

The retention challenge

An exploration of the experience and intentions of recent entrants in the disability sector

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Collaborating to grow the
social service workforce for the future



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RESEARCH TEAM

Director – Micaela Cronin
Project Manager – Dr Jessica Lee-Ack
Lead Researcher – Dr Carly Millar
Project Advisor – Dr Ciannon Cazaly
Social Work Placement Students –
Ranudi Jayawardana, Shantelle Alvarez
and Hannah Jenkins

WIDI was established to drive innovation in education, training, and applied research to enable the growth and transformation of the social service industry. The Institute provides opportunities for students to develop the knowledge, skills and experience required to work in the social service sector. As part of this, the Institute partners with RMIT Schools to provide learning opportunities for students including accredited training, placements and Work Integrated Learning (WIL) projects. Since 2020, the Institute has been hosting placement students from the social work programs in the School of Global, Urban and Social Studies. The Institute works with the Social Work Program Team to identify research projects that the students will contribute to as part of their placement. The placement is part of the Social Work curriculum, and the Institute provides task supervision. In 2022 placement students Ranudi Jayawardana, Shantelle Alvarez and Hannah Jenkins formed part of the project team for this project and played a key role in the design of the project.

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WIDI acknowledges the people of the Woi wurrung and Boon wurrung language groups of the eastern Kulin Nation on whose unceded lands we conduct our business. WIDI respectfully acknowledges their Ancestors and Elders, past and present. WIDI also acknowledges the Traditional Custodians and their Ancestors of the lands and waters across Australia where we conduct our business.

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Workforce Innovation and Development Institute

RMIT University
Level 2, Building 152
147-155 Pelham Street
Carlton 3053

E widi@rmit.edu.au
W widi.org.au

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Executive Summary

This applied research project explored the experience of a specific cohort of disability support workers (DSWs) – those who had worked in the disability sector for 6–12 months. It focused on the following questions:

- Were recent entrants working in the disability sector prepared for their role?
- Do recent entrants working in the disability sector have access to adequate workplace support?
- What are the main challenges that recent entrants in the disability sector face?
- Are recent entrants satisfied with their job? And do they intend to stay in their job?
- What are the demographic characteristics and job roles of participants?

Using a mixed-methods approach – which included a literature review, a survey and interviews – the Research Team gathered data on the experience of over 50 disability support workers (DSWs) who have been employed by two partner organisations – Yooralla and Able Australia – for a period of 6 to 12 months.

It is estimated that Australia needs another 74,900 Aged and Disabled Carer workers over the next five years.¹ This growth is occurring at a time when there are acute labour shortages across many parts of the economy and alarming trends around the retention of workers in the disability sector.

Within this context of growth amidst shortage, an organisation's ability to not only recruit but to retain its workforce is key to ensuring that it can continue to deliver high quality services and supports. The need to retain capable employees is 'especially important' for non-profit organisations 'because they mainly determine the quality of the social services'.³

Existing data indicates that there are multiple factors that hinder retention, including working conditions (for example, low pay, heavy workloads, casualisation of the workforce, etc.) and unclear career pathways. There is very little existing research on turnover rates of recent entrants in the social service sector.⁴ This project aims to add to research on the disability workforce overall by targeting newly hired disability support workers.

Workers are highly committed

Most of the DSWs who responded to the survey and were interviewed by the Research Team demonstrated a high level of commitment to their work and to helping their clients achieve the best outcomes. Eighty-nine per cent of respondents reported that the work they do is meaningful to them, and they feel like they are making a difference in people's lives. 'I like the clients that I support' was the most highly rated reason listed by survey respondents under enjoyable aspects of the work. As one interviewee explained:

I want to work [as a DSW] for the lower rate because it's the work of my heart and I value working with [the clients]. ... [They] are amazing and wonderful, and they're just doing what they do and being who they are ...



Workers and managers understand the importance of having skilled and qualified staff

There are currently no minimum qualifications to gain work as an entry-level disability support worker. Job add data from 2015–2018 reveals that only 50% of disability organisations require a certificate qualification to work as a DSW.⁵ Given current workforce shortages, in 2022 it is possible that this percentage may be lower. Participants expressed concerns about hiring inexperienced or under-qualified staff as DSWs and several interviewees argued that the Certificate IV should be mandated as the minimum qualification to ensure that only high-quality candidates are employed.

Workers and managers recognise the challenges faced by their employer

DSWs and managers who spoke with the Research Team acknowledged the significant challenges that their employer is facing, including workforce shortages. Several managers and supervisors who were interviewed pointed out that the funding model of disability organisations does not support increased recruitment and training. They felt there was simply no money to employ more staff and that some disability support organisations were under incredible financial pressures and struggling to survive.

However, the retention risk among recent entrants is high

A significant proportion of DSWs (35%) indicated that they only intended to stay with their employer for up to 12 months, including 16% who intend to only stay between 0 to 6 months. Work mode, the quantity of shifts available, and flexible hours are all key factors in the turnover of DSWs. To offset the precarious nature of casual work, some DSWs interviewed held several casual or part-time jobs, which when combined, were equivalent to or greater than one full-time equivalent position. The most reported factors that would influence the decision to leave were around:

Remuneration

'I would like more money'

Career pathways

'I would like a career change'

'I would like career advancement (promotion to a more senior role)'

Training and development

'I would like better skills training and support'

'I am studying/returning to study'

Work/life balance

'I would like greater work/life balance'



And workforce shortages are having a significant impact

Both DSWs and managers highlighted the impact of workforce shortages on the workforce and the clients. DSWs interviewed related that there are never enough staff and that this affected staff ratios and increased the burden of work for the remaining staff. Participants described how lengthy recruitment processes and lack of reliable workforce data often compound this issue. All the service managers interviewed as part of the project had 'stepped onto the floor' to work support shifts and sometimes overnight shifts. They reported that this was a common scenario across residential houses due to staff shortages. This meant that they were often working two jobs and had difficulty completing their own designated work.

THE RESEARCH TEAM FOUND THAT:

Around one in four disability workers leave their job in any given year, which amounts to a 'churn' rate that is roughly three times higher than the overall Australian workforce.²

There are many factors that contribute to the retention of staff. Data gathered through this project suggests that disability service organisations should consider the following to support greater retention of DSWs:

1. The recruitment pipeline is leaky

Participants described delays in recruiting staff, some of which were linked to external factors (e.g., processing of NDIS screening checks) and others that were internal. Managers reported delays in the interviewing and appointment processes that had resulted in loss of appointable applicants.

2. Levels of preparedness vary, and expectations don't always match reality

Although most participants were satisfied with their induction, some DSWs did not feel adequately prepared for their role, including 32% of survey respondents who work in residential care settings. For some DSWs there was a mismatch between their expectations of the role and the reality of providing services and supports to clients.

3. Feelings of isolation are not uncommon

Several participants described feeling isolated at work, with regional interviewees especially (both managers and DSWs) reporting that they felt less supported. Working alone delivering in-home support was also challenging for many DSWs, particularly in terms of isolation, high workload, lack of peer support, and lack of access to training and supervision.

4. Most workers have access to training, however, questions were raised about the focus and mode of training

Most survey respondents and interviewees agreed that their organisation invested a substantial amount of time in the training process and provided an appropriate breadth and quantity of training when they first began their job. A few participants identified that they wanted 'more support and training' and 'more training for team leaders', however. Some participants described the training as too narrowly focused on rules and regulations, and some expressed a preference for face-to-face training, particularly when the training involves activities related to complex care.

5. Opportunities to convert from casual to part-time were welcomed by most DSWs

Work mode, the quantity of shifts available, and flexible hours are all key factors in the turnover of DSWs. Survey respondents sought 'more shifts and to become permanent part-time' and 'more flexible hours' to improve their work life. Several interviewees employed as casuals wanted to be confirmed as permanent part-time employees however some preferred the flexibility that casual work offered, and the ability to combine work with family and caring responsibilities.

6. Perceptions of and relationships between co-workers can have a big impact

Seventy per cent of survey respondents felt that they were supported by their co-workers, however, this varied based on work mode and location. Among regional respondents, 92% felt supported by their co-workers, compared with 64% of metro respondents. Several participants described co-workers who did not have the requisite capabilities, technical skills and mindset to provide high-quality support to clients. Unhelpful, disengaged, inadequately trained co-workers posed a significant challenge for many of the DSWs interviewed as part of this project.

7. Navigating internal systems can be time-consuming and challenging

Several managers interviewed as part of this project expressed frustration at organisational systems and processes. Managers spoke about the challenges involved in navigating internal structures and systems, including clarity around where and from whom to get assistance with routine questions.

8. Pay matters, but valuing and recognising staff doesn't have to come with a big price tag

Pay and conditions are undoubtedly an important consideration for DSWs, with most survey respondents citing the desire to make more money as the most influential factor in any future decision to leave their organisation. However, there is some evidence that dissatisfaction with pay is decreasing more generally in the disability sector.⁶ Some participants talked about the need to recognise staff achievements more, and, importantly, 'not necessarily in monetary terms'. Regular events such as staff barbecues and morning teas, or minor incentives such as a voucher, were suggested by both survey respondents and interviewees as small gestures of appreciation that would constitute 'better recognition'.

9. Supervision is sporadic but opportunities to meet with managers are valued

A significant number of DSWs reported that they did not receive regular supervision, with group supervision meetings often not going ahead and one-on-one meetings taking place 'very rarely', and then only if the need arose. Nearly all interviewees felt that they would like more time with their supervisor, and this was particularly the case for casuals who were least likely to receive one-on-one support from their line manager or supervisor. Several participants touched on the value of effective supervisory relationships and listening to staff.

