentoring scheme so that services are increasingly dovetailed and complementary.

Operating in a changing policy context

- EDOT has been developed and delivered in a challenging strategic context that has implications for the sustainability of the approach, of which RiJ and the EDOT Steering Group are aware. The NIM has changed the policy context. Support for refugee professionals is a key strand, but consultation feedback indicates that many feel that the Model should have a greater emphasis on services for all refugees. The Mayor's and others' responses to the Model indicate overwhelming support for a regional approach to delivery. EDOT not only provides some good practice on which the NIM could draw, but also embodies some of the key principles proposed in the Leitch and Freud reports.
- The difficulties experienced by the project in "*testing the possibilities*" of how public sector services and benefits mechanisms could be used to support refugee professionals demonstrates how the project is pushing at the boundaries of national policy and practice. RiJ is not alone in hitting these buffers in an attempt to design a service that meets individual and employer need. The experience gained is extremely valuable for agencies and RiJ alike.
- As is its normal practice, RiJ should take all opportunities to contribute to consultation/development processes that will shape London's Refugee Integration Strategy and the NIM.
- There should be continued dialogue between RiJ and Government Departments and agencies, including the Home Office Border and Immigration Agency, Greater London Authority, LORECA, Department for Work and Pensions to explore how the experience of EDOT can help to inform the development and implementation of the NIM, as well as 'mainstream' policy arising from the Leitch and Freud reports.
- During the final months of the project, RiJ and the Steering Group should continue to explore other ways of sustaining the key success elements of the project, including through mainstreaming using 'non-refugee specific' funding.

Project management and co-ordination

- RiJ is showing considerable skill in managing such a complex project. Audit reports are positive and the project is conforming to contractual requirements. This has been achieved against the challenge of RiJ's internal change in preparation to launch as an independent organisation in April 2007.
- The process of gaining information for the evaluation has highlighted some areas that could benefit from development and staff welcome this. Management information is collected, but more regular analysis and review of this data would enable RiJ to 'troubleshoot' and develop services more effectively. Quality assurance and beneficiary tracking systems could benefit from refinement to ensure that progression for all clients can be more precisely identified. Beneficiary activity records could also be strengthened and linked to tracking systems, for example to assess the impact of particular activities such as receiving grants and moving into employment.
- RiJ should continue to review and develop its internal review and development mechanisms, as well as management information and quality systems in line with current plans. This will not only help to ensure consistently high quality, but also enable the organisation to demonstrate the full impact of EDOT and other projects. It will also strengthen the 'credibility' of the newly independent organisation.
- RiJ should consider introducing a short form for the referral process. This should be open to the individual, detailing their qualifications, skills and experience, together with their short term expectations from the placement or course and their longer term aspirations, and passed to the training organisation or employer to help inform them.

Brief background to the Employ Diversity of Talents project

Sponsored by the Department for Work and Pensions (DWP), the EDOT project is primarily funded by HM Treasury's Invest to Save Budget (ISB) with 30% match funding from the Home Office. ISB is a joint venture between the Treasury and the Cabinet. It was created in 1998 to fund projects which bring together two or more public bodies to enable the delivery of services in an innovative fashion. It provides a means of investing in partnership projects with the potential for transforming services - but which need be further developed before this potential can be unlocked.

RiJ's EDOT project began recruitment in October 2005. It originally targeted professionals resident in the 6 West London boroughs (Brent, Harrow, Ealing, Hammersmith & Fulham, Hounslow and Hillingdon). In December 2006 this was extended to include the boroughs of Barnet, Kensington & Chelsea and Westminster. The purpose of EDOT is to enable refugees with professional experience to re-train and re-qualify to UK standards and secure employment. The project delivers a re-qualification package to refugee professionals from the health, engineering, teaching, law, IT, and finance sectors, who, despite having qualified and worked in their own countries, have not been able to continue their careers in the UK. The package provides discrete training and employment support to project beneficiaries, advising and guiding them toward the quickest and most relevant pathway to re-qualification and licensing (where required).

Where possible, beneficiaries are offered Intermediate Labour Market (ILM) positions to enable them to gain experience within their related field whilst training toward their qualification. This is intended to provide a transitional stage into work commensurate to their qualifications and past experience.

Beneficiary targets for the project are presented in the table below.

Activity	Target: 2005-06	Target: 2006-07	Target: 2007-08	Total: 2005-08
New service users registered onto programme	40	160	100	300
Number of Information, Advice and Guidance sessions (min. 3 per client)	120	480	300	900
Individual Action Plans created	40	160	100	300
Clients attending re-qualification packages	30	125	75	230
English Communications course (including IELTS)	10	40	40	90
One to one employment preparation	40	160	100	300
Programme for Employment Preparation attendance	10	40	40	90
Qualifications achieved	10	35	55	100
Work experience/mentoring	5	28	27	60
Employment	5	47	68	120

A number of key partners are involved in the development and delivery of the project including:

- Jobcentre Plus (District and local offices)
- Refugee Community Organisations (RCOs)
- Fair Cities, Brent
- Brent Primary Health Care Trust (PCT)
- London Deanery
- Al-Kindi Society
- Empower Teachers

Some of these partners are represented on the project Steering Group, along with others including the College of North West London, Employability Forum and DWP. In addition, RiJ works with a wide network of organisations to facilitate the

appropriate support for beneficiaries. This is discussed in more detail later in the report. At Government Department level, the EDOT project represents a partnership between the Treasury, DWP and Home Office. The Department of Health is also involved through the Primary Health Care Trust and through the provision of work placements and jobs.

As well as delivering structured and relevant re-qualification packages for refugees with professional backgrounds, key project objectives are:

- To work in partnership with West London Jobcentre Plus and RCOs to improve/develop/amend the package during the course of the project and to work closely with the Strategic Health Authority to secure their agreement on providing ILM posts for their clients, and for their participation in the project's Steering Group.
- To co-ordinate existing disparate advice services currently provided to refugee professionals in West London.
- To explore and put in place other mechanisms of financial support (other than Jobseekers Allowance) for clients during the transition into work. This would include a mix of financial support such as earned income – through part time work opportunities and intermediate labour market posts – project bursaries, loans and grants.

Evaluation methodology

The fieldwork and desk research for this evaluation was carried out during April and May 2007 and involved:

- ◆ initial discussions with key RiJ personnel;
- ◆ structured individual face to face and/or telephone interviews with:
 - Department for Work and Pensions, Treasury and Home Office personnel
 - Jobcentre Plus personnel
 - Steering group members
 - Refugee Community Organisation partners
 - Employers
 - Training organisations
 - RiJ personnel
- ◆ focus group and one-to-one structured discussions with refugee beneficiaries (on programme and completers), and
- ◆ desk review of paper based materials including delivery plans, client files, monitoring and evaluation reports, database information on projects and spend and other relevant reports.

A sampling exercise was used to select beneficiaries for interview to help provide a balanced representation in terms of ethnicity/nationality, gender, type of profession and the stage/length of time on the programme. Interviews were structured using a standard set of questions, tailored to suit the various roles of the contributors. A full list of contributors is provided at the end of the report.

Direct quotes from those who contributed to the evaluation are included in the report in italics and speech marks, although quotes are not attributed to protect confidentiality. We would like to take this opportunity to thank all those who took part in discussions and assisted in information gathering for the evaluation. Their views have very much helped to shape this report. A full list of respondents can be found at the end of the report.

An effective and complex array of interventions

Evaluation respondents were unanimous in their judgement that the EDOT project provides invaluable support to help refugee professionals move into appropriate careers. The project impacts at different levels:

- **individual beneficiaries** – who are able to become gainfully employed, using and further developing their skills, knowledge and experience
- **their families and communities** – an increase in the self esteem of the whole family, providing role models for their children and alleviating child poverty
- **employers and public services** – access to trained & qualified potential employees more doctors, teachers, engineers etc.
- **wider policy and strategy** – testing out models for support for refugee professionals which can feed into not only refugee strategies, but also mainstream strategies that are intended to combat disadvantage and promote access to training and employment.

What does EDOT deliver?

The EDOT project is an umbrella term that encompasses a group of 'sub-projects' that provide flexible and tailored support for the range of refugee professionals accessing the project. This arrangement enables the project to respond to the needs of beneficiaries and employers, but does create a challenge in explaining its operation!

RiJ project advisers help each beneficiary identify the most suitable training/work experience they require and assist them to apply for courses and other similar support. Referrals to training or employment are then made to other providers delivering professionally accredited courses. Once beneficiaries are at a point where they are able to take part in work placement referral can be made to one of the structured or semi-structured work placement projects.

The model that RiJ has developed is an excellent example of how work-focused pathways to employability should operate. Beneficiaries begin by putting together a CV – no matter how difficult or patchy this might look at the outset. This provides *“the focus for them to self assess their progress and keep their eyes on the goal of employment”*. Advisors support beneficiaries *“to do things on their own”* – facilitating the process of gaining confidence. They take the role of the 'routeway broker' by providing 'informed support' at key transition points to help keep the individual on their pathway. This demonstrates the type of best practice that the Learning and Skills Council, London Development Agency and Jobcentre Plus used to develop the Licence to Skill tool that is currently being piloted.

