

A DISABILITY WORKFORCE STRATEGY FOR THE ACT DISABILITY SECTOR

May 2007

INTRODUCTION	4
SETTING THE CONTEXT.....	4
METHODOLOGY	6
I) RESEARCH.....	6
II) VISITS TO FACILITIES AND SERVICES	6
III) FORMAL MEETINGS WITH SECTOR REPRESENTATIVES	6
CONTEXT AND BACKGROUND TO THE WORKFORCE STRATEGY	7
I) INTRODUCTION	7
II) THE NEED FOR A WORKFORCE PLAN	7
III) WORKFORCE PLANNING – THE TASK	8
PROPOSED ACTIONS AND DISCUSSION	9
INTRODUCTION	9
WORKING TOGETHER	10
1. WORKING TOGETHER.....	10
<i>Recommendations</i>	10
<i>Discussion</i>	10
2. RESOURCING THE WORKFORCE PLAN	12
<i>Recommendations</i>	12
<i>Discussion</i>	12
SKILLING THE WORKFORCE.....	13
3. ENSURING A SKILLED DISABILITY WORKFORCE	13
<i>Recommendations</i>	13
<i>Discussion</i>	14
<i>Logistical and practical barriers to the provision of training</i>	16
<i>Experienced staff - a need for credentials?</i>	17
<i>Providing incentives for training</i>	17
<i>Quality of training provided</i>	18
4. FOSTERING ONGOING TRAINING	18
<i>Recommendations</i>	18
<i>Discussion</i>	19
5. ENHANCING MANAGEMENT TRAINING	19
<i>Recommendations</i>	19
<i>Discussion</i>	20
6. FOSTERING MENTORING	21
<i>Recommendation</i>	21
<i>Discussion</i>	22
VALUING THE WORKFORCE	23
7. IMPROVING WORKPLACE SUPPLY.....	23
<i>Recommendations</i>	23
<i>Discussion</i>	23
<i>Current recruitment practice</i>	24
8. SECURING FUTURE LABOUR SUPPLY.....	26
<i>Recommendations</i>	26
<i>Discussion</i>	26

9. IMPROVING WORKFORCE RETENTION	27
<i>Recommendations</i>	27
<i>Discussion</i>	27
NEW HORIZONS IN QUALITY CARE/BECOMING A MODEL OF EXCELLENT CARE	28
10. DEFINING ROLES OF CASUAL STAFF	28
<i>Recommendation</i>	28
<i>Discussion</i>	28
11. ESTABLISHING A PROFESSIONAL NETWORK	29
<i>Recommendation</i>	29
<i>Discussion</i>	29
12. DEVELOPING WORKFORCE PLANNING CAPACITY	30
<i>Recommendation</i>	30
<i>Discussion</i>	30
APPENDIX A - REVIEW OF RECENT REPORTS	32
APPENDIX B – COMMENTS FROM CONSULTATIONS	ERROR! BOOKMARK NOT DEFINED.

Introduction

Disability ACT commissioned Coote Practice Pty Limited to develop a Disability Workforce Strategy for the ACT Disability Sector.

The discussion and recommendations in this report build on the considerable analysis and discussion of disability workforce issues undertaken over recent years in the ACT and across Australia. While published literature and formal reports contributed to the development of the recommendations in this report, essential input also came from many people directly involved in the ACT disability sector.

This report concludes that the ACT disability sector needs to implement a coordinated set of workforce initiatives across government and non-government sectors. Many of the recommendations reflect initiatives already discussed in the ACT.

Implementation will require commitment to a 3-4 year plan from across the disability sector and the allocation of adequate resources. The ACT government must provide leadership and resources if the proposals in this report are to be realised.

Setting the Context

In September 2004, the ACT Government launched '*Future Directions: A framework for the ACT 2004-2008*'.

Future Directions set out four strategic directions to underpin the development and delivery of disability services in the ACT:

1. Influencing policy and culture to promote an inclusive society.
2. Strengthening the capacity of people with disabilities, their families and carers to maximise control over their lives.
3. Improve planning and use of available funding to meet the needs of people requiring ongoing support.
4. In partnership with the community sector, strengthen the sustainability and responsiveness of the service delivery sector.

Future Directions also lists 'Priorities 2005-2008'. Under Objective 4.5 "Sector has a stable well-trained workforce to provide quality services to people with disabilities" the priorities listed are:

- With the community sector, develop and implement a comprehensive workforce strategy.
- Establish workplace practices that encourage stability and transferability of skills across the sector.
- In partnership with the disability sector, continue to develop and promote training resources which incorporate required skills, competencies, attitudes and behaviours.
- Work in partnership with service providers to further strengthen organisational infrastructures.
- In consultation with stakeholders, continue to develop and implement a continuous quality improvement framework.

The Disability Workforce Reform Working Group, a collaborative committee involving Disability ACT and representatives from the community has considered how the workforce proposals in *Future Directions* can be developed. In July 2005 the working group agreed on four strategic themes:

- Skilling the workforce.
- Valuing the workforce.
- Working together.
- New horizons in quality care/becoming a model of excellent care.

The Working Group proposed that the following concepts be considered and 'undertaken as projects':

Strategic Theme 1: Skilling the Workforce - That base grade qualifications be phased in as a mandatory requirement for all disability support workers in the whole of the ACT sector.

Strategic Theme 2: Valuing the Workforce - That career path options be developed which recognize and value the skills of disability support workers and provide incentives for disability support workers to develop specialist skills and to remain in a direct support role. That mechanisms are established to ensure that front line supervisors are skilled in support and supervision of disability support workers.

Strategic Theme 3: Working Together - That a sector-wide Coalition (including both government and non-government representatives) be established and funded to coordinate training and a professional development calendar. The Coalition will develop priorities for the professional development calendar. The Workforce Reform Working Group recommends that disability support worker training and front line supervisory skills development be first priorities. The Coalition could also consider and implement programs relating to recruitment and retention.

Strategic Theme 4: New Horizons in quality care/Becoming a model of excellent care - That a program be implemented in the ACT to identify and showcase the expertise of disability work in the ACT. This program would promote continuous learning through the sharing of good practice from the ACT and other places.

The proposals in this report reflect further development of these principles and directions developed by the ACT Disability Workforce Reform Working Group.

The recommendations encompass a broader set of principles endorsed by the ACT government, including the five strategic priorities in the Commonwealth State and Territory Disability Agreements (CSTDA III). These priorities are:

1. Strengthen access to generic services for people with disabilities;
2. Strengthen cross government linkages;
3. Strengthen individuals, families and carers;
4. Improve long term strategies to respond to and manage demand for specialist disability services; and
5. Improve accountability, performance reporting and quality.

In summary, this report proposes a workforce strategy which builds on principles and directions already agreed within the ACT disability sector.

Methodology

i) Research

The consultants have reviewed background material including:

- Undertaking a focused review of relevant academic and policy literature;
- Researching the approach to disability workforce issues in other Australian states; and
- Holding telephone discussions with several academics and administrators from disability agencies in other states.

ii) Visits to facilities and services

Discussions were held with staff from all levels of Disability ACT, including senior executive staff, policy staff, disability services managers and staff engaged in the provision of services to clients. Meetings were held with many non-government providers of disability services and with organisations that lobby for and represent people with a disability.

Disability ACT arranged for the consultants to visit several supported accommodation homes occupied by people with disabilities, where discussions were held with staff and residents.

Appendix B summarizes, in a de-identified format, views received on issues relevant to this report. These comments are grouped into broad themes, are not attributed to individuals or organisations and in some cases are contradictory. These comments provide a 'snapshot' of the views of people who work in the ACT disability sector on many of the issues considered in this report.

iii) Formal meetings with sector representatives

Formal meetings were held with several key groups within the ACT disability sector.

- 9 October 2006 - Consultants met with the Strategy 4 Reference Group comprising representatives of Disability ACT and the wider disability sector. This group was established to consider actions flowing from Strategic Direction 4 of Future Directions.
- 9 November 2006 - A preliminary draft of the recommendations in this report was discussed with senior operational staff from Disability ACT.
- 17 November 2006 - A meeting was held with the Disability Partnership Forum, which comprises 10 non-government organisations (NGO's) holding significant service contracts with Disability ACT at which the draft recommendations were discussed with representatives of community organisations.

Almost universally across the ACT disability sector there is recognition that an orderly, focused and long-term approach is needed to achieve the fundamental aim spelt out in *Future Directions* of developing 'a stable, well trained workforce'.

Context and Background to the Workforce Strategy

i) Introduction

The disability sector offers challenging and rewarding work. However, if disability services are to successfully compete for staff in the current labour market, then disability sector employers must promote career opportunities in more sophisticated ways to defined 'target' audiences. They will also need to develop effective recruitment, training and retention strategies.