10. Workers and managers are experiencing stress and burnout

Some survey respondents and interviewees felt that new and inexperienced DSWs were suffering stress and burnout due to inappropriate client-support worker matching. Moreover, several interviewees pointed to the fact that team leaders, in particular, were frequently 'burning out'.

11. Workers don't always feel safe at work

The research found that some participants had experienced or witnessed discrimination, bullying and harassment. There were some DSWs and managers who highlighted examples of unsafe work environments, including DSWs who were no longer employed by the partner organisations. Interviewees detailed the physical dangers of their work and survey respondents wanted 'greater protection for staff from potentially a[g]gressive/abusive residents'.

12. Career pathways aren't clear and visible

The lack of suitable career pathways for both new and experienced disability support workers emerged as an issue of fundamental importance for DSWs and their managers in the survey and interview data. Only 61% of survey respondents reported that they see a path to advance their career, with metro respondents more likely to report that they see a path to advance their career compared to regional respondents (71%, compared with 46%). Only one of the five participants who are no longer employed by the partner organisations reported that they saw a path to advance their career. At the same time, pathways from direct service work to managerial and leadership roles were seen as important. Some participants reflected on the value of having managers who had started as DSWs due to their in-depth knowledge and understanding of the work of their team.

Introduction

Health Care and Social Assistance is Australia's largest and fastest growing industry. This industry – which includes the disability sector – employs 14.9% of workers in Australia.⁷ Employment in this industry has been growing over the 20 years to May 2022 and the employment level is projected to grow by another 301,000 over the five years to November 2026.⁸ Within this, Aged and Disabled Carers are expected to grow by 28%, or 74,900 jobs.⁹

This growth is occurring at a time when there are acute labour shortages across many parts of the economy. The unemployment rate has fallen to 3.5% nationally (3.2% in Victoria)¹⁰ and Australia has nearly reached 'full employment'. The Australia Bureau of Statistics recently reported that there were '480,100 job vacancies in Australia, a 111.1% increase since February 2020'.¹¹ The highest number of job vacancies is in Health Care and Social Assistance (68,900) and Food Services (51,900) and Professional Scientific and Technical Services (42,900).¹²

Consultations undertaken as part of the development of the Victorian Skills Plan 2022/23 highlighted that

*[t]he care economy is facing specific challenges meeting labour and skills needs, resulting in competition for the same workers across aged care, mental health, disability support and allied health.*¹³

Within this context of growth amidst shortage, an organisation's ability not only to recruit but to retain its workforce is key to ensuring that it can continue to deliver high-quality services and supports. There is a growing body of evidence demonstrating that retention of appropriately skilled staff is a significant challenge across the social service sector, including the disability sector, and this challenge has been exacerbated by the impacts of the COVID-19 pandemic.

The need to retain capable employees is 'especially important' for non-profit organisations 'because they mainly determine the quality of the social services'.¹⁴ Workforce shortages and high levels of employee turnover have a significant impact on individuals, teams, organisations and clients. In the worst cases, low staff retention can result in poor outcomes, putting workers' and clients' health, wellbeing and livelihoods at risk. On the other hand, there is evidence to suggest that a 'stable workforce' can lead 'improved quality of work, improved organisational memory, competitive advantage through retaining a more experienced workforce, and reductions in training, advertising, and recruitment costs'.¹⁵

Existing data indicates that there are multiple factors that hinder retention, including working conditions (for example, low pay, heavy workloads, casualisation of the workforce, etc.) and unclear career pathways. This project sought to build on existing research to explore the factors that support the retention of disability support workers (DSWs) in Victoria.

In a recent study, 44% of service providers report difficulty retaining DSWs, up from 40% in 2020.¹⁷ For DSWs, specifically, turnover appears to be highest in the first year of employment. Yooralla, a large provider of a full range of NDIS and state-funded disability services across Victoria, reports that their attrition rate of support workers is 22% in the first twelve months of employment, compared to an overall turnover of 18%. Additionally, these high turnover rates create a constant influx of recently hired DSWs and adversely affect service continuity.

There is very little existing research on turnover rates of recent entrants in the social service sector.¹⁸ This project aims to add to research on the disability workforce overall by targeting newly hired DSWs at two partner organisations – Yooralla and Able Australia. The project focused on the experience of a specific cohort – disability support workers who had worked in the disability sector for 6–12 months – and explored the following questions:

- Were recent entrants working in the disability sector prepared for their role?
- Do recent entrants working in the disability sector have access to adequate workplace support?
- What are the main challenges that recent entrants in the disability sector face?
- Are recent entrants satisfied with their job? And do they intend to stay in their job?
- What are the demographic characteristics and job roles of participants?

This report summarises the findings of the project and includes insights to inform the design and implementation of employer, industry, and government-led initiatives to increase worker retention in this vital sector.

The research participants were drawn from two disability service organisations operating in Victoria – Yooralla and Able Australia. However the literature and anecdotal evidence from the sector peak body – National Disability Services (NDS) – and WIDI team members with disability sector experience indicate that the issues identified by participants in this project can be observed in other disability service organisations.

Around one in four disability workers leave their job in any given year, which amounts to a 'churn' rate that is roughly three times higher than the overall Australian workforce.¹⁶

Methodology

The Disability Workforce Retention Project was supported by funding from the Department of Families, Fairness and Housing (DFFH). The research was undertaken in partnership with two disability service organisations – Yooralla and Able Australia – who provided input to the design of the research questions and led the recruitment of participants for the project (see below for details).

The Research Team adopted a mixed-methods approach for this project which involved the components shown in Figure 1.

The Research Team undertook a review of literature on retention in the social service workforce and used a combination of surveys and in-depth, semi-structured interviews with the participant groups to explore the experience of disability support workers who had recently started work in the sector, their expectations, intention to stay, and factors influencing their decision.

Ethics approval for this project was sought and granted by RMIT University’s Human Research Ethics Committee on 9 May 2022. In recognition of the significant pressures facing disability support workers and their managers, the Research Team decided to reimburse interviewees for their time. A request to amend the ethics application to enable the Research Team to offer reimbursement in the form of a \$50 gift voucher to interviewees was approved on 17 June 2022.

Participant Groups and Population

Table 1 sets out the definitions of the three participant groups that were invited to take part in the project. The Research Team collected survey and interview data from Participant Groups 1 and 2 and interview data from Participant Group 3.

Recruitment of participants was led by the partner organisations – Yooralla and Able Australia. The Research Team prepared targeted communications for each Participant Group which were then distributed to relevant employees, former employees, and managers by Yooralla and Able Australia. Table 2 outlines the total number of potential participants from each Participant Group along with the total number of participants engaged as part of the project.

Surveys

Two surveys were administered for the project. Survey 1 was targeted at Participant Group 1 and Survey 2 was targeted at Participant Group 2 and both surveys included questions relating to the following:

- Demographic questions about the participant/respondent (e.g., gender, age, etc.);
- Questions about the participant’s role (e.g., work setting, work schedule, etc.);
- Questions about the participant’s preparedness, expectations, motivation and engagement; and

- Questions about job satisfaction and future intentions.

The surveys were open for a period of nearly 8 weeks from 18 May 2022 until 11 July 2022.

The Research Team received a total of 60 responses from Participant Group 1: Disability support workers employed by Yooralla or Able Australia who commenced their employment between 1 January 2021 – 31 December 2021. Of these 60 responses, 13 were assessed to be invalid because the respondent did not consent (N: 1), the response

was only partially completed (N:4), or the respondent was not based in Victoria (N: 8). The total number of valid responses was 47.

The Research Team received a total of 8 responses from Participant Group 2. Of these, one respondent did not consent, and two responses were from workers based outside of Victoria, leaving a total of 5 responses.

FIGURE 1 – OVERVIEW OF RESEARCH METHODOLOGY

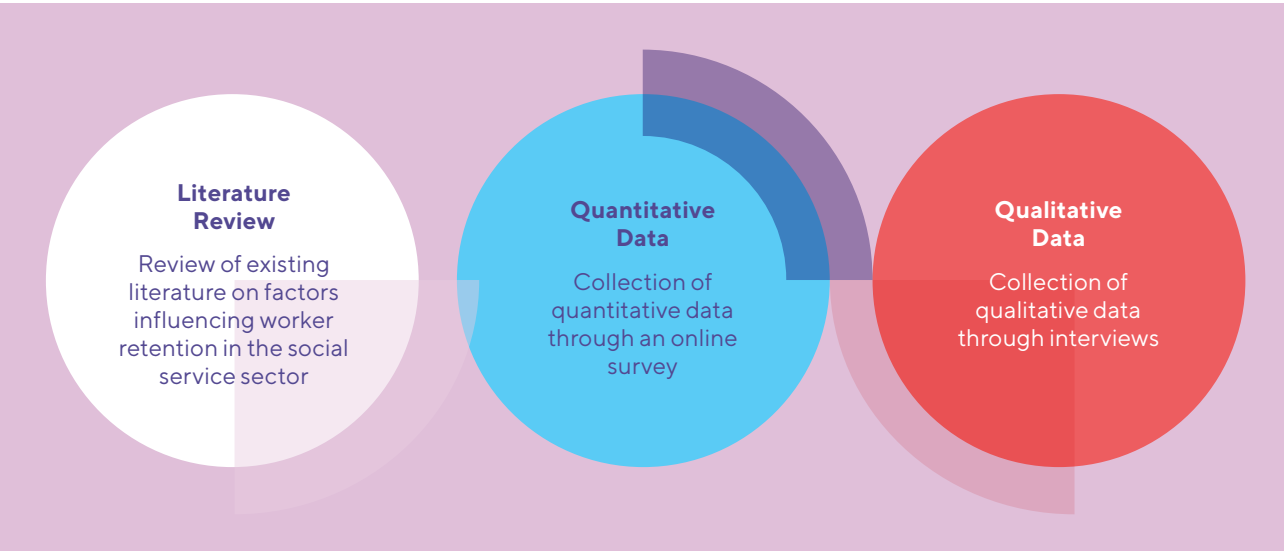


TABLE 1 – DEFINITION OF PARTICIPANT GROUPS

PARTICIPANT GROUP	DEFINITION	SURVEY	INTERVIEW
Group 1	Disability support workers employed by Yooralla or Able Australia who have commenced their employment between 1 January 2021 – 31 December 2021.	✓	✓
Group 2	Disability support workers who were employed by Yooralla or Able Australia for a period of 6–12 months between 1 January 2020 – 31 December 2021 who left their role at Yooralla or Able Australia.	✓	✓
Group 3	Current managers or supervisors of disability support workers employed by Yooralla or Able Australia.		✓