Established placement projects include:

- Prime IV (Placing Refugee Doctors in Medical Employment) run in conjunction with the London Deanery (11 places)
- Clinical Technician/Clinical Assistant Practitioner Project: Alternative Employment with Brent PCT (4 places)
- Teaching project with Empower Teachers (4 places).

Those in development are:

- Social Workers project with Brent Council which is currently still in development (2/4 places)
- Developing a work placement for 10 refugee doctors as phlebotomists at Hillingdon Hospital
- An industry standard training course for engineers (8 places to date).

To help understand the wide range of activity delivered through EDOT, a brief description of each of these projects follows, outlining the partners involved, type of activity delivered and funding arrangements. What is common to each is the partnership approach.

Medical Professionals

PRIME IV (Placing Refugee Doctors in Medical Employment) via London Deanery

This project is delivered in partnership with the London Deanery which provides 40% of the funding. The London Deanery is responsible for post-graduate medical and dental training in London, with the aim of *“improving the quality of patient care by ensuring the supply of doctors and dentists who are educated, trained and motivated to play their part in a first class modern health service.”*

The Prime IV project is aimed at post-PLAB 2 doctors, to help them bridge the gap between clinical attachments and entering their first posts as fully re-qualified doctors in August 2007, in line with the new NHS regulations for junior doctors, Modernising Medical Careers (MMC). 10 refugee doctors were selected by RiJ and the Deanery for 6 month placements as Senior House Officers (August 2006-April 2007) at the following hospitals: Hammersmith, West London Mental Health Trust, Barnet and Chase Farm, West Middlesex, Northwick Park, Ealing. One of these doctors gained a job after 4 months, allowing another refugee to take up the placement for the remaining 2 months.

Alternative Employment: Clinical Technician/Clinical Assistant Practitioner Project

The aim of this project is to provide assistance to unemployed refugee doctors and place them into work-based training as Clinical Technicians or Clinical Assistant Practitioners at local GP surgeries for 12 months. It is being delivered in partnership with Fair Cities and Brent Primary Care Trust. Fair Cities is a National Employment Panel (NEP) initiative aimed at helping disadvantaged members of ethnic minorities move into, stay and progress in work. It aims to engage employers and is built around a board of local employers who provide intelligence about employment needs, access to job vacancies and practical guidance for the welfare-to-work system, particularly for those people facing the dual barriers of disadvantage and discrimination.

The 7 selected doctors are studying for IELTS (International English Language Testing System) accreditation and have been out of practice for more than two years. Two are in post (since March 2007) and a further two are awaiting placement. Three candidates were unsuitable. There is an initial six week, pre-employment training period which is a combination of theory and practical exercises, and is provided by a number of trainers engaged by the Project Co-ordinator at Brent PCT. During the training, the doctors are placed one day per week at the participating surgeries to get hands on experience before embarking on employment. There was an induction to the NHS system, clinical and non-clinical training and an induction to the Practice. The PCT also arranged for Criminal Record Bureau (CRB checks) for doctors. There is on-going training and mentoring provided by the Practices throughout the year long contract. Employment contracts are with the surgeries, together with a signed Service Level agreement between the Practices and Brent PCT.

The Centre for the Study of Policy and Practice, Thames Valley University, have worked with the Teaching Primary Care Trust (tPCT) to accredit refugees' learning and development with the aim of awarding higher education credits when learning outcomes have been achieved. The tPCT and University have agreed that practitioners will enrol on a postgraduate programme of study and will be awarded 60 credits at level 7 on successful completion.

The North West Strategic Health Authority originally committed funding of £60,000 via the Primary Care Development Scheme and £27,500 towards delivery of the training programme but this changed due to cuts in NHS funding. The PCT wanted the project to continue but they too had budget cuts, as did the individual GP surgeries. EDOT committed 25% towards salaries for the time used for clinical assessments. Fair Cities committed funding for educational and venue costs.

Phlebotomists

RiJ is currently negotiating with Hillingdon Hospital for 10 refugee doctors to work as phlebotomists, starting on 10 hours per week. RiJ have currently identified seven potential candidates on their ISB register. It was offered as a top up to the two GP placements, but both have declined.

Engineers

Waste Water Modelling Training Project

This project is a five week training programme in computer software crucial to the area of waste water modelling. It is for refugee engineers and is delivered by the Al-Kindi Society, an association of Iraqi and other refugee engineers. The programme was run in January 2006 and all the trained candidates found employment within a month of completion of the training. A further programme was run between October-December 2006 and all six candidates successfully completed it.

The engineers are following individually agreed action plans, focussing on improving particular skills together with intensive job search, which includes Al-Kindi identifying suitable vacancies through its links with recruitment specialising in engineers. Financial assistance is also being provided to the engineers to obtain the necessary memberships of the bodies regulating the engineering sector.

Enka Training for Civil Engineers

Setting Out is a two week intensive training course which aims to give participants a solid base from which they can expand into all areas of civil engineering. The training is aimed at former industry engineers wishing to refresh lapsed knowledge and civil engineer graduates from overseas. The exam is a mixture of theory and practical tests. Training has eventually taken place and the engineer is now doing intensive jobsearch.

Teachers

This project is delivered in partnership with the Empower Teachers Project. There are currently four refugee teachers in the process of re-qualifying. One is in a work placement combined with a course to qualify as a Teaching Assistant, another is on a work placement and is enrolled on the PGCE course at Brunel University, a third is awaiting a CRB check before starting a work placement and a fourth is waiting to start a work placement. Further encouragement is given to others to register on the Refugee Council's database for refugee teachers.

RiJ is also a member of the Refugee Teachers Task Force (RTTF), established in 2004 to consider how the barriers refugee teachers face in accessing jobs in education might be overcome and their potential unlocked.

Social Workers

This project is still at the planning stage with Brent Social Services and Metropolitan University. Brent Council propose to assist two refugee professionals with experience in social work or in a relevant field, following recent findings that the workforce in this sector does not reflect the diversity of its service users from new communities.

It is anticipated that RiJ will advertise and recruit candidates jointly with Brent Social Services in April 2007, with short listing and interviewing in May by Metropolitan University. Induction to Brent will take place in June followed by the start of work-based training in July. The Social Work course will begin in September 2007, as part of the employment based route (EBR) to become a fully qualified social worker. The EDOT project will partly fund the trainees' salaries in the first year of employment.

More recently, there have been discussions with regard to broadening the scope of the EDOT project by developing routes to employment in non professional occupations including bus drivers and security guards. Some Jobcentre Plus staff feel this would be a welcome development as it would enable them to make more referrals. However, others feel that EDOT was established for professionals and to broaden the project in this way would dilute it.

Achievements to date

Between October 2005 and March 2007, 292 refugee professionals have registered on the project. The project operates a 'roll on – roll off' system of recruitment to provide maximum responsiveness to beneficiary need.

Nearly half of EDOT beneficiaries come from Brent and Ealing, with the majority of the others from Harrow, Hammersmith and Fulham, Hounslow and Hillingdon. Two thirds are men and the same proportion is over 35 years old. 34 different nationalities are represented on the project, demonstrating the wide diversity of beneficiaries attracted by EDOT. The largest proportion (31%) of beneficiaries is Somali, 18% are Iraqi and 13% come from Afghanistan. Further details of beneficiary background can be found in Appendix 3 of the report.

According to records, 72 referrals (29%) have come through Refugee Community Organisations and 40 (8%) have come through Jobcentre Plus. A further 20% of beneficiaries have been referred from other RiJ services. The remainder have arrived at the project through word-of-mouth from friends and family.

For the period to the end of March 2007, the project has achieved the following against its targets:

Activity	Target 2005-06	Actual 2005-06	Target 2006-07	Actual 2006-07	Total target to March 07	Actual delivered to March 07	Total target to March 08
New service users registered onto programme	40	56	160	236	200	292	300
Number of Information, Advice and Guidance sessions (min. 3 per client)	120	218	480	1,088	600	1,306 (4.5 per client)	900
Individual Action Plans created	40	56	160	236	200	292	300
Clients attending re-qualification packages	30	38	125	112	155	150	230
English Communications courses (including IELTS)	10	11	40	29	50	40	90
One to one employment preparation	40	56	160	236	200	292	300
Programme for Employment Preparation attendance	10	5	40	68	50	73	90
Qualifications achieved	10	5	35	39	45	44	100
Work experience/mentoring	5	7	28	28	33	35	60
Employment	5	7	47	47	52	54	120

The project completes in March 2008. Figures show that by March 2007, EDOT had recruited to the level that would have been expected at the end of the project. The 'bulge' in 2006-07 was a result of changes in Home Office funding which meant that other projects that had been supporting refugee professionals could no longer be delivered and RiJ felt there was no option other than to register them on EDOT. As a consequence more than the planned number of IAG sessions, Individual Action Plans and employment preparation interventions has also been delivered.

Records show that 164 (56%) of beneficiaries have received a grant through ISB. This data combined with other findings of the evaluation show a project that is in fact operating on two levels. Those clients not drawing down grants receive support in terms of advice, guidance and mentoring. However, they are not engaged in identified pathways to professional re-qualification and employment. They tend to be hard to motivate and face additional barriers which include not having practised as a professional for many years, not having any recent professional experience and having significant English

language difficulties. They may define themselves as professionals, and do have some higher level skills, but the reality is that they are unlikely to be able to move into professional positions.