Disability services are diverse and interrelated. In the ACT the government is a major provider of services, particularly accommodation services. Independent agencies provide services or hold contracts with Disability ACT to deliver services to people with a disability.

Several analyses of disability and related workforce issues have been undertaken in recent years. (Appendix A comprises extracts from some recent reports.) This report does not review this earlier work in detail. Rather, practical proposals are presented that can be implemented over the next few years to achieve the *Future Directions* aim of establishing "a stable, well-trained workforce" in the ACT.

This report reflects developments that have shaped the disability sector over the last few decades, including policy changes which emphasize an underlying human rights philosophy. This philosophy contrasts with a more economics based approach, which focuses on the efficient allocation of limited resources. The inevitable tensions raised when these two perspectives clash underlie many of the more difficult issues in the disability area.

*"As is the case with all government services, resources for disability services are not unlimited and we must ensure resources are allocated in an optimal way."*¹

ii) The need for a workforce plan

Broad workforce issues in the disability sector are similar across states and in comparable countries. Common features include:

- High turnover (it should be noted however, that over the past two years Disability ACT has considerably reduced its turnover);
- Low pay;
- A predominantly female workforce;
- Growing demand for services (because of ageing of those with disabilities, ageing carers, an expanding population and increasing expectations);
- Debate about the place and value of formal training credentials; and
- The critical importance of values in any training regime.

These workforce pressures are compounded by the present tight labour market in the ACT, with many well-paid alternative career options available. Workforce replacement will become an increasing issue over the next 15-20 years as 39% of all disability workers in the ACT are in the 45 years to 65 years age bracket.²

¹ Accommodation and Support Paper: New South Wales government, January 2006 p3.

² Disability ACT, *Report of the survey of the ACT Disability Sector Draft1* (unpublished). 2004: Canberra.

The Community Services & Health Industry Council Skills Report, 2005 reports that:
“...many factors are expected to increase demand for community and health services. They include the ageing of the population, new social policies, rising consumer expectations and a range of new services made possible by advances in technology.”

The availability of labour with the right kind of skills is critical for any industry. Disability, in common with other community service industries, can no longer simply rely on traditional labour sources, skill levels and approaches to staff recruitment and retention. A number of structural factors are converging which make it imperative for the disability sector to take the initiative to ensure staff are available.

This workforce strategy for the disability sector aims to ensure a skilled stable workforce is available to meet current and emerging service demands. People with appropriate attitudes and skills must be attracted to the sector and be trained and equipped to undertake services required now and in the future.

iii) Workforce planning – the task

*“Workforce planning is a continuous process of shaping the workforce to ensure that it is capable of delivering organisational objectives now and in the future. The provision of quality human services to any community requires an adequate supply of well trained workers, supported by an appropriate standard of infrastructure”.*³

- This strategy aims to establish clear links between challenges posed by the broader labour market and evolving needs in the sector, i.e. to provide recommendations that establish a clear connection between more strategic initiatives relating to workforce planning and the aim of delivering quality service to ACT residents.
- The recommendations seek to link and take account of individual client perspectives, service provider perspectives, and societal interests in mutually beneficial ways.⁴
- The recommendations incorporate local, national and international research findings, include reference where appropriate to the requirement for national action and suggest areas where Disability ACT needs to advocate on the sector’s behalf.
- Thinking around ‘best practice’ in the sector continues to evolve. There has been an increasing emphasis over recent years on the provision of services to clients through individual support packages, with more emphasis on flexible community based services support options.
- Rather than a ‘one size fits all’ approach to service development and delivery, a system with considerable variation in service programs, staffing arrangements and other characteristics will continue to evolve.
- There is debate as to the relative and comparative value of formal training and education versus ‘on the job’ development. These should not be seen as conflicting aims. On the contrary, administration, supervision and day-to-day management must be organised to support staff training and staff development if the ACT disability workforce is to effectively grow and adapt as new challenges emerge.

³ KPMG, *Investigation into workforce capacity issues*. 2006, National Disability Administrators.

⁴ KPMG, *Investigation into workforce capacity issues*. 2006, National Disability Administrators.

Trends in the provision of disability services heighten the need for appropriately trained disability support workers confident in their abilities and able to react positively as client requirements change and policy evolves. Staff will need skills, motivation and support to successfully adapt to changes in how services are organised and delivered. Everybody associated with an organisation providing disability services, from the board of directors down, needs to be aware of changing perspectives and evolving needs.

Underlying premises in this report are:

- Workforce initiatives will be more successful if based on sector-wide cooperative efforts;
- Success will require on-going, long term commitment to a defined, agreed set of initiatives; and
- Some resources will be needed to achieve the proposals recommended.

Proposed Actions and Discussion

Introduction

The ACT disability sector framework *Future Directions* includes Objective 4.5: “sector has a stable well-trained workforce to provide quality services to people with disabilities.”

The proposals in this report reflect these four strategic themes agreed by the Disability Reform Working Group and are grouped under 12 strategic priorities.

Any such categorization of proposed actions is inevitably arbitrary. The recommendations and suggested actions comprise an interlinked set of proposals, not a series of discrete options. Progress in one area will depend upon progress in other areas. The fundamental aim of this workforce strategy is to achieve a “stable, well trained workforce” and all proposals will be important if this is to be achieved.

For example, a requirement for formal training prerequisites before entering the disability workforce must be accompanied by initiatives that ensure the content and organisation of formal courses actually meet the needs of staff and of the sector employers. Furthermore, such formal prerequisites lose much of their potential to enhance standards if opportunities for on-going training are not easily accessible and if there is not a sector-wide culture that encourages and supports continuous learning.

Similarly, organisational and administrative processes that inevitably create an on-going reliance on short term, minimally trained casual staff will need to be addressed by orderly planned recruitment and retention strategies such as those suggested in these recommendations. Successful implementation of these strategies will in turn be reliant on a broadening of career options, particularly through linkages with other community service sectors, and by a commitment to address various pay and related employment issues in ways that align pay levels with achievement of training goals.

The 12 strategic priorities defined in this report are:

1. Working Together
2. Resourcing the Workforce Plan
3. Ensuring a Skilled Disability Workforce
4. Fostering Ongoing Training
5. Enhancing Management Training
6. Fostering Mentoring
7. Improving Workplace Supply
8. Securing Future Labour Supply
9. Improving Workforce Retention
10. Defining Roles of Casual Staff
11. Establishing a Professional Network
12. Developing Workforce Planning Capacity

Recommendations are grouped under these broad themes and each group is followed by some discussion. As stressed above, these recommendations need to be progressed in an orderly and coordinated way.

Working Together

1. Working Together

Recommendations

- Build on the established cooperative arrangements between Disability ACT and community organisations now coordinated by the Strategy 4 Reference Group to promote implementation of this workforce strategy according to principles articulated in the “Social Compact” between the ACT government and non-government sectors.
- Develop an implementation committee, an implementation program for four years and provide resources for secretariat support

Discussion

Disability services in the ACT are provided by government and by community organisations. Most accommodation services are provided by government, which is a major employer of disability support workers. The community sector, including 38 providers funded by Disability ACT, is responsible for the majority of community support, community access and respite services. The ACT government is:

- The dominant funder;
- A purchaser of services from community organisations;
- A provider of services in its own right;
- A sector regulator; and
- A responder to policy and political pressures.

Community organisations, by virtue of their origins and driving philosophies, value their autonomy including their right to do things their way. These organisations vary in size and in the range of services they provide. While most are heavily reliant on the ACT government for funds they also obtain funds from other sources. Many depend on the support of volunteers.

The imperatives derive from the need for the sector to develop more focused, organised and long term approaches to workforce development to more effectively compete in the labour market.

The aim is to achieve more strategic approaches and effective outcomes while conserving effort and utilising scarce resources optimally.

It is highly important to both NGOs and government therefore, that the strategy is underpinned by commitment from the whole sector. The “Social Compact” already established between the government and the non-government sector provides the policy underpinning. Operational success factors are likely to be collaborative planning and implementation and allocation of resources (staffing input and funding) to support the strategy and adherence to the milestones established.

All acknowledge that the environment is a dynamic one and involves challenges redesigning service responses to meet emerging needs, the changing industrial environment and the continuing increases in demand. While this situation creates significant pressures, it also creates energy and commitment which could be mobilised.

Our consultations have shown broad support, both within NGOs and government, for all parts of the sector to work together. If there is a clear strategy for the sector and the respective roles, relationships and responsibilities are clear, significantly more productive and effectively performing services should result.