TABLE 2 – TARGET POPULATION AND NUMBER OF PARTICIPANTS

PARTICIPANT GROUP	TOTAL NUMBER OF POTENTIAL PARTICIPANTS	TOTAL NUMBER OF PARTICIPANTS
Group 1	235	64 comprised of 47 survey respondents + 17 interviewees
Group 2	47	6 comprised of 5 survey respondents + 1 interviewee
Group 3	61	8 interviewees

Interviews

The Research Team undertook online interviews using the Microsoft Teams meeting platform. The interviews were recorded and transcribed and thematic analysis was conducted using interview transcripts. The interviews took place at a time when COVID-19 and flu infection rates were high, so an online platform represented the safest option to hold interviews. Using an online platform also enabled participants to take part in the interview at a time that suited them.

Of the 40 interview consent forms received, 2 were assessed to be invalid because the response was a duplicate (N: 1) or the respondent was not based in Victoria (N: 1). A further 6 potential participants did not respond to email correspondence from the project team attempting to schedule an interview.

32 interviews were scheduled, and 26 interviews were conducted. Of the 6 interviews that were scheduled but did not proceed, potential participants sent their

apologies and declined due to work commitments (N: 4) or no response was received (N: 2). Of the 26 interviewees, 17 were recent-entrant DSWs, 1 was previously employed as a DSW, and 8 were managers or supervisors.

TABLE 3 – BREAKDOWN OF INTERVIEWEES

PARTICIPANT GROUP	DEFINITION	NO. OF INTERVIEWEES
Participant Group 1	Disability support workers employed by Yooralla or Able Australia who have commenced their employment between 1 January 2021 – 31 December 2021.	17
Participant Group 2	Disability support workers who were employed by Yooralla or Able Australia for a period of 6–12 months between 1 January 2020 – 31 December 2021 who left their role at Yooralla or Able Australia.	1
Participant Group 3	Current managers or supervisors of disability support workers employed by Yooralla or Able Australia.	8

Limitations

Several limitations were encountered during the project that are important to acknowledge. Many of these limitations were anticipated and the Research Team sought to put in place mitigation strategies to minimise the impact of these limitations wherever possible.

Project timeframe

This project was undertaken over a period of 9 months (February to October 2022). Data collection for the project commenced on 18 May 2022. To allow for greater engagement, the Research Team extended the data collection period until 11 July 2022. The overall timeline for the project was extended with the final report being completed in October 2022.

Target population

In keeping with the initial conversations with the Department of Families, Fairness and Housing (DFFH) and the original project partner Yooralla, participants were drawn from two organisations: Yooralla and Able Australia. The Research Team analysed the data gathered through this project alongside the body of literature on factors influencing retention. The Research Team also consulted with subject matter experts on the WIDI Team to determine the extent to which the data and findings were unique to the partner organisations or whether the factors and issues identified could be observed elsewhere in the disability sector.

Response rate

While the number of participants was significantly lower than the Research Team had hoped and falls short of the target of 250 current employees and 30 past employees which would enable for generalisability across the entire participant population, this result was expected.

It is likely that the low response rate is due to a number of factors. Research from the literature review demonstrates that disability support workers often have heavy workloads and suffer from fatigue and/or burnout, therefore, it is likely that some people did not have time to complete a survey and/or interview. It is also likely that some people may have felt uneasy about disclosing opinions about their workplace and employer. Furthermore, due to privacy reasons, potential participants received recruitment emails from their employer rather than WIDI. It is possible that some potential participants may have been less likely to participate because the request was coming from their employer rather than an external institution.

The partner organisations expressed an interest in hearing from past employees about their experience and the factors influencing their decision to leave

the organisation. While the partner organisations did have contact information for past employees, the level of engagement with this cohort (Participant Group 2) was very low. This result was not surprising given that these participants no longer have an active relationship with the partner organisation. A standardised process for exit interviews with employees who are leaving the organisation with targeted questions would help to develop a clearer picture of the factors influencing employees’ decisions to leave the organisation.

Interview logistics

The interviews were conducted online through Microsoft Teams. This platform was chosen due to health and practical reasons. The nature of the online environment meant that there were some technical difficulties that sometimes interrupted the flow of the interview, however, this was minor. Several interviewees appeared to be participating in the interview from their workplace. The Research Team notes that this may have made it difficult for interviewees to disclose certain information about their experience of work while their colleagues and/or managers and supervisors were nearby.

Literature Review

There is a growing body of literature that explores the experience of the social service workforce, including DSWs. The literature encompasses a range of approaches from single case studies of individual workers (Mpofu, 2020) to investigations of the experience of specific workforce populations or segments (see, for example, Chisholm et al., 2011; Lincoln et al., 2014; Cosgrave et al., 2015 on the experience of rural workers), workforce snapshots (HESTA, 2021; NDS, 2020) and also large scale, longitudinal studies (Victorian Department of Health and Human Services 2019/2020).

The literature covers a variety of topics including: the composition of the workforce (HESTA, 2021; Laws and Hewitt, 2020; NDS, 2021), the impact of new approaches and funding models (Baines et al., 2019; Cortis and van Toorn, 2021; Moskos and Isherwood, 2019), worker

satisfaction and wellbeing (Chung and Harding, 2009; Healy et al., 2015; Hickey, 2014; Kozak and Kertsten, 2013; Ryan et al., 2021, Travis et al., 2016; Vassos and Nakervis, 2012; Vassos et al., 2013), the effect of the COVID-19 pandemic (Kavanagh et al., 2020) and – importantly for this project – factors influencing worker retention (Cho and Song, 2017; Cosgrave et al. 2015a and 2015b, Maertz et al., 2007; Thomas et al., 2014).

According to the latest Census data, over 1.4 million people living in Australia identified as requiring assistance with core activities, including 382,073 people living in Victoria.¹⁹ With the number of people requiring assistance continuing to increase, there is an urgent need to grow the disability workforce by retaining existing skilled workers and at the same time

recruiting and attracting new workers. DSWs are a crucial part of this workforce and play a critical role in supporting people with disability to achieve their goals.

Disability support work is diverse and can involve a range of different activities across a number of settings, including clients' homes, community settings and supported independent living. As Judd et al. (2017) explain, DSWs are not only 'the backbone of contemporary disability support services' but also 'the interface through which disability philosophies and policies are translated into practical action'.²⁰ A Victorian Government webpage on careers in the disability sector describes the role of DSWs in this way:

ROLE OF DISABILITY SUPPORT WORKERS (DSWs)

'DSWs support people with disability to live the life they want. DSW roles are the most common roles in the sector and are very diverse. The day-to-day tasks of the role will vary greatly depending on the individual needs and goals of the person you support. Daily tasks may include, but are not limited to:

- supporting individual participation in social and recreational activities such as going to the footy or the movies
- undertaking tasks outside the home such as shopping, visiting friends and family
- supporting participants to achieve their employment goals
- personal care
- light domestic duties such as meal preparation and cleaning
- manual handling and/or the use of equipment to support mobility (wheelchairs or hoists)
- providing companionship and emotional support
- transportation
- assisting individuals to communicate.²¹

While the role of DSW has existed for some time, the context of the work has changed dramatically in the past decade. As noted in a recent report by HESTA, 'the nature of disability support work is becoming more complex every day, requiring a new range of skills to support a growing number of Australians who have different care and support needs'.²² The introduction of the National Disability Insurance Scheme (NDIS) has fundamentally altered the landscape in which services and supports for people with disability are delivered. And after many years of advocates and carers raising concerns, the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability was established in April 2019 to investigate:

- 'preventing and better protecting people with disability from experiencing violence, abuse, neglect and exploitation
- achieving best practice in reporting, investigating and responding to violence, abuse, neglect and exploitation of people with disability
- promoting a more inclusive society that supports people with disability to be independent and live free from violence, abuse, neglect and exploitation.'²³

Although the Royal Commission's full findings and recommendations have not yet been published, the Interim Report published in October 2020 has identified several areas of concern related to the disability workforce, including the casualisation of support work and instances in which casualisation has undermined safety and client outcomes.²⁴ The Commissioners also highlighted:

'the need to improve workforce capability, support, oversight and management to reduce violence, abuse, neglect and exploitation and improve responses across:

- supported accommodation and other support services
- education settings
- health services
- the criminal justice system
- domestic and family violence services
- specialist disability services such as [Australian Disability Enterprises] ADEs and day programs.'²⁵

Citing evidence provided by the Centre for Developmental Disability Health, the Commissioners emphasised 'the need for further training for DSWs, as they can play a key role in monitoring health and facilitating people's access to health care'.²⁶ The Disability Royal Commission has been extended due to disruption associated with the COVID-19 pandemic and is now due to hand down its Final Report on 29 September 2023. Alongside the Royal Commission, researchers have been investigating the experience of support workers with many seeking to deepen the understanding of the impact of major policy and health trends upon the workforce.