This finding is critical to the remaining months of the project. These two cohorts of refugees have different characteristics. It is clear that whilst EDOT provides much valued and needed support for these refugees, it is not producing all of the outcomes that are expected of the project because of the nature of this cohort and their needs.

It is recommended that an in depth review of all inactive EDOT beneficiaries takes place to identify who may be able to benefit from the project, and who needs additional or different interventions than those available through EDOT. Clear pathways to employability are required by this group (and should be developed using the Licence to Skill tool). However, this clearly needs to be considered within the overall strategic direction for RiJ and the current policy and funding climate. It is critical that any new recruits to EDOT are able to make steady progress towards employment, and that the existing beneficiaries are supported to achieve the maximum outcomes before the end of the project in March 2008.

A closer look at the qualification and job outputs reveals some interesting detail that reflects the difference in client cohorts. Beneficiaries of Somali nationality account for 31% of all those recruited to the project. However, of the 111 Somali beneficiaries recruited, only 5 have moved into jobs, most of which are 'assistant' posts, and only one has achieved a qualification. This indicates that a significant number are in the 'harder to help' group.

By contrast, 26% of beneficiaries moving into jobs are from Iraq, and 18% from Afghanistan. It is well documented that refugees from a Somali background face particular disadvantage and barriers to learning and employment. The experience of EDOT would appear to provide yet another example of this difficulty. RiJ has expertise in supporting Somali clients, as well as good links with Somali RCOs. Project staff are aware of this issue and are continuing to explore and develop ways of providing even more effective support for this group.

The majority of jobs, work placements and qualifications gained are in the medical profession, demonstrating the attractiveness of this type of project for people from this sector. Qualifications include IELTS, PLAB, Phlebotomy, Accounting, IT and ESOL. 63% of jobs gained are in medicine or associated professions. Others include engineering, accountancy, commerce, administration and teaching. Detailed records indicate that the project's focus has broadened in recent months with more work placements for teaching assistants and others in a variety of settings including voluntary sector organisations. This indicates that the developments that RiJ is making are having a positive impact in broadening the options for beneficiaries.

ISB Beneficiaries by Profession October 2005 – March 2007

Profession	Number	Percentage
Accountant	11	7%
Dentist	11	7%
Engineer	18	11%
Lawyer	3	2%
Medical Doctor	70	44%
Nurse	8	5%
Physiotherapist	2	1%
Teacher	5	3%
IT	3	2%
Business Administration	4	3%
Other	21	15%
Total	164	100%

The 'dominance' of the medical professions is reflected in the grants that have been drawn down. Of the 164 people drawing down grants, the biggest professional group are medical doctors (44%), followed by engineers (11%) who together account for over half of the registered beneficiaries. This may reflect the fact that the re-qualifying routes for medicine are most straightforward. It may also be an indication of the conditions for each profession e.g. teaching is not very attractive as there are huge differences in the curriculum and classroom management expectations, and engineering is often a harsh commercial environment where employers are mainly looking for senior staff.

RiJ is currently also supporting two lawyers to take a degree in Law because it is the only requalification route, as prescribed by the Law Society. Overseas trained lawyers (including refugees) are assessed for the eligibility to undertake a Common Professional Examination or Graduate Diploma in Law course. The Law Society issues the Certificate of Academic Standing to those who wish to qualify as solicitors in England and Wales as a proof of their eligibility for the course. Re-qualification can cost up to £7,200, of which RiJ contributes in part. Clients are supported to get into voluntary/ILM employment as outlined in their action plan. It was agreed that no more cases should be taken on as EDOT is in its final year.

Around £60,000 worth of grants have been awarded to individual refugees in 2005-07, for a variety of purposes including travel and childcare expenses, tuition and exam fees, materials (books, stethoscopes etc.) and fees for joining professional bodies. In addition, incentives are paid – £20 for gaining a qualification, £30 for finding work experience, £50 for finding part-time work and £100 for finding full time work.

The Grants Panel meets twice a month to consider applications. All RiJ staff take turns to sit on the Panel in order to develop a fuller understanding of the project. Each application for a grant is assessed on its own merits. The key criterion for approving an application is that the request directly supports a beneficiary in undertaking the re-training and re-qualification required by the profession. On occasions this means that an application is turned down because the person is requesting funding for a qualification 'for its own sake' rather than for the qualifications that are recognised as the 'top up' required for job entry.

RiJ has a clear rationale for awarding grants and records the decisions that are made. Where RiJ is unable to fund an application, some beneficiaries have put together their own packages which draw on RiJ grants as well as those provided by other organisations. This shows the determination on the part of beneficiaries, but could be difficult for those who are less confident or knowledgeable about what is on offer. That said, RiJ liaises with other organisations that provide similar grants to try to ensure that all clients have maximum access to support.

RiJ does not have a policy that limits 're-sits' of qualifications because it is recognised that some people may take several attempts before they succeed. However, the organisation is firm in its resolve to avoid creating an environment that might foster the kind of dependency that leads to "*qualification junkies*". Grants are only provided where the organisation is satisfied that the client will be supported to progress towards sustainable employment.

In addition to grants, £150,000 has been allocated for 11 doctors on the Prime IV project, with 40% match funding from the London Deanery. This pays basic Senior House Officers' salaries for a period of 6 months each, enabling the doctors to complete the clinical attachments required of them. The doctors have been taking up their positions from August 2006 until June 2007. Hospitals are expected to pay the doctors for any additional hours that are worked.

A similar arrangement for medical technicians is about to begin. RiJ will contribute 25% of the salary costs for one year for these individuals. Full salaries are expected to be in the region of £16,000 - £18,000 per year.

Changing lives – the human impact

There is a well documented ‘halo effect’ where services that are provided to people with significant barriers and difficulties are seen as exemplary by them because there is little or nothing else on offer – and there is a fear of offending those delivering the services. The evaluation clearly highlights that this is not the case with EDOT. The views of **all** those involved in the project – strategic and delivery partners, as well as the beneficiaries, underlines that, whilst the project is certainly not faultless, it delivers “*strong positive impact*” to help refugees to gain “*the skills and further training to bring them up to UK standards and qualifications*”.

Maximising potential

Refugee professionals bring to the UK a wealth of experience and skills. They can bring new perspectives to the way in which professional services are delivered in this country and address skills shortages which benefit the economy. Whilst it is vital that refugees are defined by more than their ‘needs’, it is equally important to outline briefly the challenges that these individuals face in taking their place in the UK’s economy and society.

The barriers that beneficiaries face in moving into **appropriate** careers include those that are common to many refugees – English language needs, lack of self confidence, lack of UK work experience, expectations that may be unrealistic and a need to gain an understanding of UK ‘culture’ and working practices. Other challenges range from “*depression*”, marital breakdown and other family and personal problems to trauma-related and other health needs, as well as practical concerns over welfare benefits, housing, schooling for children etc. For refugees that were professionals in their home countries there are additional difficulties. These can include:

- specialist English language needs – to be able to function effectively at a professional level;
- stringent re-training and re-qualification routes for some professions, particularly medicine;
- the need to really understand the culture of their profession in the UK context – to become part of the ‘club’;
- acceptance that moving back into a profession will take a long time, be costly and extremely challenging, and
- the emotional stress of coming to terms with being “*at the bottom of the pile*”, having been used to being in positions that commanded respect.

What emerges from this evaluation is the equally wide range of support offered to beneficiaries to help them overcome these challenges and succeed in their goals. Beneficiaries were highly positive about the flexibility and quality of support that RiJ offers through EDOT. One respondent echoed the comments of the majority in saying that “*RiJ is a very important organisation that has supported integration, given me employment enhancement, skills development and helped me gain confidence.*” Many highlighted that the **continuity** of support from RiJ staff members in “*helping me every step of the way*” is particularly effective in increasing confidence.

The combination of people involved in delivering support and services appears to be particularly important. RiJ staff are valued for being “*really helpful, passionate, understanding and very supportive*”. The Co-ordinator was praised in particular for her dedicated approach and personal touch. One respondent echoed the views of many in saying that the project is able to “*meet our needs as professionals*” through a combination of RiJ staff, staff from partner organisations, or other services such as the Medical Journal Club, who “*know what a doctor needs, gives advice and answers all our questions*”.

This is particularly important given the long journey that beneficiaries need to travel in order to enter their professional field in the UK. Many respondents commented on the difference between initial expectations and reality, for example, “*Newly arrived doctors assume they will get a job quickly, but they are not able to compete because of language, because they are too far away from medical practice, and because they have less knowledge of the culture and medical network...only a few will return after an interruption of 10-15 years, as they lose touch with the profession and feel they will never be doctors*”.

again". Having the right 'team' in place, that provides support as well as important 'reality checks' is vital. The use of role models, professional refugees who have made the journey and are now successfully working in their chosen profession in the UK, has been very positive for beneficiaries.

Another important success factor for the project is how individual packages are put together for beneficiaries. These vary in complexity and length, but the key feature is the flexibility provided by the ISB fund. In some cases, interventions are, on the face of it, very simple. However, the dramatic impact that this can have is exemplified by one respondent who stated emphatically that *"I have every reason to believe that without RiJ's financial support towards my examination, my life could have been more difficult than now"*.