In assessing specific workforce proposals in this report, consideration must be given to the governance and operational processes through which recommendations can be implemented. Proposals similar to those in this report have been agreed ‘in principle’ over the years. What has been lacking has been agreement on mechanisms to ‘make it happen’. Approaches might include:

- The ACT government providing, or the government/community organisations together establishing, some industry-wide coordination and support mechanisms e.g. around training or around recruitment initiatives.
- The ACT government providing funds, against agreed targets, to community organisations for specific needs, e.g. Recognition of Prior Learning (RPL), management training etc.

A difficult issue is whether specific measures ‘signed off’ by the combined disability sector are voluntary or to be mandated. Questions would include:

- Can NGOs simply ‘opt in’ if the individual NGO desires?
- Can an NGO ‘opt out’ if it can demonstrate it can achieve the aim autonomously?
- Can the change be developed, endorsed, implemented and monitored through existing government/industry committee processes?
- Should the initiative be implemented or mandated through government/NGO contracts?

Relevant factors will vary from issue to issue. If the sector wishes to move beyond endorsement of broad principles and actually implement practical measures then processes that achieve engagement across the sector will be essential. This issue must be acknowledged by those who consider implementation of the recommendations in this report.

A general suggestion is for community organisations to drive any change agenda. That is, rather than simply reacting to ACT government suggestions, community organisations might develop and 'sell' to government preferred changes and the ways in which these would be implemented to meet the needs of people with a disability, the ACT government and community organisations.

2. Resourcing the Workforce Plan

Recommendations

- Seek other sources of funds and resources beyond those provided by the ACT government to facilitate implementation of the workforce plan.
- Explore potential of community organisations to contribute 'in kind' through sharing of expertise, resources and experience.
- The ACT government could seek support from the Commonwealth Department of Families, Communities and Indigenous Affairs for urgent funding for upskilling existing staff across the disability sector in areas of identified need e.g. computer literacy and specialist areas such as health promotion.
- Work cooperatively with other jurisdictions to build workforce development capacity. The ACT government could propose resource sharing with the other states and territories to optimise returns on investment. In particular, negotiations could commence on ACT's ability to:
 - Access/share useful tools and existing products, such as the Disability Managers Toolkit (QLD).
 - Propose shared investment in development of tools and resources such as marketing materials through existing national forums - for example, the National Disability Administrators.
 - Encourage the Vocational Education and Training (VET) sector through the Community Services and Health Industry Skills Council, the Commonwealth Department of Education and Training and the State Departments of Education and Training to consider sharing e-learning materials and future joint investment in the development of resources and tools.
 - Examine the feasibility of developing/participating in a national direct care network in cooperation with other states.

Discussion

Many of the recommendations in this report would be more feasible and realistic if the ACT disability sector shared resources and worked with other jurisdictions to share the development of resources and training programs, such as online materials. This has been achieved in sectors such as health, and has proven beneficial for all jurisdictions.

Other states may allow access to materials already developed for a small fee based on usage or seek access to materials that the ACT develops in the future.

It would be valuable to develop a national capacity for online learning and other resources for staff as part of developing workforce capacity for the sector nationally. The VET sector already has access to national resources and teaching materials. The orientation of this material would be for all disability staff, whether enrolled in a formal course or not. Some jurisdictions have developed limited capacity but there is little sharing of this material across states.

This is one area where national collaboration between the VET sector, the disability sector and other parts of the broader community services sector would generate economies of scale.

The capacity to access material and courses from an online learning resource would benefit staff who are participating in training programs and staff engaged in less structured ongoing learning.

Staff would be able to flexibly access resources as needed and not be reliant on scheduled training courses. This would assist timely and responsive learning and supplement off-site training courses. The younger entrants to the workforce would be able to build on computer literacy gained through school and the older workers might be persuaded to use such means to develop computer literacy.

Supervisors and managers would also be able to utilize such a resource to support their training, coaching and support roles.

Skilling the Workforce

3. *Ensuring a Skilled Disability Workforce*

Recommendations

- Establish professional standards across the sector with industry endorsement of need to implement entry level certification.
- Establish professional standards across the sector:
 - Agree on an entry level certification requirement (Certificate III or IV) for new staff, as in other states.
 - Align remuneration to the attainment of credentials and skill levels.
 - Develop a strategy for the upgrading of existing direct care staff that provides for a transition period of four years.
 - Provide support for RPL for existing employees in both the government and non-government sector.
 - Develop approaches, in consultation with the VET sector, for upgrading the skills of casual staff, for example ensuring the induction phase includes key areas such as 'orientation to disability'.
 - For disability support workers with very limited roles, consider a more limited skill requirement which is work requirements based and includes 'orientation to disability'. However, this must not become an avenue for widespread circumvention of the requirement for entry level certification.
- Develop ACT disability education and training arrangements which recognize the following requirements:
 - Provide training courses that reflect the needs of service providers and individual staff that retain a focus on client needs.
 - Provide for development of both core and specialist skills.
 - Provide access to ongoing training to refresh and refine skills.
 - Provide staff with opportunities to reflect on personal practice to clarify their development needs.
 - Provide employers with opportunities to influence course content as service requirements evolve.
 - Allow flexibility to respond to emerging issues e.g. such as ageing of clients, specific chronic medical conditions.

- Ensure relevance of courses to government and non-government sectors and across the community service sectors.
- Provide training opportunities that are accessible to all disability support workers which are timely and relevant:
 - Provide training in ways that enhance access for staff, including those staff working out of normal work hours on rotating rosters - for example, through Internet-based provision.
 - Provide resources for staff to undertake training on issues as needs are perceived, for example, on emerging health issues.
- Develop the organisational capacity and processes to ensure VET sector training maintains currency and responsiveness to the emerging needs of disability services:
 - Re-examine what constitutes successful training in the disability sector, both in terms of competencies and delivery. Negotiate with VET sector agencies to ensure training meets those needs, ensuring that a client focus guides the teaching processes.
- Develop new approaches to training needs analysis, course development and RPL:
 - In association with the Community Services and Health Industry Skills Council, review Disability Certificate IV to improve its relevance and responsiveness to industry needs.
 - Establish a system of mentoring which utilizes existing staff experience and expertise.

Discussion

Research and discussion strongly confirmed the need for more base level and ongoing staff training [2, 5, 6, 8 - 10]. There is appreciation that effective training is vital to achieve a number of purposes, including:

- Improvement of knowledge, skills and the clarification of essential values.
- Reducing isolation and providing a sense of shared purpose. [3, 11]
- Ability to respond and adapt practices to emerging needs.
- Providing reinvigoration and recommitment. [7]
- Promoting collegiality and professional support.
- Appropriate training has a direct impact on improving retention. [2, 3, 5, 7]

There is considerable debate among providers on whether entry qualifications are viable, considering the difficulty attracting people to the sector. Factors inhibiting the introduction of a policy mandating formal qualifications include:

- There are members of the disability workforce who have literacy difficulties and may not be willing to commit to gaining qualifications.
- Many people without qualifications are providing high quality service because of their inherent ability, personal aptitude and experience in the sector.
- Some groups, for example university students, are working in the sector to support their entry to other careers and may not be willing to invest in qualifications in disability work.
- A high proportion of the labour force is employed casually, particularly for overnight shifts, which may reduce incentives for personal and organisational investment in obtaining credentials. Casual workers may not agree to undertake formal qualifications and may leave, or not enter the sector at all, if qualifications are mandated.

- Attainment of qualifications does not necessarily lead to improved remuneration.
- Community organisations often do not have the capacity to consistently provide on-going training, and the whole sector's capacity is limited because of the cost of 'backfilling'.
- Some in the industry argue that the Registered Training Organisation (RTOs) have not provided responsive and accessible courses.
- The current construction of the Certificate III includes workplace supervision, this can be problematic as some workplaces are dispersed, with limited or no supervision.
- The funding policy for the Australian Apprentice programs does not allow employers to receive funding support for casual staff.

On the other hand, work in disability requires skill if services are to be effective and of high quality. Critically, compulsory training and credentialing acknowledges the complexity, demands and the responsibility of disability work.

- Not having formal qualifications and educational standards reinforces a common but incorrect assessment that disability work means only basic care or 'unskilled minding'. This view undermines the attractiveness of the industry.
- Conversely, compulsory training would enhance perceptions of the sector as a career option.
- Investment in training improves capacity across the broader community services sector and participants who leave may return to disability work, or workers in other community areas may elect to shift into the disability field.
- The disability support role has expanded over recent decades, away from an emphasis on institutionally-based provision, to the provision of active involvement, providing community based services and social inclusion support.
- Disability work is multi-skilled work. Disability support workers have responsibility for decisions affecting people's health and safety and overall quality of life. The work is generally very demanding and, if done well, requires purposeful and sensitive action, considerable skill and a strong commitment to underlying values.
- Problems relating to lack of skill are being identified regularly by staff, clients, advocacy groups and employers.
- A proportion of the workforce has had only rudimentary training. Many have not necessarily learned basic employability skills, let alone attained Certificate III or IV. The basic entry requirements are only a current driver's license, a first aid certificate, general fitness, and a clear police check. On entry to the sector, services provide an induction.
- Lack of basic work skills such as communication ability and basic information technology skills hamper the implementation of quality initiatives and efficient administration.