Several studies have pointed to significant challenges facing DSWs, some of which are long-standing problems, as well as newer challenges that are linked to the disruption associated with the introduction of the NDIS and the COVID-19 pandemic. A study by Baines et al. explored 'a whole new set of pressures' facing DSWs 'arising from the NDIS's market-driven approach'.²⁷ Drawing on data from interviews with 19 DSWs and case managers in the Hunter region, the researchers found that workers were experiencing '[i]nstability in work and income, associated with fluctuations in demand for work from individual participants'.²⁸ Increases in unpaid work – including travel and additional administrative duties – were also reported alongside 'an absence of institutional support for training, supervision, mentoring, and professional development'.²⁹

Baines et al. describe the considerable challenges faced by DSWs on a daily basis, which include increased levels of violence in their work and disrupted worker/manager relationships linked to the settings of the NDIS system.³⁰ The researchers found '[h]igh levels of staff turnover' calculating that 'about one in four disability service workers leave their jobs in any given year' which equates to a "churn" rate about three times higher than in the overall workforce'.³¹

Reflecting on the rapid growth of the workforce, Baines et al. argue that '[n]ew entrants to the DSW workforce ... are inadequately skilled and trained, with very little experience working with people with disabilities'.³² Baines et al. highlight the impact of inexperienced workers in relation to safety (their own and that of their clients), workload and morale. They note that when 'inexperienced workers are put in positions where they do not have the skills to handle complex situations ... [they] unintentionally, increase the likelihood of workplace stress and conflict'.³³ Baines et al. (2019) also point to the considerable consequences of casualisation, including a lack of continuity and consistency in service provision, which is particularly upsetting for clients with intellectual and

cognitive disabilities: 'it is well-known that frequent turnover and disruptions in staffing and support routines enhances the risks of emotional turmoil and conflict'.³⁴

A recent study commissioned by the Health Services Union, Australian Services Union and United Workers Union, undertaken in the early stages of the COVID-19 pandemic, explored how the nature of the work that disability service workers do is changing since the introduction of the NDIS. The study found that '[w]orkers reported mixed experiences of the NDIS, and many expressed significant concerns about service quality under the Scheme'.³⁵ The authors note that '[v]ery experienced workers were more likely to express concerns about service quality under the NDIS, compared with those who had not worked in the sector for long'.³⁶

This same study – which surveyed 2,341 disability workers across Australia in March 2020 – highlighted several issues reported by DSWs. These issues – many of which were similar to those identified by Baines et al. (2019) – included:

- unpaid work
- uncertainty around shifts and rosters
- staff shortages and high workloads

- income insecurity and low satisfaction with pay
- concerns about job security
- limited opportunities for career advancement
- lack of access to training
- insufficient time with supervisors
- safety issues including experiences of bullying, harassment, violence and abuse.³⁷

In terms of retention, 6% of all workers surveyed reported that they would 'definitely not' be working in the disability sector in five years' time, with a further 19% responding 'probably not'.³⁸ In this study, recent entrants were the least likely to say they intended to leave the sector, with only 14% of workers in their first year in the sector stating they would 'probably not' remain in the sector in five years' time.³⁹ This research also found that optimism among new workers around their career prospects dissipates 'quickly'.

Studies exploring drivers of workforce retention in the social service sector point to a number of factors that influence an individual worker's decision to leave their job. These studies also note that the decision to stay or leave the community sector is not necessarily due to a single issue rather it 'is complex and multifactorial'.⁴¹ Researchers have conceptualised these factors in different ways. For example, Cosgrave et al. argue that '[f]actors affecting retention relate to a wide range of considerations and fall within four key domains: work (place and role), professional (career), personal (and family) and community (social connection).⁴² Other studies apply a macro, meso and micro level analysis pointing to environmental factors (e.g. unemployment rate), organisational factors (e.g. access to professional development) and individual factors (e.g., family responsibilities).⁴³

Low pay and poor conditions are commonly cited as one of the main drivers of attrition for DSWs. In an English context, Stevens et al. (2019) found low pay to be associated with workforce retention problems for disability care workers, while supportive co-workers and gestures of appreciation from managers were linked to increased levels of job satisfaction and improved retention.⁴⁴ Baines et al. (2019) note that 'DSWs are facing increased precarity, stress and irregular hours in their work' which they linked – in part – to the casualisation of work arrangements.⁴⁵ As Cortis et al. (2020) note, 'lack of income security' impacts a substantial group of DSWs, with 'changes in shifts and fluctuations

in paid hours' creating uncertainty about weekly income.⁴⁶

While pay and conditions are undoubtedly an important consideration for DSWs, there is some data that suggests that dissatisfaction with pay is decreasing more generally in the disability sector.⁴⁷ The Victorian Government longitudinal study of the NDIS workforce charts the improving perceptions of pay fairness among disability workers. In 2020, 51% of workers agreed they were paid fairly, up from 43% in 2018.⁴⁸

As Cortis et al. (2020) contend, staff shortages and heavy workloads pose a problem not just for DSWs but also for the clients they support, as 'good quality, personalised services are predicated on the working conditions, availability and job satisfaction of DSWs'.⁴⁹ In a 2020 disability workforce survey, two-thirds (64%) felt they were under pressure to do more in less time.⁵⁰ Moreover, 66% worried that clients did not get what they need from services.⁵¹ Research by Cosgrave et al. (2015a) found that long-term unfilled positions negatively influence the job satisfaction of staff members 'contributing to burnout and resulting in high staff turnover'.⁵² Retention problems and chronic workforce shortages then impact the ability of remaining staff to 'provide quality care to clients and to adequately support new team members'.⁵³

As noted in the NDIS National Workforce Plan 2021–2025, many disability organisations struggle to provide the essential supervision for DSWs due to time pressures and lack of resources.⁵⁴ A 2020 study of disability workers found that more than half of supervisors (53%) agreed that they were unable to provide proper supervision due to lack of time.⁵⁵ According to Cortis et al. (2020), '[m]any DSWs are missing out on appropriate inductions, one-to-one support, opportunities for peer support, and assistance with making important decisions'.⁵⁶

In an environment where workers are facing a combination of heavy workloads, inadequate supervision and safety concerns, it is hardly surprising that DSWs 'often experience workplace stress and burnout'.⁵⁷ 'Burnout', Judd et al. explain, 'is a psychological response to workplace stress and is a common occurrence among people who work within health and community services'.⁵⁸ Factors associated with stress and burnout among DSWs include:

- challenging client behaviours, for example aggressive or sexual behaviors or self-harm
- organisational characteristics such as high job demands, role ambiguity and conflict, low levels of control, support and feedback
- characteristics of individual workers such as coping strategies and cognitive styles.⁵⁹

'The researchers note that: 'the proportion of workers who agreed their prospects for advance were good was 56% among those in their first year, however, this slips to 38% among those with 1-2 years experience, and falls further to 30% or less, among those with over 10 years of experience'.⁴⁰

In their study of workplace stress, burnout and coping, Judd et al. (2016) interviewed DSWs who ‘spoke of the rewarding, uplifting and joyous times in their job’.⁶⁰ Interviewees gave numerous examples of positive work experiences, including times where they had been commended by colleagues and management, instances where their clients had shown their appreciation, enjoying the variety of activities they performed, ‘feeling empowered, learning life lessons and making a difference’. DSWs cited ‘watch[ing] their clients learn new skills and achieve their goals’ and ‘seeing the[ir] client in a state of happiness’ as positive experiences.⁶¹ These positive experiences were contrasted with negative experiences which included ‘communication barriers with clients, lack of power to make decisions, earning a low income, conflicting priorities between DSWs and management and client behaviour’.⁶²

There is a growing body of literature that examines the experience of specific groups or cohorts of workers such as Aboriginal and Torres Strait Islanders (e.g., Deroy and Schutze, 2021), migrant workers (e.g. Adebayo et al, 2021) and women (e.g. Baines, 2011), including data and research on barriers to women’s economic participation (e.g. WGEA). This literature demonstrates that the nature or intensity of retention challenges can vary by worker characteristics/demographics, work location (e.g. rural/remote vs metropolitan), work setting, mode of employment (e.g., full-time versus casual) and other variables (e.g., caring responsibilities, job role).

In a study by Cosgrave et al. (2015a),⁶⁴ exploring retention challenges in rural community mental health services in Australia, service managers cited ‘unmet expectations about rural living/lifestyle’ and ‘social connection’ alongside ‘high workload, reduced resources’ and ‘challenges of working in small teams’ as factors influencing workers’ decisions to leave.⁶⁴ Another study by Lincoln et al. (2014), focusing on allied health professionals in the disability sector in rural and remote New South Wales, cited several factors commonly linked to low retention, including administrative burdens, lack of flexibility and travel. However, they note that the burden associated with travel was more severe for rural and remote workers, as ‘[d]ue to the geographic size and location of the region, and its relative isolation’, overnight stays were often required, which was particularly problematic among a workforce that is predominantly female, a large proportion of whom have caring responsibilities.⁶⁵

The rise of individualised support means that work can be isolating for DSWs who have no opportunity to interact with their co-workers daily, for example, those delivering in-home support alone. Isolation has been attributed to the increase in casualised, one-on-one work brought about by the introduction of the NDIS. Such work makes team meetings, peer networking, supervision and training difficult for this group of DSWs. In 2020, 72% of disability workers said they felt isolated in their job at least some of the time, up from 63% in 2018.⁶⁶