A long and testing road to re-qualification

Although refugee professionals have in common the fact that they are qualified to, and have worked at professional levels in their home countries, the pathway to appropriate employment varies between professions. The EDOT model enables clients to take up the training that is best suited to their needs. This can be delivered by one or more of over five colleges across London, as well as with other organisations such as Groundwork that offer specialist training, for example, for those re-qualifying as teachers.

EDOT clients travel to colleges well away from the London West sub-region, for example, Southwark and Barnet, hence the importance of grants for travel. This demonstrates the specialist nature of the provision – Southwark College is a Centre of Vocational Excellence for Health and Social Care, and the regional 'reach' of EDOT. Whilst some training is provided in colleges that are more local (Harrow, Uxbridge and West Thames), other major providers including the College of North West London (CNWL) and Ealing, Hammersmith and West London College (EHWLC) tend to specialise in other vocational areas. It is important for colleges to focus on their particular areas of expertise. However, given that these institutions offer significant amounts of ESOL provision and are located in an area of London that has particularly high concentrations of refugees, it would be helpful if CNWL and EHWLC worked with RiJ to develop more collaborative arrangements in terms of service provision and referral routes.

Whilst medical professions have the clearest re-qualification routes, this does not mean that moving into the profession is easy. For those who find it hard to move into employment, reasons include continuing difficulty with English language, the stringent nature of the qualifications (some may need several re-takes to get them) and the problems of balancing family life and finances with re-training. Continuing NHS cuts have now added to these challenges by drastically reducing the number of job opportunities, shifting the focus from meeting skills shortages through refugee professionals to finding enough jobs for 'home grown' professionals.

Some of those who have been offered intermediate labour market posts such as phlebotomy are reluctant to take these jobs as they feel they do not recognise their professional skills and aptitudes. This highlights a particularly difficult issue for refugee professionals – the emotional journey of coming to terms with the fact that they are not regarded in the same way in the UK as they were in their home country and that it may be many years before they can hope to get a position that they feel is appropriate for them. That said, beneficiary feedback indicates that there are a number of refugees who would welcome *"climbing the ladder"* if there was a chance that this might eventually lead them back into their professions.

For those in non-medical professional areas, a frequent challenge is that there is not an 'accepted' re-qualification path. One beneficiary who is a qualified accountant felt strongly that there should be better systems for re-qualification for her profession. In the absence of this from the 'sector', RiJ's approach has been to offer flexible, individually tailored solutions to support a range of professionals. As with the medical route, these require a great deal of tenacity on the part of beneficiaries and ingenuity on the part of RiJ to develop new pathways.

A key aim of the project was to develop 'documented agreed prequalification packages' for a number of professions, and this is challenging work. To help ensure that EDOT is able to make an impact on this level, RiJ and the public agencies should step up discussions with professional and regulatory bodies to explore how recognised routes to re-qualification could be established, especially where there are skills shortages or sector growth that could be addressed in part through refugee professionals.

This would be in line with the thinking of other agencies considering the needs of refugee professionals, who have called for standardisation in the offer to refugee professionals, for example, standard assessment toolkits for different professions, packages etc. Further work on this in the remaining months of the project would be a lasting impact that the project could make.

Employment outcomes are a real challenge

Acknowledging EDOT's two beneficiary cohorts, it is appropriate to assess the project's performance on employment outcomes in the context of the 'active' cohort. This shows that 30% of clients have moved into jobs, compared to the project target of 40%. Whilst RiJ needs to continue efforts to drive up employment rates, this is a good conversion rate and certainly compares favourably with some 'mainstream' employment projects that achieve a 25% rate.

The difficulty in getting beneficiaries into sustainable jobs was commented on by a number of respondents who felt that RiJ should develop stronger relationships with employers. For non-medical professions, an additional challenge appears to be the lack of 'brokers' that can act as intermediaries to employment. Organisations such as the London Deanery and others play a pivotal role in supporting doctors into paid work. There are no such equivalents for the other professions. That said, one respondent felt that much could be gained from closer involvement with a wider range of professional bodies. In addition, having a greater awareness of "*what is hot on the market, in terms of skill needs*" could also help to provide better pathways into work experience and employment. This should include labour market intelligence from a variety of sources, as well as direct dialogue with employers, professional bodies and other intermediaries.

Employer engagement is a knotty issue. There is no magic solution and many providers, including large mainstream organisations, struggle to provide effective routes to employment for their beneficiaries. That said, it is vital that RiJ takes this opportunity to review and develop this aspect of the project. This does not necessarily mean that the organisation develops direct links with employers. There is much to be said for developing relationships with organisations that have this brokerage as their primary role and area of expertise. Organisations that specialise in professional recruitment tend not to be publicly funded. An increased focus on working with private recruitment agencies could be very helpful, in addition to continuing the developments with publicly funded services including job brokerage and Jobcentre Plus.

RiJ recognises that the entry to employment aspect of the project requires additional attention and is in the process of reviewing and developing its job search and IAG practices. Part of this work is to train advisors so that they can help beneficiaries be more focussed on the jobs they are seeking and the pathways they need to take. These changes are still in their infancy but if implemented as planned they should bring about a more structured and evidence-based approach to job search and IAG. It would be helpful if support to help refugees into self-employment is also considered. This could be a useful development for some professions, for example, accountancy.

Evaluation feedback from employers indicates that those who have moved into employment, or who are undertaking work placement make positive and welcome contributions. One employer echoed the comments of many in highlighting the benefits – "*we enjoy having them, especially as the scheme attracts a number of men and the boys at school respond well to them*". As with any innovative project, issues have needed to be resolved. For example, the idea to offer placements to refugee doctors in GP surgeries was hampered by a lack of understanding on the surgeries' part in so far as they needed to be aware that beneficiaries are not "*just another pair of hands, but also need mentoring and support – they are not in a position to offer what a doctor could.*"

The recent conference on Refugee Integration and Employment hosted by the Employability Forum highlighted some key issues for refugee professional support within the NIM and echoed many of the experiences faced by RiJ and the EDOT beneficiaries. Proposals for tackling some of these included the idea of a national work placement system for refugee professionals and encouraging greater use of the intermediate labour market.

Transforming lives

Beneficiary feedback identifies that, in addition to the improvement in employment prospects and self confidence, EDOT interventions and support produce a number of other very important impacts for individuals:

- **Feeling valued and able to contribute** - *"I don't want to sit at home on income support with people thinking that you are nothing."* Another commented, *"As refugees our lives cannot compare with other overseas immigrants. We arrived in this country having the primary concern of saving our lives. We needed to learn the language and study for years. It is a financial strain and is draining, working and studying part-time, often with child care issues with no family support. As a doctor, no one is giving you a chance to prove yourself – you're not even allowed to touch a patient...The project has given me confidence and self-belief. I'm a different person than before."*
- **Improving the quality of life** – for themselves and their families. One doctor commented *"Before this project, I was sad and depressed and my child suffered. Now my life has changed and so has my daughter's and my family life. I've been in interviews so many times and failed...this project has meant I can prove and improve my skills. The system then becomes fairer and I have someone who has seen me work, knows my skills and experience and can give me a reference."* Another commented that *"it has had a huge impact on our family life, especially as previously we were unemployed."*
- **Providing positive role models for children and other refugees** – *"I want my daughter to be proud of me"* and *"I don't want my children to grow up lazy – I want to show them how to work hard and achieve"*. Many former clients also want to retain a link with RiJ and help others who are re-qualifying. They recognise that providing positive role models can really help refugees to keep persevering through what are often long and difficult journeys back into their professions.

A number of Refugee Community Organisations and other partners commented that *"the project is very good but it needs to widen access to include refugee professionals who live outside the west London area"*. This demonstrates the value of the project and indicates that there is much that it can contribute to the development and implementation of the New Integration Model so that refugees from across London and beyond can benefit from this type of support.

Some more detailed 'living examples' of how EDOT has helped beneficiaries are presented on pages 28-30 of this report.

A need to get the balance right

One of the real strengths of the project is the way in which staff establish and maintain relationships of trust with beneficiaries and with project partners. As is frequently documented, refugees have a wide range of needs beyond those associated with work and training. RiJ really does provide an all round support service by getting to know people as individuals and almost taking the role of a 'life coach' and counsellor at times. It is interesting to note that, on average, clients receive 4.5 information, advice and guidance sessions, compared with the target of 3. It is likely that additional informal sessions are also provided.

The involved and caring approach of staff brings its challenges. It can be very difficult to encourage beneficiaries to 'let go' of the support that they receive. There are some indications that some stay with the project for a significant length of time,

but do not make the amount of visible progress that would be expected or hoped for, particularly for 'inactive' clients. For those who are on a clear pathway to employment, whilst the task undoubtedly is not short term, it is important that activity takes place at a reasonable pace to avoid loss of skill, momentum and professional confidence.