The majority of respondents agree that an entry standard is desirable. The Certificate III is preferred by most providers in the non-government sector because the Certificate IV is not seen as sufficiently reflective of needs to warrant the additional investment. Therefore, it is recommended that the Certificate III be reviewed, improved and then introduced as the entry standard.

A compromise would be to establish a requirement that staff have a Certificate III within one year of entry to the workforce. The induction period could be used for training in core competencies such as 'Orientation to Disability' with subsequent training done gradually.

Logistical and practical barriers to the provision of training

Across the sector, there is a much lower investment than is needed in training and professional development.

Many respondents, both from the government and particularly from small non-government sector providers, suggested that skill prerequisites at entry may be unworkable, acting as a barrier to entry and making some services unviable. If introduced, such a policy would need to be phased in over four years.

Disincentives to invest in training are especially high for organisations with high levels of casual staff and high staff turnover. These include:

- *“High cost of training.*
- *Inability to recoup the investment because of high turnover.*
- *Short-term contracts don't allow the time or justify the expense.*
- *Competition for skilled and unskilled staff.*
- *Pressure to keep costs down.*
- *Lack of access to information and advice about training options and providers.”⁵*

Other practical difficulties with access to and provision of training raised included:

- Staff report frustration accessing training because of staff shortages. Staff also commented on the difficulties accessing available training because scheduling may not take account of the realities of disability work, with its rosters and shift work. The government sector providers of training report that although need is widespread, actual attendance at training is often limited with places sometimes unfilled.
- Learning on the job, a key strategy for many industries, cannot be relied upon without effective supervision and mentorship. The community setting means that disability support workers are geographically dispersed, sometimes without an onsite supervisor and often working alone. Supervisors may not have the opportunity to see and support all their staff, because of shift work; they may also be providing direct care themselves. Coordinators may work across sites, and have several sets of staff who they do not see frequently enough to provide training support.
- This dispersal of staff and shift work means that traditional based training methods are difficult to apply.
- The cost of training is high, both in provision and in attendance particularly if 'backfill' is required because of absence from work.
- Absence of staff care can be inconvenient or disruptive for clients.
- The provision of online learning materials has not been widely adopted as an option. There may be limited access to computers and poor information technology literacy, especially amongst older workers.
- Some workers do not perceive the need for training.

⁵ ACT Chief Minister's Department, *Towards a Sustainable Community Services Sector in the ACT: Report of the Community Sector Taskforce*. 2006: Canberra.

- Employers are unable to access the Australian Apprenticeship incentive funding for casual employees, even if they are long term casual staff.
- Utilization of incentives under the Commonwealth government's Australian Apprenticeship programs has been low but there are signs of a change.

Experienced staff - a need for credentials?

Some respondents questioned the need for experienced staff to gain credentials, arguing that those who have learned on the job already have the requisite skills, aptitude and values – something not guaranteed by attainment of qualifications. On the other hand, Booth et al report that personal care workers in aged care settings reported Certificate III training explained the theoretical underpinnings of their work and thereby enabled them to apply skills more sensitively.

*“Most reported an increase in both confidence and communication skills, allowing them to interact more effectively with the residents their families and other team members”.*⁶

Experienced disability support workers have the potential to have their skills recognized through the existing RPL processes. This has been underutilized nationally, due to the ‘onerous nature of the process, the expense to organisations, the reluctance of workers to choose this over training and the reported reluctance of RTOs to offer this as a realistic option’.⁷

Services report that while RTOs have the ability to tailor RPL to the needs of services they have not been sufficiently responsive. Where it has been successful.

*“...trainers had mapped the recognition approach to the job rather than the units of competence and had developed practical, achievable strategies to help individual workers provide the required evidence. These included working a shift alongside the worker wanting recognition, gathering third party reports from supervisors and structured interviews with the worker”.*⁸

RPL is very useful for staff with another credential, such as enrolled nurses, or community support workers, who may need some additional units to gain disability perspectives. It may also be useful where staff would find difficulty completing the whole training program.

Certification for other community sector work (mental health, aged care, drug and alcohol etc) provides preparation comparable to that for work in the disability sector and workers with such qualifications have adapted quickly. Many casual direct care staff already work successfully across disability, aged care and other similar sectors.

Providing incentives for training

Across the sector there is little financial incentive for staff to gain credentials as skills are not linked to remuneration. Some non-government providers have established entry prerequisites and differentiating salary levels according to skill levels. These strategies are proving successful. It is recommended that this policy be investigated further.

⁶ Booth, R., et al., *Workplace training practices in the residential aged care sector*. 2005, Department of Education, Science and Training.

⁷ Booth, R., et al., *Workplace training practices in the residential aged care sector*. 2005, Department of Education, Science and Training.

⁸ Booth, R., et al., *Workplace training practices in the residential aged care sector*. 2005, Department of Education, Science and Training.

Quality of training provided

Many respondents commented negatively on the value of the available competency based training, suggesting it is insufficiently responsive to needs, pays insufficient attention to values, and does not actually improve service or retention. This is a long standing issue across all levels of qualifications and all industries, and is not a reason to remove a requirement for a training standard. The training should be considered an opportunity to develop conceptual frameworks as a launching pad for a career in the sector. The key argument is that attainment of expertise through on the job experience and skill development is facilitated if basic qualifications provide a better conceptual understanding of the role.

There is little debate that for inexperienced disability support workers the Certificate III is a valuable qualification, and the Certificate IV is useful as an alternative and more sophisticated starting point. However concerns were expressed that the quality of course delivery varies across providers. Disability service providers expressed frustration at the lack of responsiveness by RTOs in producing relevant and responsive training programs. They highlighted variable quality, poor levels of contact with students and lack of timeliness of responses.

VET training policy supports RTO responsiveness to industry. Purchasers of this training have a right to ensure that needs are met. It is questionable whether the flexibility established in the VET system is being optimally utilized within the disability sector by both employers and the RTOs.

Purchasers have a responsibility to clarify and communicate their needs. Disability ACT, or selected representatives of the Strategy 4 Reference Group, could consider marshalling views and conveying them as appropriate to the providers, the state and national policymakers or the Community Services and Health Industry Skills Council to improve course relevance and service responsiveness.

(N.B. The focus in this report is on disability support workers, care coordinators and managers reflecting the issues raised in consultations. The educational needs of other employees are likely to be addressed either through professional training or normal administrative training. Their needs should be taken into account through regular needs analysis).

4. Fostering Ongoing Training

Recommendations

- The ACT disability sector endorse the concept that all staff undertake ongoing training.
- Ensure realistic allocation and resourcing of training time to ensure staff are able to attend programs, including:
 - Essential programs on updating of skills.
 - Development programs, such as issue based programs and programs teaching general employability skills such as communication, time management and problem solving skills.
- Provide incentives for continuing skill development including:
 - Scholarships.
 - Eligibility (or preference) for higher duties.
 - Recognition of skills through regular staff award programs.
 - Acceleration of pay increments.

- Additional training.
- Peer support duties.
- Access to training, resources e.g. books.
- Establish strategies for recognizing good practice. These might include:
 - Simple awards.
 - Highlighting achievements in newsletters.
 - Using staff for training or mentoring.
- Build skills in information technology of the direct care workforce, especially disability support workers, supervisors/managers, administrators, and therapists.

Discussion

There is consensus on the need for ongoing training to ensure that services are responsive to emerging needs [2, 9, 12] and to enhance the capacities of staff in the sector.

Respondents were unanimous that generic certification programs should be considered as a basic platform which must be supplemented and reinforced by ongoing training. As well as delivery of compulsory units, providers and each staff member should commit to a basic annual training requirement. In both the government and non-government sector, this professional development commitment could be recorded in individual performance agreements.

Ongoing training would need to be underpinned by regular and skilled needs assessment across the sector to ensure priorities are targeted. It is critical that ongoing education and training target areas of need. A number of strategies could be utilized, such as email and mail surveys, telephone surveys, focus groups and facilitated problem solving.

It is critically important to consider the attributes required of future staff. As people with a disability age, their needs change. As one example, across the sector there may be a need for more disability support staff to have training and experience in caring for people with age-related chronic diseases such as arthritis, diabetes, chronic respiratory problems and cardiac conditions. Support staff will need to be adequately trained to contribute within the 'team based' model under which such conditions are frequently managed. For example, disability support workers might need to assist with the home monitoring of blood sugar levels in clients with diabetes, assist in managing often quite complicated medication regimens, and be able to recognize exacerbations before a crisis occurs.