A 2020 longitudinal study on the NDIS workforce found that isolation is a growing issue for workers. The researchers found that feelings of isolation among DSWs have increased under the NDIS and may have been amplified by the COVID-19 pandemic. These researchers pointed out that ‘[w]hile isolation was a common experience across the workforce, the manifestation of this differed for those remaining on-site, (such as residential support workers) compared to those who transitioned to working from home (often those in management positions, support coordinators or allied health professionals)’.⁶⁷ Some participants who continued to work on-site or in clients’ homes during COVID-19 lockdowns reported feeling ‘abandoned by management in a potentially highly risky situation’.⁶⁸ Many participants in this study ‘reflected it is the ability to debrief with colleagues and team management who understand the nuances of issues faced was most beneficial for stress management and overall wellbeing’.⁶⁹

Safety, including cultural safety, has been linked to worker wellbeing and retention. Several studies have found that occupational violence is a common experience for DSWs.⁷⁰ In their longitudinal study of disability workers in Victoria, Ipsos found that ‘there are not adequate processes in place to reduce the risk of violence (such as risk assessments or provision of security equipment for home visits); and when incident reports were lodged, follow up was lacking’.⁷¹

A study by Adebayo et al. (2021), examining acculturation stress in Australian residential aged care facilities, found that migrant care workers ‘often experience prejudice and stereotyping because of their cultural differences, from residents and co-workers from the dominant culture, as well as stressful working conditions’.⁷² Identifying a number of work-related stressors (e.g. loss of confidence, overwhelming paperwork and documentation) and non-work related stressors (e.g. potential challenges engaging with professional organisations), Adebayo et al. note that ‘[a]wareness of migrant workers’ resettlement challenges could facilitate improved interaction and engagement between employers and work colleagues from the dominant culture and migrant care workers’.⁷³

In a 2021 study exploring factors influencing retention among health and wellbeing staff in Aboriginal health services, Deroy and Schutze highlighted cultural safety as one of six central themes identified by research participants. Investigating high retention rates among staff at

Waminda South Coast Women’s Health and Welfare Aboriginal Corporation in New South Wales, the researchers noted that cultural safety was promoted in several ways including:

- ‘Embedding Aboriginal cultural ways of doing
- Support[ing] staff as both a staff member and community member
- Guidance from Cultural mentors, Elders and Cultural Committee
- Leave for cultural events or in-house celebrations
- Safe environment to identify and practice culture’.⁷⁴

Deroy and Schutze also pointed to other factors including ‘the importance of bi-directional communication, as well as demonstrating that social accountability, teamwork and collaboration ... supervision, professional advancement, and recognition ... [are] important factors contributing to staff retention in Aboriginal Health Services’.⁷⁵

Studies have also pointed to the role of education and training in relation to the experience of workers and workforce retention. Moskos and Isherwood (2019) note that in Australia ‘the disability workforce has historically had relatively low levels of formal qualifications and skills’.⁷⁶ There are currently no minimum qualifications to gain work as an entry-level DSW and as Moskos and Isherwood note ‘there has been a lack of organisational support (including financial assistance) for on-the-job training to further develop worker skills and competencies’.⁷⁷

Job ad data from 2015–2018 reveals that only 50% of disability organisations require a certificate qualification to work as a DSW⁷⁸ however, given current workforce shortages, this percentage is likely to be lower in 2022. As mentioned previously, Baines et al. (2019) raised concerns about the preparedness of the new DSWs. They argue that:

‘Incoming workers immediately need basic induction and orientation training to work with people with disabilities, and learn fundamental prerequisites (such as the NDIS code of conduct, basic health and safety procedures, and more). Then they need an opportunity to acquire foundational skills through formal training programs (preferably provided through public and recognised non-profit providers, with a particular reliance on TAFEs).’⁷⁹

Research suggests that disability workers have a strong preference for treatment or support-specific training (27%) and NDIS training (18%) as opposed to a specific qualification (i.e., a Certificate IV) (7%), leadership training (6%) or training to progress their career (4%).⁸⁰ However, there is also evidence that many disability organisations struggle to provide the necessary training for DSWs due to a lack of time and resources.⁸¹ A 2020 survey of Australia's disability workforce found that almost one-third (29%) of those working in community hub and day-program settings were not paid for all their time spent training.⁸²

As noted by Radford and Chapman (2015), 'examining the factors that influence employees' intentions to stay – rather than just the factors that influence employees' intentions to leave – is important'.⁸³ This is because while 'lower intentions to leave do not necessarily result in lower turnover... higher intentions to stay significantly increase employee retention'.⁸⁴ Radford and Chapman identify several factors that influence intentions to stay including:

- 'Perceived organisational support', which is defined as an employee's 'global beliefs concerning the extent to which the organisation values their contribution and cares about their wellbeing'.⁸⁵
- 'Perceived supervisor support', which 'refers to the perceptions that employees have about how much their supervisor cares about their wellbeing and values their contribution to the organisation'.⁸⁶

- 'Job embeddedness', which 'refers to the connection and relationships that employees develop over a period of time with their employer'.⁸⁷

Focusing on newly qualified workers in the Australian social service sector, Healy et al. (2015) point to the importance placed on 'values alignment in practice, a supportive team environment and opportunities for advancing knowledge and skills' in their first year of practice.⁸⁸ Similarly, research by Stevens et al. (2021) on the factors that encourage care workers to continue working in intellectual disability services in England found that '[f]eeling part of a team was declared by staff and managers as an important part of job satisfaction and as an attraction to stay working in a particular team'.⁸⁹

Research by Cosgrave et al. (2015b) also points to the importance of team dynamics in worker retention. In their review of the literature on factors impacting retention amongst community mental health clinicians working in rural Australia, Cosgrave et al. note that 'working in unsupportive or dysfunctional teams was found to contribute in making the decision to leave a rural position'.⁹⁰ A key strategy identified in Judd et al.'s 2017 study of burnout, stress and coping among DSWs involved reaching out to peers or supervisors. As Judd et al. explain 'talking with a colleague or member of management gave them the opportunity to debrief and ask for advice or help when coping with a challenging situation'.⁹¹

There is strong evidence that the rate of 'churn' in the disability sector is 'extreme'. High turnover rates can have a significant impact on clients, teams and organisations and – in the worst cases – contribute to adverse outcomes for clients, and increased workloads, stress and burnout among DSWs. There are many factors that influence the retention of DSWs. These factors can be observed at an individual level, a team level, an organisational level and a structural level, and are often interrelated.

There is research to indicate that retention risks may be higher for recent entrants to the disability sector, particularly in cases where the worker has not been adequately trained or prepared to fulfil the essential requirements of the role. The research also shows that there are factors that can help to motivate workers to stay in their role. Consequently, organisational strategies to improve workforce retention should seek to address or mitigate factors that cause workers to leave (e.g., lack of career pathways, safety concerns), while at the same time investing time and resources into activities that support their employees to stay (e.g., quality supervision of staff, team cohesion, promoting cultural safety).

The remainder of this report outlines the findings from the surveys and interviews with disability support workers and managers from Yooralla and Able Australia who participated in this research project.