This dilemma is not atypical for an organisation such as RiJ, and it is vital that in reviewing and developing this area of their work, the balance is maintained so that refugees still feel nurtured, but at the same time are really encouraged to progress and move on. RiJ should consider rebalancing the programme so that there is a 'standard package' that can be tweaked to meet individual need to help establish clearer progression pathways and timescales, thereby avoiding the potential to 'drift'. The organisation should also consider whether or not there is a need for a different project for inactive clients.

Testing the boundaries

ISB is a fund that is designed to facilitate innovative approaches. EDOT set out to test the boundaries of what is possible in terms of delivering an integrated skills and employment service for refugee professionals. Evaluation feedback suggests that whilst the project has certainly developed successful approaches and is benefiting refugees, there are some blockages that have meant that *"it was not possible to do some of the things the project originally set out to do and could have done"*.

The most notable example relates to the EDOT objective to explore 'alternative financial packages' which was anticipated to be particularly challenging as it involves testing the flexibility of national policy and benefit conditions.

The challenges that refugee professionals have with the conditions attached to welfare benefits is well documented. For example, intermediate labour market placements are recognised as good practice for helping refugee professionals into sustainable jobs, but this can sometime involve taking up a full time unpaid placement. This is particularly the case for medical professionals who are usually required to undertake a clinical attachment before they are deemed to be fully re-qualified. Jobcentre Plus staff are required to apply Jobseekers Allowance 'conditionality' which means that an individual who is claiming JSA must be available for work. This limits any training or work placement activity to under 16 hours per week. Clearly, this does not enable an individual to take up an unpaid, full-time placement.

The result of this difficulty is that those on full time placements could not remain on JSA, and, whilst RiJ could have paid the equivalent of their JSA allowances, passported benefits (for housing etc.) are then lost, making the model unworkable. The only option has been to pay those on full time placements the equivalent of a 'living wage'.

These issues can only be properly addressed through national agreements and frameworks. In the remaining months of the project, it would be very helpful if agencies and departments were able to engage in the key issues so that they can be fed into the significant policy developments that are currently taking place.

This experience also highlights the need for clarity and flexibility. Jobcentre Plus is currently undergoing significant change. The Leitch 'implementation plan' has had its launch delayed until next month (July). The detail of this plan will impact on Jobcentre Plus and other key agencies including the Learning and Skills Council. Uncertainty is one of the most difficult conditions to deal with. Change can bring windows of opportunity, but can also can affect organisations in such a way as to make flexibility and risk taking a very challenging prospect.

RiJ was not daunted by this 'blockage'. Staff decided to take a positive approach and change radically the arrangements to ensure that beneficiaries could undertake clinical attachments and other necessary 'placement' activity whilst being financially supported. Instead of paying benefits, they subsidised salaries. This had also had a positive effect on project partners who supported the approach by helping to find placements and/or contributing match funding to support the model. The first partner on board was London Deanery. Since August 2006, doctors have been taking up Senior House Officer clinical attachments, with RiJ paying their basic salaries. This should certainly be seen as a success in terms of creative and proactive project development.

A key principle that ISB is intended to test out is whether or not a project is capable of being “scaled up – and this is where Departmental sponsorship is vital”. The potential of the project in terms of further development of pathways to re-training, re-qualification and employment seems clear. There is a demand and need for the services that this project delivers and in this sense, a justification for it to be continued and scaled up. However, the need to subsidise salaries because of the benefits issues makes the project particularly resource heavy (a detailed analysis is presented in the following section). It would appear that, in order for the project to be scaled up, this issue would need to be tackled at Department and agency level.

One solution to the benefits issue is some form of ‘New Deal’ arrangement for refugee professionals could be created – containing all the elements required and in a way that fits with Jobcentre Plus rules and working practices. This would bring services for this cohort of refugees into the mainstream. However, it is not clear that the New Deal ‘model’ would allow sufficient flexibility to accommodate the diverse range of services required by beneficiaries (although the New Deal for Musicians does appear to be a very flexible example of this model). Also, there are indications that the New Deal model may not be the most effective way of developing and delivering the range of interventions required by people who are at particular disadvantage.

Value for money

EDOT expenditure is approximately £700,000 between April 2005 and March 2007. As would be expected for a pilot project, there has been some variation in planned spend, resulting in an underspend of around £100,000. This is mainly due to the project not being able to follow its planned financial model for beneficiary support ie: benefit replacement. Plans for capital spend have also needed to be reviewed and changed.

Around 50% of expenditure is on project staff and 25% directly on clients through grants and salary subsidies. The project is well staffed, reflecting the intensive nature of the support provided by EDOT. However, the deployment of staff should be considered as part of the review of how the two differing cohorts currently registered on the project should be helped. EDOT is a resource intensive project – and all would recognise this. The unit cost in terms of jobs is very high. But something that is expensive is not necessarily poor value for money. One key public agency partner, experienced in their field, commented “*this is money which is extremely well spent.*”

The impetus for EDOT was not only impact for individuals, families, communities and employers, but also that by taking refugee beneficiaries off benefits there would be a saving to the state and income through tax (often at a higher rate for professionals). All three Government Departments involved in EDOT are very positive about RiJ as an organisation and about the project. The importance of the “*social rather than monetary return*” is clearly acknowledged. That said, it is vital to attempt to quantify the value for money that the project provides.

Many attempts have been made and models constructed to try and assess value for money or carry out a cost-benefit analysis. All have their flaws. We know that projects like EDOT have qualitative impacts that cannot be precisely measured. Some quantitative judgements can be made about the costs of the interventions and the ‘pay off’ in terms of movement into tax paying work. However, it is important to be clear that even these judgements are open to interpretation and there are a number of factors that should be taken into account, including:

- **Individual cases will vary:** for example, even if it can be ascertained that the costs of a re-qualification package are the same for two or more beneficiaries, there will be differing benefits according to marital and family status, type and location of housing (housing benefits and council tax exemption), health etc. Just a few examples include:
 - Job Seekers Allowance is standard at £59.15 per week, but some beneficiaries may have other allowances.

- Housing Benefit – varies according to the size etc. of the accommodation. A couple with one working, and 2 children under 16 need to be earning less than £336 - £459.51 per week, depending on rent of the property, to be eligible to claim.
 - Council Tax Benefit – will vary according to the Borough. A couple, with one working and 2 children under 16 need to be earning less than £300-£350 per week to be eligible to claim
 - Working and Child Tax Credits dependent upon circumstances, wages and the number of hours worked.
- **Job outcomes vary:** for those that are moving into intermediate labour market jobs the tax benefits to the state will not be as great as for those moving directly into higher level jobs in their professions.
- **Training costs estimates vary:** in terms of how much it costs to train a 'native' UK resident in any given profession.
- **The length of time taken to re-qualify varies:** as highlighted earlier, EDOT beneficiaries varying significantly in the amount of time it takes to re-qualify and move into a sustainable job in their professional field. Factors such as the similarity (or not) of their native education system to the UK's, traumatic experiences prior to leaving their home country and emotional issues about being a refugee, family factors and all the 'normal' issues of confidence and practical problems faced by people who are unemployed play a part.

An example of how the financial equation of EDOT can be viewed is presented overleaf. It takes the case of a medical professional taking approximately 2.5 years in total to move into a Senior House Officer (SHO) job fully paid by the employer at a starting salary of £26,000. This doesn't take into account the additional payment that most SHOs would get for working far in excess of a 40 hour week!

THE FINANCIAL COST		THE FINANCIAL BENEFIT	
Average cost for one EDOT beneficiary (medical profession) taking two and a half years to move into work		Estimated tax payments over two years on a basic starting salary with no overtime	
Income benefits plus passported benefits	£8,100 per year (Freud report) for a single person £10,000 per year (RiJ estimate) for one refugee (includes all passported benefits)	Income tax & NI (SHO starting salary of £26,000)	£8,000 per year
Cost of EDOT support for re-qualification	Average of £4,000	Council tax (average)	£1,200 per year
Cost of other EDOT interventions	£13,000 subsidised salary for 6 months	VAT (from increased purchasing power)	£2,000
TOTALS	£37,000 with salary subsidy £24,000 without salary subsidy		£22,400

This example shows that it would take about 3 years for the financial costs of supporting one beneficiary through the medical route to be recouped through tax collection. However, if it were possible for beneficiaries to keep their state benefits during clinical attachments (rather than using a salary subsidy) the costs would be reduced and could be recouped in the same time that it has taken someone to re-qualify and move into work.

When compared with the cost of training people 'from scratch', there are significant cost benefits. Estimates vary, but some examples include:

- **£237,000:** the British Medical Association (BMA) estimate for training someone to Senior House Officer level.
- **£36,000:** Employability Forum estimate for training a nurse (and this is likely to be similar to the costs for a teacher or social worker).

The Employability Forum quotes £2,000 for re-qualifying a refugee nurse and RiJ quotes the average cost for re-qualifying a doctor is £4,000. If the cost of benefits is added, this amounts to around £10,000 per year which is still a substantial saving on the cost of training a nurse or doctor from scratch.

RiJ's recent cost benefit analysis identifies that £171,780 provided comprehensive work-based training for 11 doctors and provided a return of £37,791 in terms of basic rate income tax payment. Those doctors will collectively earn salaries amounting to around £490,000 and pay tax approaching £200,000. The cost benefits are clear.