In the longer term, ways in which training can support career mobility across the sector should be investigated. The needs analysis could incorporate this perspective. Broader service investment would provide a more solid resource base.

5. Enhancing Management Training Recommendations

- Provision of supervision and management training for staff at the Supervisor/Disability Support Officer (DSO)2/3 or equivalent levels be developed as a high priority.
- The training be based on actual needs and expectations of the disability supervisors and managers and provided by certified providers.

- The training should not be limited to the current competencies of Certificate IV or the Diploma but, once designed, should be mapped to appropriate Certificate IV or Diploma level qualifications.
- A core body of essential skills, knowledge and values be identified, with increasing sophistication to suit higher level needs as required. Training should be problem based and as a priority include:
 - An understanding of management roles across the broader industry (as well as in the particular service)
 - Mentoring and training skills
 - Delegation
 - Supervision – especially for shift work, a dispersed workforce and casual workers
 - Communication Skills, e.g. conflict resolution, negotiation, giving feedback etc
 - Participative decision making practices
 - Strategies for support and motivation of staff
 - Compliance and quality improvement practices
 - Computer literacy
 - Change management
- Open advertising of all management and supervisory positions to maximise the field.

Discussion

A majority of those interviewed identified an ongoing need for the improvement of management expertise at all levels.

Management across the sector is particularly challenging as it features a broad spectrum of administrative responsibility as well as considerable ‘hands on’ client service work, combined with tight resource constraints. Supervisory responsibilities are more difficult to fulfill because staff are working in dispersed locations and in shifts. A productive supervisor-staff relationship is key to staff satisfaction and retention in the sector. There is a need for creative approaches to meet particular challenges within the sector, emerging needs and to work effectively within resource constraints. Many respondents noted that there was potential for better outcomes for clients if there were more management support and more skilled support. Staff at DSO1 level report they would like more access to supervisors especially in the early months of work. They would appreciate more positive support and their supervisors or managers to assist them with difficult problems.

Many respondents noted that those advancing to supervisory/management positions do not have adequate preparation for the job, and they lack the skills to undertake the work. Many also believe that the recruitment processes are not open, and selection is not on merit. It is suggested that all appointments be advertised openly.

There has been very limited access to management training which is relevant and useful and the need for management training is now seen as urgent. Clear definition of core skills at all levels of management responsibility is required to underpin the design and development of courses and other management development approaches. Staff would benefit from a suite of approaches including formal courses, on-line support, mentoring, staff placements and personal development.

Particular issues to be tackled at the DSO2/supervisor level include: deep understanding of their role in the broader industry; mentoring and training skills, participative management, conflict resolution, strategies for delegation, supervision and working productively with geographically dispersed staff; coaching and support, computer literacy, change management. More depth on relevant management and organisational development theory should be incorporated in higher level management training.

There are examples of excellent management practice, with many strategies to motivate and support staff. For example, one manager discussed how staff are encouraged to look for small improvements with clients in areas such as mobility, reduction in levels of agitation, and willingness to be involved in activities. Such practices highlight the connection between quality care and client outcomes, and foster a sense of achievement.

The non-government sector reported that some management training occurs but that they can struggle to find the resources to meet needs. They would appreciate being involved in broader programs available across the sector and expressed a willingness to contribute to such programs.

The sector could consider a number of strategies to prepare people for supervisory and management positions. The focus should be beyond competency to capability, where staff develop the capacity to apply skills effectively in a range of situations. One example is to create a pool of people who through competitive processes have access to specially designed training and development, and placements. Such opportunities for development could be created by mechanisms such as scholarships.

A productive supervisor-staff relationship is fundamental to staff satisfaction and consequently retention in the sector. There is a need for creative approaches to meet particular challenges within the sector, and to work effectively within resource constraints. One example of effective work is the management practices used for the *life skills programs* in Disability ACT's 'Individual and Family Support Program'.

A hierarchy of skills needs to be covered and a suite of approaches should be offered, including formal courses, online support, and personal development.

Particular issues to be tackled include:

- Strategies for supervising and working productively with staff who are dispersed; and
- Coaching and support within the disability context.

Supervisors and managers would benefit from learning participative management approaches and strategies and provided to participate in programs that enhance communication skills.

6. Fostering Mentoring

Recommendation

- Examine potential for enhanced, more formalized mentoring of staff.
- Develop a system of mentoring that utilizes existing staff experience and expertise to provide additional support for staff, especially during key

transition periods, such as in the first six months of work and when new roles such as supervision or management work are taken up.

Discussion

A key and relatively inexpensive means of providing support for staff is through the use of mentors. Staff who have used mentors informally through the sector express gratitude for the support received.

The professional and popular literature is fairly consistent on definitions of mentoring. Mentoring describes a deliberate, conscious, voluntary relationship with some or all of the following features:

- May or may not have a specific time limit;
- Sanctioned or supported by the organisation (by time, acknowledgement of supervisors or administrators, or is in alignment with the mission or vision of the organisation);
- Occurs between an experienced, employed, or retired person (the mentor) and one or more other persons (the partners);
- Typically takes place between members of an organisation, corporation, or association, or between members of such entities and individuals external to or temporarily associated with such entities who are generally not in a direct, hierarchical or supervisory chain-of-command;
- Where the outcome of the relationship is expected to benefit all parties in the relationship (albeit at different times) for personal growth, career development, lifestyle enhancement, goal achievement, and other areas mutually designated by the mentor and partner;
- Where such activities take place on a one-to-one, small group, or by electronic or telecommunication means; and
- Typically focus on interpersonal support, guidance, mutual exchange, sharing of wisdom, coaching, and role modeling.

Being involved in mentoring can be personally and professionally rewarding for staff, both at the partner level and also for those who have developed higher qualifications and perspectives. Not only is it a form of recognition by the program of staff experience and skill, it has intrinsic rewards for mentors.

Both mentors and partners must know the parameters of the role, however, so that support role is maintained. Possible strategies for introducing mentorship include:

- Calling for volunteers who believe they can contribute as mentors and placing contact details on panels for access by those seeking help. Possible mentors can volunteer for general support or in areas of specific expertise.
- Establishing agreement on the role and its parameters. Ideally some support is provided outside the established supervisory structure and is expert based.
- Provision of training for mentors so that the opportunities and limitations of the role are well understood.
- Advertising and providing access to the mentor list through internal administrative systems.
- Notifying new staff that they are able to access these people for advice, but are not limited to them.
- Selecting a few options such as voluntary contribution, provision of some paid time, establishment of a 'professional supervision' model such as that used for psychologists, and evaluating the effectiveness of each approach.

Valuing the workforce

7. Improving Workplace Supply

Recommendations

- Review recruitment strategies across the disability sector with the aims of improving market penetration, making the sector more visible and reducing advertising expenses through better coordination.
- Develop marketing tools appropriate to each potential worker group, e.g. young people, university students, semi- retirees, part-time workers etc.
- Develop a web site for promotion of disability as a career, with interesting information about the sector, personal testimonies from staff, clients and families.
- Organisations could advertise on the site and potential staff could use the site to register interest and gain information.
- Recruitment material should target people more likely to be suitable for disability work - stressing, for example, the values required in the sector.
- Conduct regular ongoing recruitment, with 3-4 major drives per year, to ensure continuity of supply.
- Utilise emerging initiatives in the VET sector to improve portability and labour market supply:
- Adopt evolving thinking on VET sector training arrangements to increase interest in VET level training, e.g. Australian Apprenticeships, to support attractiveness and retention in sector.
- Explore opportunities for cooperative recruitment processes across the government and non-government sector to reduce expensive proliferation of assessment, interviewing and induction processes.
- Develop a suite of approaches that will better position the disability sector to compete in the labour market.

Discussion

Both government and non-government sectors have ongoing difficulties staffing all shifts. Ensuring that good quality staff are available to staff services for both routine and emergency situations is a major ongoing challenge which not only has safety and quality implications but is resource intensive. Key stakeholder information and literature review suggest:

- The labour pool is limited. Staff shortages are experienced by both the government and non-government providers.⁹ This has been a long-standing problem in the sector. The potential labour pool is changing. The situation is exacerbated in the ACT because of the wide availability of public sector work which is less demanding and often better remunerated.
- Other human service industries such as aged care, mental health and drug and alcohol services also experience these conditions.¹⁰ Disability must compete for scarce labour resources.
- Demand for staff is ongoing and somewhat unpredictable. Not only is there a shortfall of staff due to recruitment difficulties, there are unpredictable vacancies due to illness, stress leave and work injuries and predictable vacancies due to recreation and long service leave. Some temporary vacancies are created due to temporary transfers to other positions.

⁹ Hall, P.S. and N.D. Hall, Hiring and retaining direct care staff. After 50 years of research, what do we know. *Mental Retardation*, 2002. 3(June): p. 204-211.