Key Findings

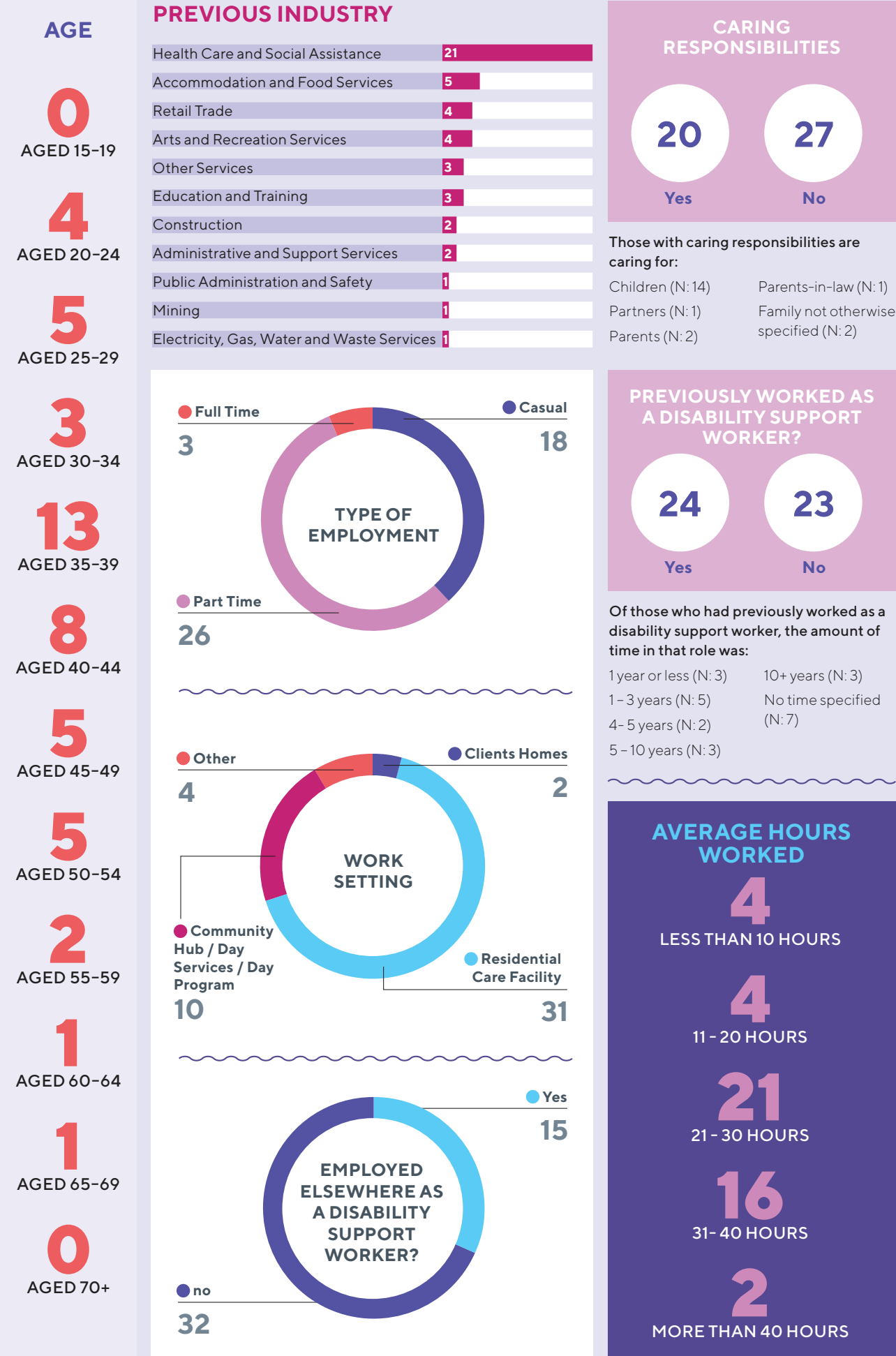
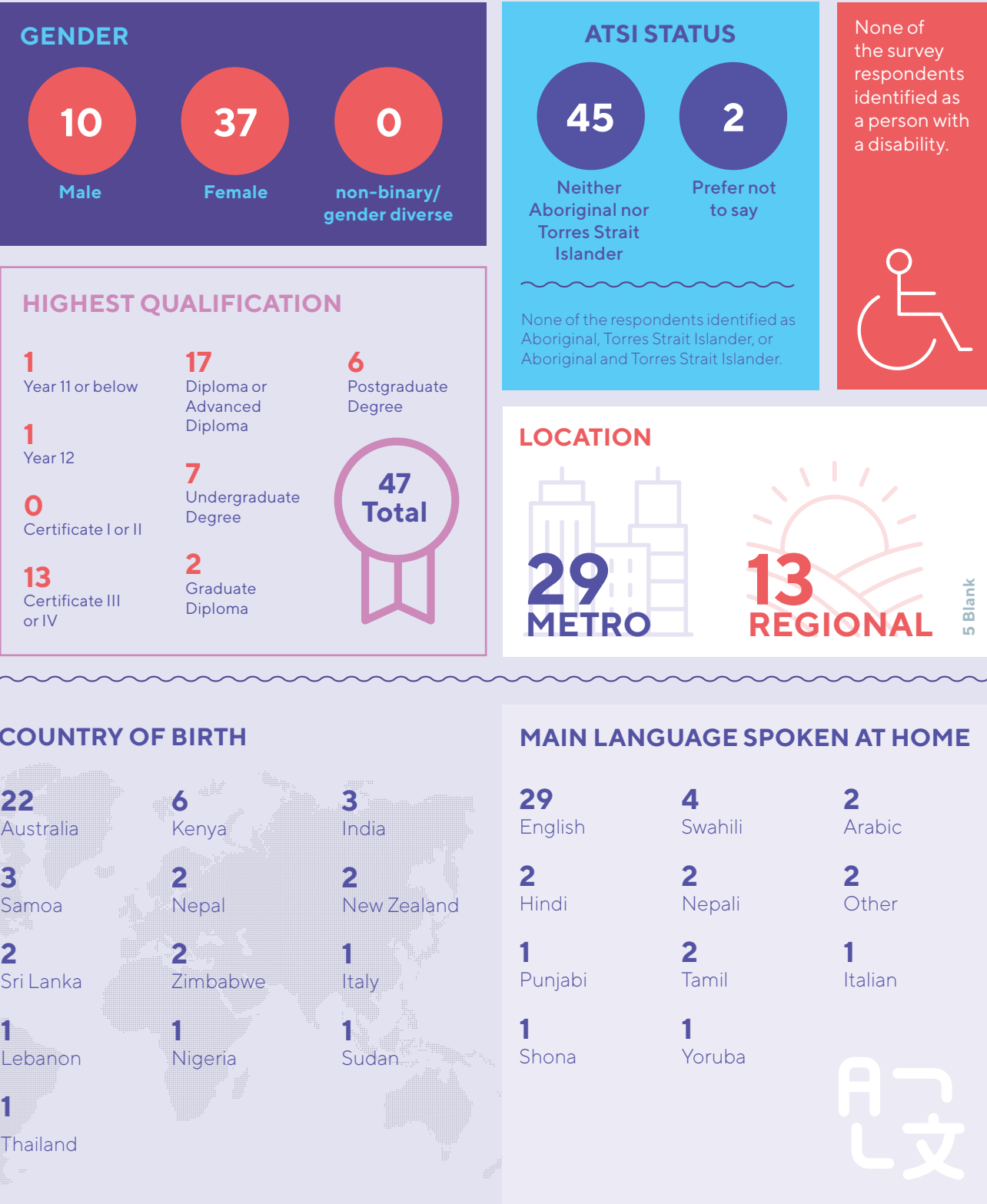
Several themes emerged through the analysis of data gathered through this project. This section outlines the project findings under the following areas:

1. Demographic characteristics and job roles
2. Preparedness and expectations, including qualifications, recruitment, induction, training, casualisation and job insecurity
3. Engagement and motivation
4. Organisational culture, including supervision and feeling valued and supported
5. Organisational safety
6. Job satisfaction, intention to stay and career pathways

As many of these themes are interrelated, there is some overlap between these areas.

Demographic Characteristics and Job Roles

Profile of Survey Respondents: This infographic captures the demographic characteristics and job roles of the 47 participants who responded to the survey.



Preparedness and Expectations

Sixty-eight per cent of survey respondents (N: 32) agreed that they felt prepared when they started work as a disability support worker, however, 28% of respondents (N: 8) did not feel prepared.

Many interviewees reported that their role as a DSW differed from their expectations because there was a mismatch between their preconceptions about the job and the stark reality of their work:

It's amazing how many people that we've brought through recruitment and induction that don't realise that being part of a disability support worker is you need to help someone go to the bathroom. And a lot of people will go through that [and then say] "I don't do that component". ... And it's not easy work.

Others felt their training for meal assistance was lacking because the online module was theoretical rather than on-the-job, practical experience.

Work setting and being employed elsewhere as a DSW both had a significant impact on recent entrants' expectations of and preparedness for their role:

- Sixty-eight per cent of survey respondents from residential settings (N: 21) and 60% of respondents from community hubs or day services (N: 6) felt prepared when they started their role.
- Thirty-two per cent of survey respondents who work in residential care settings (N: 10) disagreed that they were

- prepared, including 14% (N: 4) who strongly disagreed.
- Twenty per cent of respondents who work in community hubs or day services (N: 2) strongly disagreed that they were prepared for their role.

Levels of preparedness appeared to be higher among respondents who were born overseas (76%, N: 19) compared to respondents born in Australia (59%, N: 13). However, survey respondents who were born overseas and work part-time were less likely to report that they felt prepared (67%, N: 10).

Eighty-seven per cent (N: 13) of respondents who are employed elsewhere as a disability support worker felt prepared for their role. In contrast, only 59% (N: 19) of respondents who are not employed elsewhere as a disability support worker felt prepared. Moreover, several interviewees who had moved to disability support work from aged care spoke of an easy transition to their new role and reported feeling prepared and having a good understanding of what the job involved.

Recent entrant DSWs who were completely new to a caring role (i.e., those who had not previously worked in aged care or at another disability organisation) variously described feeling scared, anxious,

and lacking confidence when they commenced support work. These feelings of trepidation were triggered by the enormous responsibility new DSWs felt to keep their clients safe and well, particularly when caring for them one-on-one or taking them out into the community.

Among the five survey respondents who are no longer employed by the partner organisation, 60% (N: 3) felt prepared for their role with one respondent strongly disagreeing and one providing a neutral response. Interestingly, 100% (N: 5) of survey respondents who are no longer employed by the partner organisation clearly understood what was expected in their job.

Qualifications

Sixty-eight per cent of survey respondents (N: 32) held a Diploma qualification or higher with 28% (N: 13) holding a Certificate. Four per cent of survey respondents (N: 2) had not completed any post-secondary education.

One recurring theme of the survey respondents was their concern that management was hiring inexperienced or under-qualified staff as DSWs. Some thought their work lives would be improved if their employer 'hire[d] appropriate and qualified staff' and did 'not to recruit inexperienced staff':

Many DSWs interviewed were still working towards their Certificate III in Individual Support (Disability) or Certificate IV in Disability. Some gained employment as a DSW with a Certificate III in Aged Care. A few interviewees were slightly puzzled that they had obtained their position as a DSW with no experience or qualifications in disability.

Despite recruiting challenges and chronic staff shortages among DSWs, several interviewees argued that the Certificate IV should be mandated as the minimum qualification to ensure that only high-quality candidates were employed.

Recruitment and induction

In this research project, over 80% of survey respondents reported that they were given appropriate induction when they started (81%, N: 38) and that they have access to training and development (85%, N: 39). Among metropolitan respondents, 90% or more agreed that they were given appropriate induction (90%, N: 26) and have access to training and development (93%, N: 27), with a lower percentage of regional respondents agreeing that they were given appropriate induction and have access to training and development (77%, N: 10).

Over 80% of residential workers agreed that they were given appropriate induction (81%, N: 25) and have access to training and development (87%, N: 26), but a lower percentage of community hub or day service workers (70%, N: 7) agreed. Eighty per cent (N: 4) of survey respondents agreed that they were given appropriate induction with one respondent providing a neutral response.

A higher proportion of respondents who were born overseas agreed that they were given appropriate induction – 96% (N: 24), compared to 64% (N: 14) of survey respondents born in Australia.