Recent reports from the Confederation of British Industry and KPMG highlight the valuable contribution that refugees make to the UK economy. Refugee professionals are a key part of this group. Evaluation feedback identifies that the project contributes to increasing the diversity of the workforce to reflect the multi-culture nature of the local West London population and in particular the public. In addition, 'caring' services professionals have a better understanding of clients needs "as refugees, we have to go through so many stages that we often have more empathy with difficult patients".

Refugees do not leave their home countries out of choice. Many refugees long to return to their home country, even those who successfully settle in the UK. Some will return to their home countries where their skills and expertise will be invested. The benefit of enabling refugees to continue learning and working – to the world economy as a whole, and countries shattered by conflict and poverty – should also be recognised in assessing the financial equation of projects such as EDOT.

Discussions with respondents highlighted the need to think about how to reach larger numbers of beneficiaries through the individual projects that fall under the EDOT umbrella. Although it was stressed that the current approach is very effective, it was also acknowledged that it is small scale and that "we need a completely different approach to the current one if we are to get 50-150 of the refugee doctors on the RiJ register into jobs. They need a regular work placement on a daily, possibly on a voluntary, basis so they think and work in health care, but without a loss of livelihood for them." This is clearly a critical issue in terms of the investment versus impact equation.

Levering in funding and maximising the use of existing resources

In considering the financial equation, it is important to note the RiJ has also levered in investment from other sources to bring added value to the project. For example, the North West London Strategic Health Authority and Fair Cities have both contributed funding to support placements and training.

The model that the EDOT project uses also helps to maximise the use of existing services and provision. Beneficiaries are referred to a range of organisations that deliver the training that each requires. RiJ has sought to play to its strength of being the 'glue' that puts together packages, rather than attempting to set up services in competition with those that are already operating. In delivering the project in this way, RiJ is ensuring the best use of existing and additional investment. It is also broadening the multi-agency approach by making use of services that are funded, for example, by the Learning and Skills Council or London Development Agency.

Partnership development

EDOT has facilitated the development of partnership approaches at a number of different levels from Government Department through to front line delivery. These partnerships vary in their functions and effectiveness, but it is fair to say that all have positive aspects to them that benefit project delivery as well as having the potential to inform wider development of policy and practice.

A key principle of the Invest to Save Budget approach is that it requires the 'buy in' of other Government Departments. It is clear that there is an active dialogue between DWP, the sponsors of the project, and the Treasury. This relationship has *"enabled a cluster of projects to be developed to help those who are not very well served by the 'mainstream'"*. Interestingly, the original Jobcentre Plus was an ISB project, and so, over the years, there has been a history of work with the Government Departments responsible for services for unemployed people.

Relationships with the Home Office have been more challenging to maintain, largely because of the number of significant changes in the structure, policies and staff with the Department since 2005. This has made it difficult for staff in all Departments to maintain external relationships. The Home Office remains committed to supporting EDOT until its funding finishes in 2008. However, because the detail of how the NIM is to be implemented (nationally and regionally), is not yet public, it is not possible for the new Border and Immigration Agency to comment further.

From a project level, having the three Departments acting as a 'single funding body' meant that the project was focussed *"making sure we stuck to the criteria, but with it being across all three departments, also meant nothing was missed out and was broader in a positive way."* That said, it was also highlighted that gaps between Government Departments were still preventing the proper integration of services that people need to get into work, and there is a continuing need for *"a better product which is more easily understood at the operational end."*

The feedback that RiJ gives directly to the key contacts in the three Departments is unusual and valued, and is an example of how ISB *"has allowed the front line and the 'higher echelons' to tie up"*. Developing these direct dialogues is a very positive feature of the way in which RiJ is managing the project. This is particularly helpful (and interesting) for those managing the ISB programme. Staffing levels and the high number of projects prevents close involvement with projects, but the direct contact from RiJ *"gives a feel for what's going on"*.

A supportive steering group

The Steering Group includes representatives from organisations with an interest or experience in refugee employment, for example, the Employability Forum, Brent in2Work, Jobcentre Plus, as well as the Home Office and DWP. It is chaired by the College of North West London which took the role of chair to ensure that the Steering Group is independent from delivery. Evaluation feedback identifies that the Chair's input is valued and appreciated.

The role of the Steering Group is twofold: to provide the strategic steer for the project and to monitor its progress. Overall, the Steering Group appears effective in progressing EDOT and has provided a useful *"sounding board"* for staff in helping to shape the project. However, it took some time for the group to clarify its purpose and establish reporting mechanisms that would ensure it had the information and reporting it needed to fulfil its role. This led to frustrations from some members and may explain why it has not always been as well attended as was hoped.

By bringing people together with different perspectives the Steering Group has strengthened the links between the Group and with partners and in itself has become a useful network for partners. This has helped in developing an understanding of the needs of refugee professionals which is likely to have a beneficial effect for the organisations represented in the Group, particularly those in the mainstream.

Developing relationships with delivery partners

EDOT has enabled a network of referral and delivery partners to be established – fulfilling one of its key project objectives. To achieve this, RiJ is building on existing links with Refugee Community Organisations (RCOs), second tier organisations and other key agencies. New relationships have been developed with the support of partner organisations which have opened up additional training and employment routes. These include with Brent Council, developing training for refugees as hostel workers, housing officers and translators, and with Brent Social Services, as social workers.

The RCOs' specific role is to provide referral routes and feedback indicates that this works well. Although the number of referrals from this source is not huge, this is because professional clients are in the minority for most RCOs and they require specialist advice at the outset, a facility that most RCOs do not have as part of their remit. These partners recognise that RiJ *“have the necessary know how and expertise”* and that their key role is to provide the stepping stone that enables refugees to access this expertise. It is clear that RiJ and its RCO partners have relationships of mutual respect which acknowledge the different services and support that they can pool to create effective pathways for professionals.

The EDOT project has enabled RiJ's relationship with Jobcentre Plus to develop so that referral routes are stronger. A range of joint activities are also carried out including surgeries, developing marketing materials and delivering presentations. This has raised the profile of refugee professionals and helped JCP staff to understand their skills and barriers more effectively. It should be remembered that refugees form only a small proportion of JCP customers, and that unless they volunteer the information, they are not specifically identified as a customer 'group'. Some are *“reluctant to say they are a refugee as there is a stigma attached”*. Where someone identifies themselves as a refugee, they are afforded an element of priority – just below lone parents and people who are sick and/or disabled. To help identify refugees so that they can more easily be offered the most appropriate support and referral routes, one manager has established a refugee data base (restricted access) which he shares with RiJ. This works well but has not been rolled out to other Jobcentres.

Some Jobcentre Plus offices are much more actively involved in developing their response to refugees (and other groups) than others. In common with RCOs, JCP offices do not make the majority of referrals to the EDOT project. The *“most successful (referral) route seems to be word of mouth through their own communities”* which tends to be the main recruitment route for many programmes of this kind. However, the relationship between RiJ and Jobcentre Plus is clearly worth nurturing, and further development work should continue on both sides to maximise the benefits of the partnership.

A number of respondents stressed that the referral system is *“one way”*. Jobcentre Plus offices refer refugees to RiJ, but they then have no further contact with, or information about them. Although this is understandable from the perspective that Jobcentres do not traditionally deal with movement into professional level jobs, it is important motivator for all staff to get feedback on the outcome of referrals.

Some respondents highlighted that the pressure on Jobcentre Plus to reach its targets of getting people into work did lead to the potential for refugee professionals to be expected to take up jobs well below their skills levels. Although the 'work first' principle is important, recent policy developments now acknowledge that this is not always the most effective route to sustainable employment. It also does represent a waste of talent and skills if people are 'underemployed'.

For some Jobcentres that are located on the borders of the London West boroughs, only those customers who live in the appropriate boroughs can be referred, adding a further complication. In addition, a number of respondents felt that RiJ should not restrict the project to refugee professionals alone.

Policy into practice

EDOT has relevance and fit with both mainstream and refugee focused policy development. This places it in a strong position as policies unfold and are translated into implementation. That said, in the final months of the project, staff and the

Steering Group will need to be vigilant and proactive to maximise the opportunities for continuing the successful aspects of EDOT beyond March 2008 when current funding ends.

The features of the EDOT project reflect and support the findings and recommendations of the Freud report which emphasises the need for *“the least advantaged to be in receipt of more individualised support”*. The report proposes that Jobcentre Plus should play to its strength as *“the Department’s one-stop shop benefit and job broking arm and should concentrate on those nearer the labour market”*. Those who are further from the labour market should be helped by voluntary and private sector organisations that are better placed to provide this type of support. The EDOT project represents a good example of how this is working in practice – particularly in view of the partnership that is being developed with Jobcentre Plus.

The project demonstrates some of the key features recommended in other mainstream policy drivers. The Leitch report, a primary driver for strategy and implementation for both the DWP and Department for Education and Skills, recommends the establishment of an integrated skills and employment service. EDOT is predicated on the need to train and qualify people for specific employment goals. In particular, the information, advice and guidance provided by the project focuses on skills, qualifications and employment goals. Advisers and support staff involved in delivering the project have a clear sense of the complete range of services needed by a person in order to achieve their goal.