¹⁰ Community Services and Health Industry Skills Council, *CHC02 review: a discussion paper*. 2006, Community Services and Health Industry Skills Council: Sydney.

- Special challenges confront the sector as direct care staff must be carefully matched with clients. Examples provided by respondents included matching age and interests of staff with clients and high medical care needs which require staff to have basic health care skills.
- Causes of this difficult labour supply situation are multi-factorial:
 - It is difficult to attract people to direct care work. Some specific community groups have traditionally contributed to the disability labour pool. Typical groups include students seeking part time work for a limited time period and women re-entering the workforce after an absence for child-rearing. These groups often seek part-time work or flexibility of shifts.
 - The traditional labour pools are reducing and the disability field is not seen as an industry of choice. There is competition from other industries for the workforce and the workforce generally is ageing and reducing hours or retiring.
 - Supply is disrupted by high staff turnover.

It is highly likely that with an ageing labour market and strong competition for skilled labour, pressure to maintain staff will grow.¹¹

Both government and non government agencies face high ongoing costs for staff recruitment and induction training. There is also reliance on commercial agencies to recruit staff. All the service organisations are competing for a small relatively unskilled labour pool.

Cooperation and coordination could reduce the costs of recruiting and training staff for the government and non-government sectors thus freeing more funds for supervision and training.

Current recruitment practice

The government currently recruits through advertisements placed two or three times a year.

There are barriers to entry inherent in the current government recruitment process. While the merit principle must be observed in recruitment practices, many staff suggested constrains by public service custom and practice with recruitment protocols traditionally used for mainstream administrative roles. The main role of most disability employees is front line service delivery work and there is considerable room for the use of more focused and streamlined recruitment processes including more proactive and regular recruitment drives.

Recruitment practices in the community sector are diverse with no common pattern. There is evidence that ongoing recruitment is necessary. However, fewer regulatory requirements allow for more flexibility in recruitment and for staff policies and management practices more responsive to client and staff needs. Flexibility is valued by disability support workers and this may be one factor which balances the lower pay rates in the community sector.

¹¹ ACT Health & Disability ACT, *The Disability Workforce*. 2004, ACT Health, Disability ACT: Canberra.

What is clear is that advertising is ongoing and expensive and current practice across the sector is duplicative and often driven by short term considerations. There is scope through cooperation to streamline and professionalise recruitment practices within and across the sector.

The KPMG report (see Appendix A) notes that an essential challenge for the disability sector is to position itself as an industry of choice. The KPMG discussion of the sector centers more on problems facing workers than the many intrinsic rewards experienced by disability support workers. There are untapped sources of labour among people who enjoy community service work and who could be attracted to the field.

Marketing of the sector needs to be well researched and carefully targeted. It is important to identify the needs and interests of segments of the potential labour market and then to create focused marketing strategies. This will require a comprehensive understanding of current community workforce demographics. Potential sources of staff include secondary school students and university students, those seeking a career change in middle years, and early retirees.

Targeting of possible workforces and access to career information sources is essential, such as employment placement specialists and career guidance counselors in schools.

There is considerable scope to utilize a number of sources of information and marketing approaches. These include:

- The use of technology to improve recruitment efficiency - for example, a website with interesting information about the sector, personal testimonies from staff, clients and families. Potential staff could register interest and gain information on the sector.
- Innovative staffing initiatives, for example, rewarding staff or services who recommend new employees and who encourage suitable applications. This approach has been successfully used in many innovations programs.¹²
- The development of resources to attract attention and provide information e.g. stories, personal testimonies and examples to outline and explain the range of opportunities. Websites, DVDs and written resources such as pamphlets all have their place. Websites are increasingly being utilized for recruitment. School leavers in particular understand and are comfortable with Internet technology.

Materials should be tested with target audiences, for example with students and school career counselors, employment agencies and older people planning retirement who may be considering part time work.

Material could be developed locally. As well, national development of some of the more expensive resources would provide better, more professional products and the benefits of economies of scale.

¹² Hewitt, A. and K.C. Lakin, *Issues in the direct support workforce and their connections to the growth, sustainability and the quality of community supports. A technical assistance paper of the national project: self determination for people with developmental disabilities.* 2001, Research and Training Centre on Community Living, University of Minnesota.

The industry could seek to have positive messages about disability work written into plots of television programs and seek to place 'advertorials' in magazines such as *Women's Weekly* or those aimed at secondary school students.

The following are a range of issues which the sector could consider to facilitate entry into the disability sector and so increase the supply of entrants:

- The simplification of recruitment processes. There is evidence, in the government sector at least, that current recruitment processes, oriented to more traditional public service work are not suited for a service delivery role and may be a barrier to competent people gaining employment or promotion. There is capacity under the legislation for more flexibility and discretion.
- Government sector staff suggested that more regular recruitment programs would ensure timely supply. The government should consider a range of a proactive strategies instead of delaying recruitment until need builds and workplace stress grows because of the inability to fill shifts.
- There is potential for joint initiatives on recruitment across the sector, particularly in conveying knowledge about disability work. Recruitment research indicates that one key predictor of staff retention is applicant appreciation of the nature of the work. Professionally developed recruitment resources can assist applicants in developing accurate perceptions about the nature of the work when considering whether or not to apply.
- Joint approaches could also be taken to the marketing and administration processes. For example, the development of a selection 'toolkit' which can be updated regularly to provide a comprehensive resource:
 - For those applying for positions; and,
 - For those administering recruitment programs.
- The sector should seek diverse pools of applicants to support diversity in client services, including services for indigenous people, ethnic groups and various age groups.
- The sector should aim for very quick turnaround in the recruitment process and to provide feedback and development support to unsuccessful applicants.

8. Securing Future Labour Supply Recommendations

- Work with the other community services and the health sector to provide staff with broader career paths and opportunities within the human service sector.
- Work towards achieving portability with other community services qualifications, with specific training that builds on generic skills and by ensuring training is not duplicated, that experience is taken into account, and that further training is affordable and accessible.
- Improve access to Community Service Certificate 2 for Years 11 and 12 students.
- Utilise new national career development strategies being developed through Commonwealth Department of Education, Science and Training to raise interest in community sector work through schools. While this work is developmental at this stage, the ACT disability sector needs to remain aware of developments.

Discussion

There is evidence that formal competency development in any of the community sector areas benefits the disability sector and vice versa. The current review of the

Community Services Training package is considering articulation across community service qualifications. This review provides an opportunity for the sector to express its needs.

The disability sector needs to encourage new sources of labour supply and particularly to make younger groups aware of opportunities in the sector. There is an underutilized opportunity for secondary school students to train for community sector work while still at school under the Australian Apprenticeships program. This approach recognises that school students may feel inspired to do community work but are possibly not attracted to specific fields. The ACT disability sector must recognise that the labour market is very fluid, with workers frequently working concurrently across more than one sector. The disability sector would be best served in both the short and longer term by having portability of qualifications. Additional industry specialization can be undertaken as part of further training on or off the job.

9. Improving Workforce Retention

Recommendations

- Develop a series of initiatives to enhance workforce retention including in the areas of remuneration, RPL and peer support.
- Establish a tailored RPL initiative for existing workers, to be accessed by both government and community sectors. This process could also identify the skill needs required to meet current work demands.
- Seek support from Commonwealth Department of Families and Community Services, Indigenous Affairs for urgent funding to upskill existing staff across the disability sector in areas of identified need, e.g. computer literacy and in specialist areas such as health promotion.
- Introduce measures to improve availability of mentoring and support for new entrants to the workforce for the first six months of work. (See Mentoring: Recommendation 10)
- Enhance peer support processes to reduce isolation. (See disability workers professional network: Recommendation 11)

Discussion

The high level of staff turnover, especially of direct care workers, is a significant issue across the whole sector. Disability support workers spend less time on average in their position than the workers in other disability service professions, for example, administrators, managers and therapy staff. The Victorian government estimates that the turnover cost of an intellectual services officer is 61.7% of annual salary, given the costs of advertising, recruiting, training, mentoring etc. This constitutes a considerable modifiable expense. Many reasons for high staff turnover were identified:

- Low levels of remuneration compared with other sectors given the demanding nature of the work. Many respondents cited examples of the challenges of high and complex disability work and compared the remuneration in the disability sector with that of a shop assistant.
- Research confirms that the low pay of direct-care human service workers is correlated with turnover.
- The demanding nature of the work was cited by a number of care workers, NGOs and government staff as contributing to stress and burnout, especially where the level of disability was high. With less stressful work available in

other sectors for comparable levels of pay, many workers were open to other opportunities. While challenges posed by client behavioural problems were cited as contributing to turnover and loss of productivity due to stress, there are no readily available data to identify a particular relationship.