An overwhelming majority of managers and DSWs identified slow recruitment and onboarding as a major problem in their organisation. Survey respondents wanted a 'faster employment time, from application to work', arguing that 'the process of hiring staff needs to be a lot shorter or at least streamlined'. Some DSWs reported that it was 'easily three months' between being interviewed for their role and actually starting work.

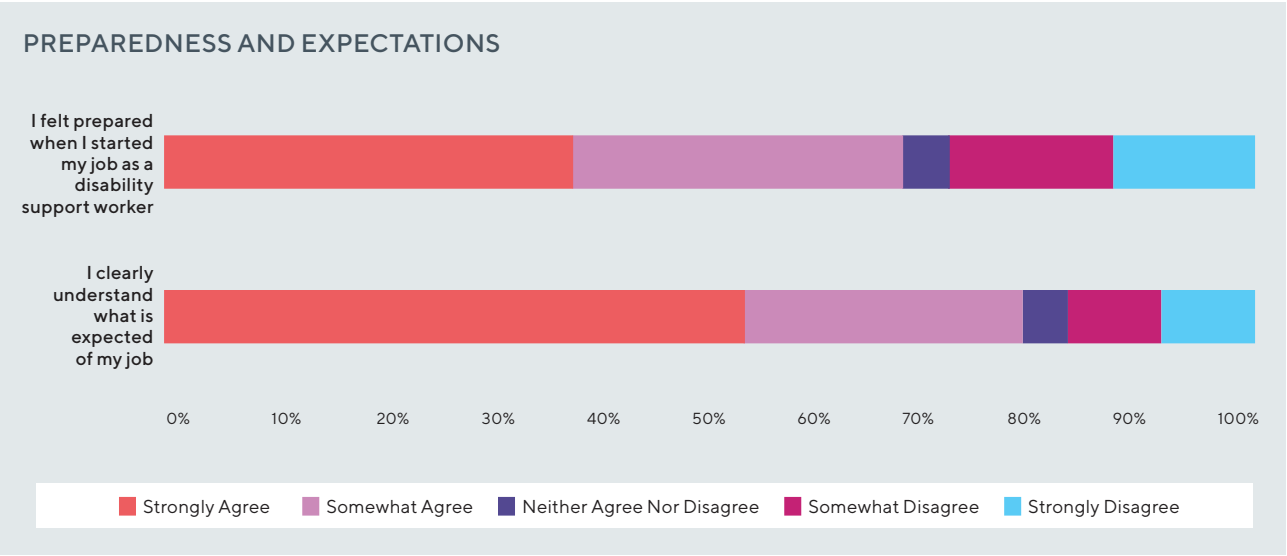
Several service managers expressed frustration about the amount of time to recruit. These managers noted that while some delays are due to external factors (e.g., NDIS checks) there was scope to improve internal processes, such as running additional induction sessions.

Service managers reported delays in the interview processes which had resulted in loss of appointable applicants. Managers expressed sympathy for applicants who made the decision to take up another job offer rather than wait two to four weeks for their appointment to be finalised. These managers recognised that these delays were particularly problematic for applicants who were unemployed.

Several interviewees reported that it took 30 days to receive their NDIS screening check when it was processed in hard copy, whereas others who uploaded their form digitally received it within 24 hours. The full-day induction process at head office was felt to be another impediment to starting work, in terms of the availability of new recruits: 'that's a big chunk of time that you've got to find before you're even hitting the floor'.

They need to be equal across the board with their rules and regulations with new hires (e.g., some are not trained enough for residential facilities with high needs and high behaviours). They need to make all new hires obtain a cert 3 or above in disability after 3 months of work or they have to leave.

- SURVEY RESPONDENT



Training and development

Eighty per cent or more of survey respondents – both current and former employees – reported that they have access to training and development (85%, N: 39 and 80%, N: 4 respectively).

Some survey respondents wanted ‘more support and training’ and ‘more training for team leaders’. Another respondent commented that their organisation needed to ‘ensure staff training is comp[li]eted and they are confident and comfortable to be left alone’. Despite this feedback, the vast majority of survey respondents and interviewees agreed that their organisation invested a substantial amount of time in the training process, and provided an appropriate breadth and quantity of training when they first began their job. There were mixed feelings, however, about the training’s quality, suitability and mode of delivery. As one DSW observed:

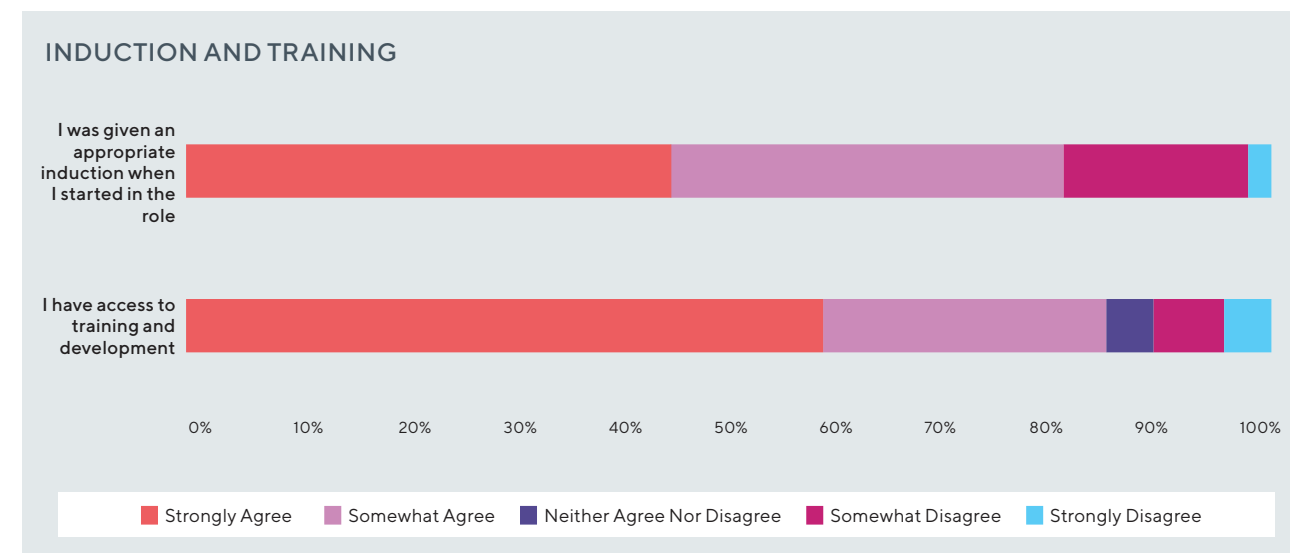
It was mainly about rules and regulations, and it gave you ... a brief overview of disabilities, but it wasn't quite real. When you're looking at a screen and you're ticking the boxes and you're doing that, it's like you've really got no idea because there was no other interaction but that.

Another DSW thought that their pre-commencement training was ‘a lot of reading ... You need more hands-on [training]. Like, you can read millions of pages about disability, but once you get there, it's nothing like you read’.

Most participants reported that they undertook training and professional development during paid work hours, however, a few reported completing training activities in their own time, without pay. Several DSWs objected to the fact that their organisation’s training was unpaid:

You're not getting paid for these trainings that you're meant to be doing, so you end up doing the minimum. I did the ones that I thought were important, but there were gaps in my trainings and ... I'm not really interested in working for free. ... I also want to be paid for my time because there's nothing worse for your self-esteem [than not getting paid] ... That's not very motivating ...

Some DSWs’ reported that their training was completely online, with many stating a preference for face-to-face training instead. They felt that some online modules were redundant, and other important content became one-dimensional and lost its value and impact when delivered online. One DSW interviewed expressed their concern that the recent entrants who were most in need of training were ‘flicking through it’ and not receiving it because it was all online.



The Research Team is aware that training programs for social sector employees that were previously delivered face-to-face had to pivot to online delivery in 2020 and 2021 due to the COVID-19 pandemic. For this project, the extent to which online training had replaced in-person training was not clear in the conversations with interviewees.

The shift to online training has had both positive and negative outcomes. Online training delivery is convenient and easily accessible for regional employees, however, several DSWs felt that a higher proportion of the most vital training should be in-person, such as the content around restraint and abuse. A small minority of DSWs interviewed wanted their organisation’s face-to-face training to be pre-recorded and online so that it was immediately accessible and could be assessed and signed off by their line manager more quickly.

One manager noted that while their organisation’s training matrix would be viewed as ‘gold standard’ in terms of NDIS quality, in practice it was challenging to implement, with staff requiring additional support to complete it. This same manager commented that the training was narrowly focussed on NDIS compliance and did not include evidence-based content related to community development.

They went on to describe the two types of training in the disability sector:

- 1) NDIS compliance, for example, how to read and understand reports from therapists; and
- 2) Program development and ‘imagining better’.

This manager felt that the second kind of training was not readily available. In contrast, another manager felt that they struggled to navigate and understand the NDIS and that they would benefit from additional training on how to complete NDIS paperwork.

Other interviewees felt that they did not receive enough training on how to navigate their organisation’s internal systems and complete their paperwork:

I found their onboarding was great from the customer's perspective. It was great for understanding the NDIS, but when it came to understanding the internal systems of [my employer], their own paperwork systems – no training at all. So, understanding how to put a claim form in, how their payroll system works, it took months. It took me nearly two months to figure it out and I had to do it on my own and the staff themselves weren't clued up. So, from a personnel point of view, that's what I found. The struggle is actually dealing with the organisation itself.

Reward and remuneration

Our survey and interview data reflects the trend of improving perceptions of pay fairness among disability workers. Sixty-three per cent of survey respondents (N: 29) reported that they are satisfied with their overall level of pay and 60% (N: 28) reported that they are fairly rewarded for the work that they do. Fifteen per cent (N: 7) of respondents strongly disagreed that they were satisfied with their overall level of pay and 11% (N: 5) strongly disagreed that they are fairly rewarded.