The approach of the project in providing the brokerage, support and finance that allows individuals to access and purchase their own learning and achieve qualifications exemplifies the demand-led, customer focus put forward by Leitch. This approach also reflects some of the principles underpinning the LSC’s proposed Skill Accounts. By ensuring that individuals follow re-training and re-qualification paths that are in line with employer and sector requirements the project also demonstrates how it responds to demand from this ‘customer market’.

What is particularly interesting about the EDOT project is its focus on supporting those who have higher level ‘vocational’ skills, but who experience similar levels of exclusion from the labour market as many who have much lower skills levels. Government Departments are currently engaged in teasing out what an integrated guidance, skills and employment service should look like for all adults. The EDOT experience has much to offer in ensuring that the ‘nuances’ of such a service are able to respond to the multiplicity of different needs that exist in our population. It certainly serves as a reminder that one size will certainly not fit all!

The same point is particularly pertinent in relation to the National New Model for Refugee Integration (NIM). The NIM has four elements – case working, mentoring, help for refugee professionals and support for RCOs. Clearly, the experience of EDOT, along with other similar projects being delivered in other regions, will be very helpful in fleshing out the detail of how best to deliver the strand that is focused on refugee professionals.

NIM consultation feedback highlighted concern about an employment service dedicated to refugee professionals, favouring a service that is available to all refugees. Whilst most would argue that all refugees should benefit from support, it is clearly vital that services are tailored to suit the wide range of needs within the total cohort of refugees, recognising that it is not a homogenous group. The multi-agency ‘Licence to Skill’ approach could be very helpful in taking this segmentation and ‘personalisation’ of services forward.

The ethos and elements of EDOT are also directly in line with the Licence to Skill approach and tool that has been developed by the LSC, LDA, Jobcentre Plus and other regional partners. It is currently being piloted through a variety of organisations in the capital and involves developing and delivering integrated skills and employment pathways that respond to the needs and goals of individuals and employers. RiJ is involved in this piloting and it may be useful to extend the current activity to include the EDOT project as it provides such a good example of some of the core principles of the approach. This could provide a further way of raising the profile of EDOT and how it works.

Other issues raised in the NIM consultation closely mirror the experience of EDOT – the need for better relationships between Departments, increased awareness of refugee needs and issues in Jobcentre Plus, and better relationships with employers. RiJ will need to keep a watching brief on developments with the NIM and its implementation. The Director's involvement with the LORECA advisory group and other key bodies is of immense benefit to the organisation, for both national and regional policy developments.

At a regional level, EDOT again reflects the integrated skills and employment approach that is central to many strategic developments. The consultation draft of the Mayor's Refugee Integration Strategy (RIS) is due to be published this month and will include training and employment as major themes. The experience of EDOT has much to offer to this consultation – highlighting the critical features that support integration. Those involved in developing the RIS work with others who focus on the development and implementation of mainstream skills and employment strategies. This includes the development of the London Skills and Employment Board's strategy.

Monitoring, management and review

During the course of delivering the EDOT project, and particularly in the last few months, RiJ has undergone organisational change. The funding uncertainty that is a feature of the voluntary sector meant that the organisation's staff complement reduced from 21 to 17. The restructuring and planning required to launch RiJ as an independent body in April 2007 resulted in further staff losses, including EDOT's administrator, leaving the organisation with a staff complement of 11. Against this backdrop, RiJ has done well to manage and deliver EDOT.

This interim evaluation has identified some great strengths, good practice and innovative approaches developed through EDOT. If RiJ and refugees are to reap the benefits of these developments, this work needs to be promoted so that it can inform and become part of mainstream service delivery. Although this is possible at the moment, greater attention to the detail of record keeping and ongoing review would strengthen the potential for sharing what works.

Client files and tracking

RiJ has over 3,000 people on its database. Each EDOT beneficiary has a paper file and is also 'tagged' on the RiJ electronic database as an ISB funded client. RiJ invests substantially in its refugee clients but does not always log or record all of the activity undertaken on the client file. More recently it has moved to electronic recording but there are still some gaps which reduce RiJ's ability to demonstrate which activities have the most impact on job outcomes and to identify client progression.

As discussed in some detail in the report, until recently RiJ kept all client files "live" until a client achieved a successful job outcome. Whilst this approach means that clients have access to RiJ services at any time, it is not necessarily the most effective way to manage caseloads and can distort both the organisational and individual advisor client case load and can affect success rates. RiJ has recently changed its policy and is now in the process of reviewing, and where appropriate, closing clients' files after 6-months of non-activity. This is particularly pertinent in the case of EDOT where a significant finding of the evaluation is the 'dual cohorts' with one group including many clients who require review and decisions to be made about what appropriate support should be provided by RiJ or other organisations. Implementation of the review should significantly help in sharpening up monitoring and data reporting so that it is more effective in providing an accurate picture of RiJ's services and their impact.

Service review and quality assurance

RiJ's quality assurance practices have generally evolved in relation to the requirements of different funders. For EDOT they have established suitable data recording and monitoring and have commissioned this independent evaluation. Audit

inspection reports are positive. With its close relationships with beneficiaries, RiJ also has a wealth of anecdotal information at its fingertips.

Staff have been able to provide the information requested for this evaluation and have worked hard to do this. However, the process has flagged up the need for more regular internal analysis and review of data. It is not uncommon for busy and stretched organisations to find it difficult to carry out in depth review. In the remaining months of the project, it would be very beneficial if this was instigated by RiJ so that staff and the Steering Group are able to maximise the benefits and impact of the project and have a clear picture of what should happen after March 2008.

In its new status as an independent organisation, RiJ recognises that it needs to develop more robust quality improvement systems for service delivery, beneficiary tracking, partnership working, branding and monitoring and recording activity. It is acknowledged that the information that can then be drawn from these systems, enabling RiJ to assess value for money and impact much more thoroughly and precisely. This is particularly important since Brent Council is no longer the accountable body and funders will be keen to be reassured that the independent organisation has robust and comprehensive systems.

Next steps

The EDOT project has clearly made a significant impact for refugee professionals who are on the pathway to sustainable and appropriate employment, and for those who are already there. RiJ has developed and delivered the project against a backdrop of significant change – internally with the creation of RiJ as an independent organisation, and externally with the restructuring of Government departments and introduction of new policies.

At this stage of project delivery, the following next steps are recommended in order to ensure that the tested approaches, lessons learnt and good practice are capitalised on by RiJ and those responsible for shaping, planning and purchasing services for refugees:

- Further development of internal review, quality and beneficiary tracking systems
- Consideration of how the two different project cohorts can be most effectively served – for the remainder of the EDOT project and beyond. This should be carried out in the context of RiJ's strategic review and development.
- Consideration of how RiJ's expertise can be used as income generation eg: capacity building consultancy for RCOs and public agencies on how to provide effective work-focused services for refugees.
- Further development of relationships with employers and employer facing organisations to increase the number of people moving into appropriate and sustainable jobs. This should include specific work with private sector agencies and organisations.
- Further development and 'validation' of non-medical re-qualification packages.
- Continued dialogue with key Government Departments – Home Office Border and Immigration Agency, Greater London Authority, LORECA, Department for Work and Pensions to explore how the experience of EDOT can help to inform the development and implementation of the New Model for Integration, as well as 'mainstream' policy arising from the Leitch and Freud reports.
- Continued exploration of ways of sustaining the critical success elements of the project, in the context of the unfolding policy and implementation context.

It is recommended that these next steps are addressed in the context of all the findings and recommendations of the interim evaluation report, so that the full potential of EDOT and RiJ can be developed over the coming months.

Appendix 1: Living examples

Mr A Dentist

Mr A is a dentist from Iraq who is currently re-qualifying. He gained a Masters degree in Iraq and was also a university lecturer.

He started on the EDOT project at the end of 2004 and has undertaken a communication skills course. He heard about RiJ through his wife, who is a doctor and was attending the medical club and heard about the project. RiJ support has included, in 2004 paying for IELTS fees, the fees for first part of re-qualification and books in the following year and in 2006 providing a larger grant for training practice which he did at Eastman Dental Institute. He applied for Part C fees of £1,250 in October 2006, but failed his exams. However, he is doing his re-sits this summer, paid for through the project. He has also been applying for professional membership which will assist him to find work in the NHS.

RiJ has not just helped with fees and books, but also with application forms and finding out information. Mr A felt that the combination of support means that, for him, *"the project is perfect"*. Without this support, Mr A commented that he would have had *"big problems"*, including a delay in taking the exams or possibly, not being able to take them at all. He feels it is important to make sure that RiJ services are available to all professional refugees wherever they live. Where RiJ has been unable to help because of funding constraints, Mr A has also had support from RETAS and CARA.

Mr A was clear that the major barrier for him and many other refugee professionals is the very long time that re-qualification takes, which needs lots of patience and finance, and does not just include fees but living expenses too. He feels he needs lots of qualifications, as posts are very competitive. Once he has done his exams, he hopes to get a training post. He has tried to work as dental nurse but he needed qualifications for that as well. He has been on benefits for about a year and has applied for jobs but nothing has come of it, and *"it is difficult to combine studying with a job."* Mr A noted that the challenges continue, even when you get into work. His wife's work as a Senior House Officer involves very long hours and they need to pay the rent, nursery etc. They find it very difficult to get by and more financial support would be helpful.