- A feeling of isolation by staff working alone in accommodation houses was reported. Low morale was exacerbated when there was little collegial support and feedback.
- Some staff reported feeling disempowered and disconnected from management. Some believed that management had little appreciation of the demands of providing direct care service. One of the criteria by which this is judged is the lack of visibility of management in the accommodation houses. Conversely, some staff indicated that they liked to be left alone to get the job done.
- Some staff saw no career path, either vertically as their skills and knowledge increase, or horizontally into opportunities for more diverse experience and career enrichment.
- Other cited reasons were:
 - The quality of care is being jeopardized because of high turnover of staff for individual clients, especially through the reliance on casual workers who have to undertake shifts with a minimal handover.
 - Burnout because of the physical and emotional demands of the work (combined with a sense of isolation and not being valued).
 - Burnout due to having to perform double shifts when relief staff are not available.

New horizons in quality care/becoming a model of excellent care

10. Defining roles of Casual Staff

Recommendation

- Clearly define and agree on the on-going role of casual staff in the context of this overall workforce plan which seeks to ensure the sector has “a stable, well-trained workforce.”
- Conduct research to determine the reasons for the high level of casual employment and ascertain the implications for the workforce and for clients.

Discussion

Consideration of this issue must distinguish between the engagement of casual staff on a long term basis and the ongoing regular need to engage short term casual staff.

Just over half of the ACT disability workforce is employed permanently. In 2004, 40% of employees had casual employment status, with another 8% employed under temporary or contractual arrangements.¹³ Casual staff may have lower commitment to their employer if they do not see career opportunities and they may feel less valued. They demonstrate more mobility, frequently being employed in more than one position to boost earnings. Furthermore, ‘not enough hours’ was ranked as a primary reason for people leaving the sector.

There are many views on the relative attractiveness of permanent work compared to casual work. There is anecdotal evidence that the sector requires both a permanent and casual workforce.

¹³ ACT Health & Disability ACT, *The Disability Workforce*. 2004, ACT Health, Disability ACT: Canberra.

Without research on the nature and aspirations of each type of workforce, it is not known whether or not the lack of permanency is a barrier to entry into the industry and a reason for retention problems.

Casual employment for shorter terms has implications for occupational health and safety, the ability of services to manage staff effectively and for services to provide staff with appropriate skills to develop an ongoing relationship with clients. Casual employment may reduce the potential and incentive to ensure staff are continually skilled to meet emerging needs. On the other hand, both the government and community providers have employed casual staff for many years.

There is some debate on whether permanent or casual working conditions are preferred by staff and whether this has an impact on the labour supply. Examples and arguments in favour of both were proffered. There are no readily available empirical data on which to make definitive policy recommendations.

The disability workforce has long had a significant transitory component. It is important to prepare for this and manage this aspect knowing that many employees, such as university students, intend this work to be only a stage in their employment career.¹⁴

11. Establishing a Professional Network Recommendation

- That the sector examines ways of enhancing peer support and self esteem among staff, particularly among disability support workers.
- Examine the feasibility of building on the existing disability support workers' meetings to form a disability support workers' professional network.

Discussion

The United States has developed a valuable national professional network which has evolved into a resource for all disability direct care staff. It is a means of generating an identity, sharing experiences, and a source of professional development. This development has been centrally funded and might be something that the disability sector aims to achieve nationally. The disability sector in the ACT might build further on the network meeting arrangements.

Establishing a professional network would be a means of 'professionalising' the sector and generating a means for peer support. Such a network could be used actively as a means of:

- Reducing isolation;
- Recognition of the complexity of the work;
- Providing an ongoing source of support;
- Building a sense of cohesion; and
- Establishing a visible professional role for disability support workers in the ACT. This could include annual seminars/conferences with high visibility to support carers, and their management.

¹⁴ Hall, P.S. and N.D. Hall, *Hiring and retaining direct care staff. After 50 years of research, what do we know.* Mental Retardation, 2002. 3(June): p. 204-211.

Similar approaches might be taken for supervisors and managers utilising some of the time already allocated to network and management meetings.

12. Developing Workforce Planning Capacity

Recommendation

- Sector endorse the need for structured, longitudinal data on disability staff.
- Build sector wide data on the disability workforce to improve the ability of the sector to plan for the future.
- Utilise data to inform workforce planning across the sector.

Discussion

Through combined government and non-government organisation effort develop planning competencies so that workforce planning information and data needs can be identified. Ideally, organisations would include workforce information routinely in management information systems. Development of such capacity would be enhanced by the coordination of development of IT “systems capital”, such as the sharing of costs of systems development, and shared ownership of intellectual capital underpinning data collection and use. Specific initiatives could include:

- Identification of the data collection systems required and the national or local basis for data collection. The sector must agree on common terms and conditions for data collection, including consistent standards for position classifications, to enable disability to be recognized as a unique sector.
- Assess the real current and potential needs of the ACT population based on ABS projections and identify the future staffing requirements of the workforce to meet the emerging needs of people with a disability, including:
 - The projected need
 - The level of disability
 - Any aspects related to ageing
 - Special groups, e.g. Indigenous.
- Assess the current attrition rates and set a target for reducing them.
- Assess the rates of dispute, stress leave and OH&S problems and compare them to other workforces in the community services sector.
- Put in place strategies to identify causes of problems and strategies to address problems.

Quantitative data on workforce numbers, future demand and related factors (see Appendix A) highlight that achieving a situation in which there are adequate numbers of appropriately trained staff will not be easy. The summary data provided in Appendix A underline the need for the sector to put in place processes that are ‘on-going’ and ‘best practice’ in terms of the recruitment, retention and training of staff. On-going collection of data on staff will provide essential underpinning to any workforce strategy. A formal and regular program of evaluating the effect of workforce measures should be implemented.

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Appendix A - Review of Recent Reports

This consultancy has sought to avoid duplicating or recasting work already undertaken which considers workforce issues in the disability sector. There is a considerable amount of information available, including academic studies, commissioned reports and in the many relevant documents produced within the ACT, by other states and by national organisations. This brief review of some recent reports and data analyses stresses the need for the ACT disability sector to develop a more organised and long-term approach to workforce.

In July 2006 the ACT Chief Ministers Office released ‘Towards a Sustainable Community Services Sector in the ACT: Report of the Community Sector Taskforce’ (ACT Chief Ministers Department July 2006). This report states:

“The sector is experiencing an unprecedented growth rate combined with a high turnover of staff and difficulties in attracting and retaining skilled employees. Conditions of employment and low wages mean the sector is often less attractive for job seekers than the public and private sectors. A recent survey conducted by the Australian Council of Social Service (ACOSS) in April 2005 of the non-profit community services sector indicated that staff turnover in the sector is very high. The ACT figure for staff turnover was 30.7%. This is nearly double the national average for community organisations (16.3%) and about three times higher than the Australian all-industry average.” p6-7

“With approximately 48% of community sector organisations relying on award rates, the wages for a significant proportion of employees in the community sector have, proportionately, fallen behind those of public sector employees. The widening in the gap between the wages available in the public sector and those available in the community sector impacts directly on the ability of the community sector to attract and retain a quality workforce.” p28

“Many former community sector workers can now be found working for higher pay in the public sector.” (p52)

There are a wide range of industrial matters where community sector organisations and the ACT government interact. While many of these issues overlap with the issues discussed in this report, there are also many industrial matters outside the scope of this report. Many of these industrial-type issues are discussed in detail in this from the Chief Minister’s Office. The report states:

“The ACT community sector is facing a number of challenges in regard to industrial relations, workforce development and employment viability. The sector is experiencing an unprecedented growth rate combined with a high turnover of staff and difficulties in attracting and retaining skilled employees. Conditions of employment and low wages mean the sector is often less attractive for job seekers than the public and private

sectors.” p6

“Future viability of the non-government community sector is reliant on the ability of the community sector and government to address a number of issues including:

- *achieving improved wages and conditions that are comparable with other sectors;*
- *implementation of new indexation arrangements;*
- *development of a core pricing framework for future funding programs;*
- *stemming the flow of skilled staff and managers from the sector;*
- *development of professional development opportunities to encourage people to stay in the industry; and*
- *growth funding to the community sector which takes into account ongoing compliance requirements and existing employment obligations.” (p62)*

The ACT Vocational Education and Training Half-Yearly Outlook reports in its Community Services & Health Industry Skills Council Report, May 2005, that:

“Many factors are expected to increase demand for community and health services. These include the ageing of the population, new social policies, rising consumer expectations, and a range of new services made possible by advances in technology.

Improvements required include recognizing the competence of the number of unqualified workers, upskilling unqualified workers, advancing the skills of Certificate III and IV qualified workers and providing practical competencies to professionals through national competency benchmarks.”