Ms R Accountant

Ms R is a qualified accountant from Somalia and is currently unemployed. She has just finished a business degree at Thames University and has been on the EDOT project for 5 months. Ms R was referred to RiJ by a Somalian community organisation and was looking for a work placement to get work experience connected to her studies. She was also looking for financial assistance to undertake a two week care training course to enable her to get immediate work. There were several nursing homes nearby that had vacancies, but she needed qualifications to work there. RiJ will consider awarding a grant once staff are sure that Ms R will be able to get a job once she has re-qualified.

Meanwhile, her main focus is to get business experience. RiJ have offered her possibilities but they are located quite far away. She has three children, one still at nursery, and her husband already leaves for work very early, so these opportunities are difficult to take up at the moment. Things might become more manageable in September when her youngest child starts school.

Ms R has found the opportunities that RiJ provides very helpful, like the Open day at London Transport held in conjunction with Employability Forum. Six jobs were available and she applied for three. Although she was unsuccessful, she found it really helpful going through the job application form with London Transport highlighting what they were looking for and the type of information to provide. RiJ also passed on some temporary research jobs but they were not suitable and she passed them onto a friend.

The main difficulties Ms R faces is the lack of UK work experience. Her accountancy qualification was a distance learning one used in Kenya and the UK, but clearly she felt she needed more qualifications. She is also now aware that no employer will take her without UK work experience. She was here for 2 years before she got her refugee status and it has now been a further 3 years. She has three children and she started doing short courses when they were young to develop her skills.

She soon realised that the education system was very different (doing assignments and 2,500 word essays was very new) and that she would need to adapt her approach to learning. In Somalia, Ms R was used to *"being given a book and learning it"*. She feels that it takes a long time to re-qualify and that there should be better systems for recognition of existing qualifications.

Her main aim now is to get work experience and she is happy to do a year's unpaid work experience. Personally, she feels she has a lot to offer. RiJ have offered some hand holding, helping her prepare her CV and confidence building. The university has a careers centre but it has been of little help. She has been to the Job Centre and used the website. There are some local jobs she may try to apply for. She wants to secure a paid job and climb the job ladder. She is interested for example in human resources but happy to start off as an administrator or receptionist. She is motivated by wanting to increase the family's income, but also with three children she feels it is also very important to be role model for her daughters, the oldest two are 6 and 8. She does not want them *"to grow up lazy"*. She wants to show them how to work hard and achieve.

RiJ have provided much more hands on support, giving advice with techniques and confidence. They are very easy to access, with Open Days on Tuesday and Friday. She can also get in touch by e-mail easily and having a known person to contact *"makes it really good and you get a quick reply"*. This is very important to her and it has *"given me hope - to know they are doing things for me."*

Ms O Nurse & Doctor

Ms O is from the Ukraine and is a qualified nurse and doctor, but she has not practiced for 13 years. She cares for her child and a chronically sick husband. The family is on benefits and due to her husband's illness they agreed that she should be the main bread winner. She went to the Job Centre and got advice on benefits, but did not have the expertise to give her the specialist help she needed as a refugee doctor. RiJ understood her needs much better.

She heard about RiJ over 2 years ago through a friend. They have assisted with paying for travel to college (Southwark to do her ILETS), exam fees and money for books. They also keep her informed about any new rules, regulations or laws concerning refugee doctors. She thought about working as a nurse here, but she would still need to register, therefore she is keen to re-qualify as a doctor and will fall back onto nursing if she does not succeed as a doctor.

Ms O is using a medical recruitment agency and is hoping to start work shortly as a phlebotomist at Hammersmith Hospital. The Job Centre directed her to the hospital, giving her the name of a member of the personnel team at the hospital. She made contact and found the work herself. Previously she had got a ward-based job at Hillingdon Hospital, through RiJ, but the hours were too difficult, as it was an 8am start and she has to get her child to school in the mornings. Plus the travel was too far from Feltham to Hillingdon.

She would like RiJ to *"give us more help in finding a job"*. She had heard about the alternative route/Assistant Clinical Practitioners and would like that to be extended wider than for Brent residents. She would also like them to run or help organise a more accessible intensive preparation course for PLAB I. They currently run a club which are weekly sessions at RiJ one night a week, but she cannot always make it due to childcare and RiJ is quite hard to get to by public transport from her part of West London.

Mr R and Mrs R Engineers

Mr R is a Civil engineer from Somalia and first started using RiJ in July 2005, accessing career focussed support and the job club. He also attended the Waste water modelling course in 2006/07. He is currently unemployed, but has been working part-time as a stock counting auditor.

Mr R is interested in short-term, job-focussed courses, as ways of building on his learning and experience. The waste water modelling course was good and increased his knowledge of computer software packages. *"It helped improve my cv and increased my confidence."* He was selected for the training by sending in his CV, being screened for both his civil engineering and English language skills and then selected for interview. He feels it has helped his career progression.

Mrs R is currently a Teaching Assistant. She is a qualified teacher, who has been working at Preston Park School as a voluntary teaching assistant. Her husband referred her to RiJ, and through the EDOT project, they found her this placement training as a teacher's assistant at the school. She has childcare responsibilities, but is managing to study part-time. She is due to finish the teaching assistant's course in July 2007 and will then be asking for RiJ's support to help her find work as a Teaching Assistant. Commenting on the project she said, *"It has definitely benefited me with my skills and career development"*.

Mr and Mr R had to claim benefits when they first arrived in the UK, but were very keen to get 'proper employment' as soon as possible. They found that Jobcentres had difficulty in providing the right kind of support for refugees, and that RiJ has been very supportive, acting as a very important point of contact. Mr R commented that having more involvement from employers and from other professional bodies such as Thompson Balfour Institute, CITB and the Engineering Council of UK *"would be a very practical development in the training programme and add more weight to the individual's CV and portfolio."*

Appendix 2: List of contributors

Kim Collins	HM Treasury
Laura Beaumont	HM Treasury
Stephen Blackmore	Home Office
Jonathan Bailey	Department for Work and Pensions
Jon Williams	LORECA
Pip Kings	London Region Learning and Skills Council
Iain Dewar	Jobcentre Plus
Inder Matharu	Jobcentre Plus
Jo White	Jobcentre Plus
Ronnie Evans	Jobcentre Plus
Neelam Chada	Jobcentre Plus
John Williams	LORECA
Illa Pattni	Brent into Work
Maggie Pulle	College of North West London
Kavah Kalantari	Iranian Association
Suzan Hafid	The Arab Group
Teshome Dante	Refugee Advice Centre
Ibrahim Ahmed	Skills and Work Alliance
Andrea Fozard	Fair Cities
Dr Yonlock Ong	London Deanery
Christine Korin	London Deanery
Dr Edward Dickinson	Hammersmith Hospital
Tom Leach	Brent PCT
Raksha Kukadia	Brent PCT
Dr Ajit Shah	Medical Journal Club
Sophie Walrafen	Time Together Mentoring Coordinator
Muntadhar Najem	Al-Kindi Society - Waste Water Modelling course
Fahira MulaMehic	Refugees Into Jobs
Anba Ali	Refugees into Jobs
Sarah Hayward	Employability Forum
Lubna Lone	Empower Teachers
Sharon Dillite	Preston Park Primary School

Individual Beneficiaries

Mir Wais Ravi	Ismat Bakhtari	Oxana Mutalak
Madlain Khoshaba	Hibo Magan	Nahida Farhood
Lailuma Joyan	Qais Toma	Evis Rama Dauti
Alan Albazi	Gulali Morad	Bayan Mahmood
Feyroza Amirqul	Abbas Kashmiri	Rasa Alihassan
Hassan Alsibahi	Zahra Shire	Sabira Hussein
Hoeda Al Zoehiri	Rukia Abdi	
Emar Saleh	Lola Ravi	

Appendix 3 – Breakdown of beneficiary figures

NATIONALITY

No	Country	How many
1.	Afghanistan	47
2.	Albania	2
3.	Algeria	6
4.	Angola	1
5.	Armenia	1
6.	Bosnia	3
7.	Brazil	1
8.	Bulgaria	2
9.	Burma	2
10.	Cameroon	2
11.	Chile	1
12.	Congo	4
13.	Eritrea	3
14.	Ethiopia	7
15.	Georgia	1
16.	Iran	37
17.	Iraq	66
18.	Israel	1
19.	Kenya	4
20.	Kosova	15
21.	Mongolia	2
22.	Nigeria	1
23.	Pakistan	3
24.	Ruwanda	1
25.	Russia	3
26.	Serbia	1
27.	Somalia	111
28.	Sri Lanka	8
29.	Sudan	17
30.	Syria	1
31.	Tajikistan	1
32.	Turkmenistan	2
33.	Ukraine	3
34.	Yemen	1
TOTAL		361

Area

Brent	Harrow	Ealing	Hammersmith & Fulham	Hillingdon	Hounslow	Barnet	Kensington & Chelsea	West minster	TOTAL
100	49	73	46	31	36	13	5	8	361
28%	14%	20%	12%	9%	10%	4%	1%	2%	100%

AGE

< 25	25-35	>35	Not Known
19 (5%)	115 (32%)	225 (62%)	2 (1%)