The report makes a series of recommendations, implementation of many of which are as important to building a sustainable workforce as the more specific workforce matters considered in this report. The recommendations in the community services sector in the ACT include:

Workforce Development

It is recommended that an analysis of training needs for the community sector workforce be undertaken, in consultation with all stakeholders. This analysis would include:

- a review of existing training programs available to the community sector workforce in the ACT, including the Australian government;
- identification of gaps in the available training;
- identification of barriers to accessing training for employers and employees; and
- options for enhancing and improving the training available to the sector.

This report is quoted here to emphasize that many issues relevant to the disability sector are equally important across the broader community sector. It is assumed that representatives of the ACT disability sector will participate in processes that progress these recommendations.

A recent report prepared for the National Disability Administrators by KPMG “Investigation into Workforce Capacity Issues” (NDA July 2006) provides detailed analyses of ‘The impact of the ageing workforce on the disability sector’ (Chapter 2) and ‘Broader trends and their impact on the disability workforce’ (Chapter 3).

KPMG was engaged to undertake this research project to investigate appropriate attraction, recruitment, retention strategies and employment models for the disability sector that take into account the ageing of the population and the need for a skilled and competitive workforce in respect of services for people with disabilities.

This ACT report recommends specific initiatives that would see actual implementation of many of the more general points made in the recent report prepared by KPMG.

Chapter 2 of the KPMG report concludes ‘The ageing of Australia’s population will have a significant impact on the disability sector.... The disability sector is likely to experience a shortage of available workers sooner than other industries....there is an urgent need to respond to the management of an older workforce through planned workforce strategies...’ (p25)

Chapter 3 concludes “Compounding the pressure of an ageing population and an ageing workforce....disability work has changed significantly and will continue to change, requiring the sector to plan carefully for changes in demography and policy....the population is becoming increasingly better educated, raising the expectations of those entering the workforce.....workers will be required to have more complex skills, increasing the need for organisations to provide education, training and professional development of workers.....the new context for care requires new ways of thinking, new skills for both management and support workers...” (p38-39)

The KPMG report in its introduction states:

“Emerging from the international literature and from other industries is a comprehensive picture of the need for several critical success factors, as listed below:

- *High quality induction programs that provide holistic support to staff and not just limited to skills development. Induction must incorporate arrangements that welcome employees and provide immediate connection to a person in a similar role, that travel beyond the first week of employment to ensure employees have an opportunity to engage in networking activities and encourage employees to pursue knowledge about the field of disability service provision. Induction programs in Australia need improvement and the sector should concentrate efforts on expanding induction to make the critical investment required to retain staff beyond the initial phase of employment.*
- *A shared view across the sector about on-going learning and development that will provide management training, traineeships and apprenticeships to enable employers to engage workers whose training is funded for them, individually focused training to build on skills and*

competencies which staff already possess and RPL to enable workers already in the sector to pursue formal qualifications.

- *An emphasis on workplace conditions that include flexible work arrangements, employee assistance and benefit schemes, support for staff to pursue a healthy work-life balance, family friendly environments and comprehensive occupational health and safety frameworks.*
- *Career pathways should enable staff to move across sub-sectors of the community services sector and a supporting training framework that allows workers to build on skills that become portable across the sector, between organisations and between jurisdictions.*
- *Supportive organisational environments created through good leadership and management, using mentoring systems and team approaches to work design, integrating direct care workers into decision making and case planning for clients, promoting a flexible and committed work environment that ensures staff have a strong sense of worth and value and provide personal and professional development and training opportunities that are accessible to all staff.*
- *Staff reward and recognition strategies that are genuine, consistent, fair and well articulated.*
- *Exit planning strategies that gather information about why employees leave their jobs and that seek to address the issues raised through the process.”*

In 2004 the Disability ACT Workforce Reform Working Group undertook a survey of ACT disability staff

The survey asked all organisations providing services to people with a disability to provide information about their staff. All organisations in the ACT identified as providing targeted services to people with a disability were in scope for the survey. Of the 67 organisations that were requested to participate, 46 responded. The key findings of the survey were that:

- “There were large proportions of non-permanent staff, females and part time workers in the disability workforce. Many of these people worked outside ‘standard’ hours and carried out shifts of varying lengths. The results were particularly influenced by the characteristics and working patterns of disability support workers, who made up 78% of the disability workforce.” (p3)
- “A large proportion of employees did not have permanent employment status. Forty percent were casually employed and another 8% were employed under temporary or contractual arrangements. Just over half of the disability workforce was permanent employees.” (p5)
- ‘The workforce survey showed that almost half (47%) of workers in the disability sector were aged from 25 to less than 45 years. Another 39% were aged from 45 to less than 65 years. These results were fairly consistent with the ACT workforce overall, where in 2001, 49% were aged 25 to 44 years and 32% were 45 to 64 years.’ (p7)
- “The disability workforce survey showed that only 25% of the disability workforce worked during standard ‘business hours’. Forty-seven per cent worked ‘between 6am and 10pm’ and almost one third worked for an organisation providing 24-hour 7 day a week care.” (p7)

- “Twenty-seven per cent of the workforce had more than 5 years of service and another 20% had 3 to 5 years and 23% of employees had been employed for less than one year.” (p6) “Overall, disability support workers had spent less time on average in their position than the workers in other disability professions. One quarter of support workers had worked in their position for less than a year compared to 16 % of other disability workers. Disability support workers were less likely to have spent more than 3 years in their employment.” (p8)

The consultants have reviewed the report of the *Board of Inquiry into Disability Services (The Gallop Report)* which presented its findings in December 2001.

The Gallop report is mentioned here for completeness. The relatively recent discussion of issues undertaken in hearings before Justice Gallop and the subsequent findings detailed in his report were significant events in the history of disability services in the ACT. More specifically, many issues related to the aims of this consultancy were considered in the Gallop report and some of the report's recommendations are directly relevant.

The Gallop report examined a broad range of issues relevant to the governance, funding and administration of disability services in the ACT. The Inquiry made recommendations in respect of the ACT government's roles as a regulator, funder and provider of disability services, examining issues and making recommendations relevant to the whole sector including the many non-government providers of disability services.

It is useful to briefly review findings and recommendations from the Gallop report that relate directly to the workforce issues that fall within the scope of this consultancy report. It will be apparent that work done in the ACT around disability workforce issues since the Gallop report was published and the directions proposed by the ACT disability sector and developed further in this consultancy built on the work of Gallop and are consistent with Gallop's findings and recommendations.

Comments dispersed through the Gallop report's findings included:

- There is an unacceptably high usage and turnover of casual staff. (p22)
- The program has shown inability to attract or retain appropriately qualified staff. (p22)
- Program training is still not adequate in some respects. (p22)
- The behavior management training focuses on protection of staff rather than teaching strategies to properly manage client behaviour. (p22)
- Some middle managers showed lack of support and inadequate supervision of staff under their authority. (p23)
- Strategic direction is needed to help address the ongoing problem of a high level of staff turnover in the disability program. (p24)
- Staff are retained at a better rate in consumer centered service models than in corporate style agencies. (p33)
- Professor Shaddock's opinions that there should be a review of the present low pay and base qualifications of disability staff, with further attention to staff training and career development, should be adopted. (p34)
- Ensuring that adequate forward planning is carried out to determine the future demand for services from people with disabilities. (p40)
- 'Key workers are changed too frequently. This results in lack of familiarity with clients and key workers are accordingly ineffectual in

- these circumstances' (p20)
- 'Handover procedures are inadequate.' (p20).

The Inquiry's Recommendation 18 raised several specific issues that are relevant to issues raised in this report:

'Recommendation 18: The ACT government should develop and implement a strategy to attract and retain care workers to the disability sector. The following may be considered as part of that strategy:

- i. A broad banding of the care worker structure with salary points based on competency factors including the difficulty of the service required, qualifications attained and continuing skills development. This might avoid the need for care workers to apply for promotions, receive salaries potentially higher than supervisors and thereby retain skilled and dedicated people within this sector;
- ii. Jointly with the University of Canberra and the Canberra Institute of Technology, development of degree and certificate courses to train and skill people as care workers. This will integrate professional development with on-the-job training experiences with service providers and allow input into the structure and content by the proposed institute;
- iii. Development of a sector-wide accreditation process for people working in the ageing and disability services sector. This could be similar to the accreditation process for nurses with the Register maintained by the Nurses Registration Board; and
- iv. Guaranteeing annual incremental payments based on accreditation levels maintained and length of continuing service in the sector.'

In summary, there has been a large amount written about the disability workforce and many proposals have been discussed within the sector. The consultants therefore have seen their task more as drawing together much of this work and suggesting ways forward rather than proposing completely new and unfamiliar concepts. The recommendations in the report focus on key initiatives that would assist and promote the attainment of "a stable, well-trained workforce"