Interestingly, respondents who work in community hubs or day services were less likely to be satisfied with their overall level of pay, with only 30% (N: 3) agreeing that they were satisfied with their overall level of pay and only 40% (N: 4) feeling they were fairly rewarded. In contrast, 70% of respondents who work in residential settings (N: 21) were satisfied with their overall level of pay and 61% (N: 19) felt that they were fairly rewarded.

Survey respondents who were born in Australia were more likely to report dissatisfaction with their overall level of pay – 50% (N: 8), compared with 13% (N: 3) of respondents born overseas.

Among part-time workers, 68% (N: 17) were satisfied with their overall level of pay and 65% (N: 17) felt that they were fairly rewarded. Unsurprisingly, given the problems with casualisation (outlined below), rates of satisfaction with pay were lowest among casual workers. Only 56% of casual workers (N: 10) were satisfied with their overall level of pay and only 50% (N: 9) felt that they were fairly rewarded for the work that they do.

Fifty-seven per cent (N: 8) of respondents who work elsewhere as a disability support worker were satisfied with their overall level of pay, but less than half of this cohort (47%, N: 7) agreed that they are fairly rewarded.

Survey respondents were asked about three things their employer could do to improve their work life. Eleven respondents replied ‘better pay’ or ‘increase in pay’ as the number one consideration. One DSW felt that ‘wages need to increase to reflect the increase in the cost of living’, while another wanted ‘a wage that enables me to live more than a pay check-to-pay check existence’.

In contrast, remuneration was not often raised by interviewees as an area of concern. Indeed, several interviewees had transitioned to employment as a DSW from a personal care role in aged care due to the more suitable hours and attractive pay rates offered in the disability sector.

More than one manager referred to the Victorian Disability Services Enterprise Agreement 2018–2022, which offers ‘fairly attractive’ hourly rates of \$33–\$34 for high-intensity DSW staff: ‘I think that’s one of our positives that we actually are fairly decent in what you get paid.’ Whereas another manager thought the pay rates were ‘not great’ for casuals, and yet another commented, in reference to DSWs providing in-home support, that ‘I think they don’t get paid enough. I think for what they do, they get nowhere near what they should be paid.’

Casualisation and job insecurity

Among survey respondents, 55% (N: 26) were part-time, 38% (N: 18) were casual and 6% (N: 3) were full-time.

Work mode, the quantity of shifts available, and flexible hours are all key factors in the turnover of DSWs. Survey respondents sought ‘more shifts and to become permanent part time’ and ‘more flexible hours’ to improve their work life. Several interviewees employed as casuals wanted to be confirmed as permanent part-time employees. Another respondent hoped their organisation would ‘allow more hours for casuals’, but added ‘I know it’s not possible’.

Several DSWs commented that being offered a permanent part-time position, rather than casual shifts, allowed them to feel like a valued team member, rather than ‘just a casual’:

To offset the precarious nature of casual work, some DSWs interviewed held several casual or part-time jobs, which when combined, were equivalent to or greater than one full-time equivalent position. One interviewee held two casual positions – one as a DSW and the other as a personal care worker (PCW) in an aged care facility – due to the fear of losing one of these jobs and what they perceived to be the precariousness of the economy and employment during the COVID-19 pandemic:

for clients to build a sense of trust with their support workers when there is a revolving door of new faces every day. Moreover, casual staff must cope with not knowing clients’ routines and constantly working in unfamiliar locations. Some interviewees observed that it can be very invasive and disturbing for a client to have personal care support provided by a casual whom they do not know.

Rostering

Closely related to the problem of casualisation were complaints from DSWs around rostering. One survey respondent wanted a ‘fairer distribution of shifts among staff’. Some interviewees objected to ‘unattractive’, very short shifts that were only two- or three-hours in duration and not worth their while. Others pointed to back-to-back shifts that were long distances apart with unpaid travel between shifts.

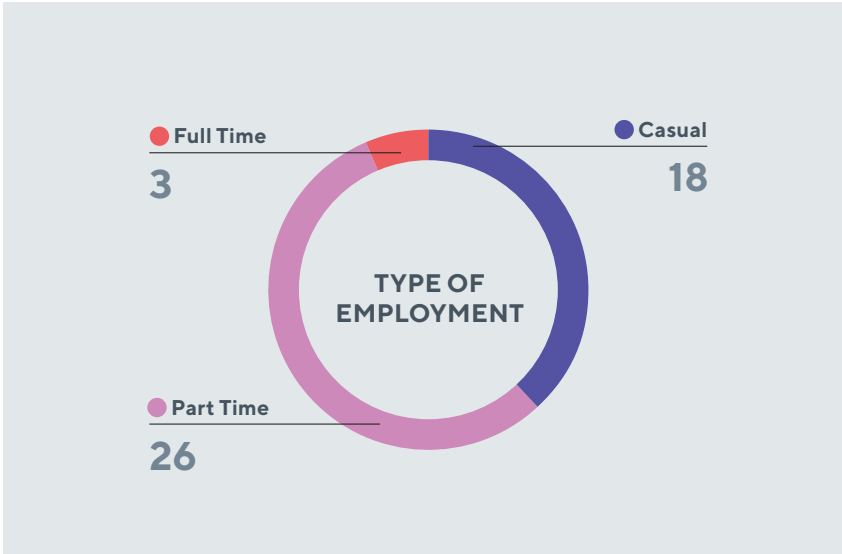
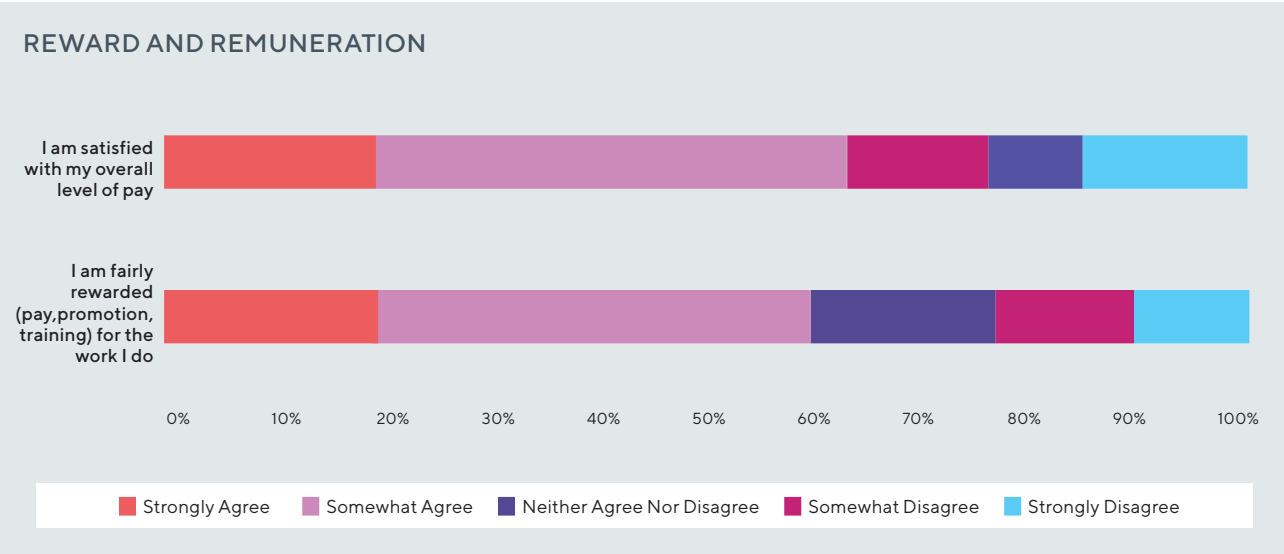
Managers and support workers both identified a need for up-to-date and accurate information on their pool of available casual workers, as well as better systems and processes around maintaining lists.

It’s just a fear of losing the job because things [have] been up and down [the] last couple of years [with] Covid ... That’s why: it’s just the insecurity of the jobs that is telling me in my mind to hold two jobs.

that’s making me feel a ... sense of belonging, you know. And it’s good to be secure. You need that, you know ... because casual is very hard, one day you work, then next week you don’t ... you cannot do anything [about it]. But being permanent, it just make[s] you feel like, you know, they do care ... so I’m happy here.

Overall, interviewees who were employed as permanent staff disliked the use of casuals in their workplace. One survey respondent requested ‘more permanent staff on the team’. Another DSW felt the perpetual churn of casual workers in residential settings was a significant problem as it is difficult

Most DSWs preferred the consistency and security of full-time or permanent part-time work, however, some preferred the flexibility that casual work offered, and the ability to combine work with family and caring responsibilities.



Engagement and Motivation

The survey and interview data revealed that the vast majority of DSWs:

- are passionate about their work
- feel that their work is meaningful
- value making a difference in their clients' lives
- find their work to be rewarding
- enjoy the interaction with clients
- are motivated to work in a caring role

The clients and the relationship that I have with them and just making a difference in their life helps [to] make a difference in my life.

Motivations

DSWs interviewed as part of this project cited their compassionate and empathetic personality traits, as well as their personal preference to work in a caring role, as their primary reason for seeking employment in the sector:

More than one interviewee shared that they had turned down higher-paid jobs in other fields to pursue disability support work because of the personal rewards it offered and the chance to make a difference in someone else's life:

I've got a desire to help, so I thought I might put that to good use and join as a [disability] support worker. ... [The work is] most enjoyable. I find I get satisfaction from being of help to people to make a difference in their lives. ... I can support them and see that, from supporting them, it makes their life more enjoyable ... happier. Yeah, it makes me happy, too.

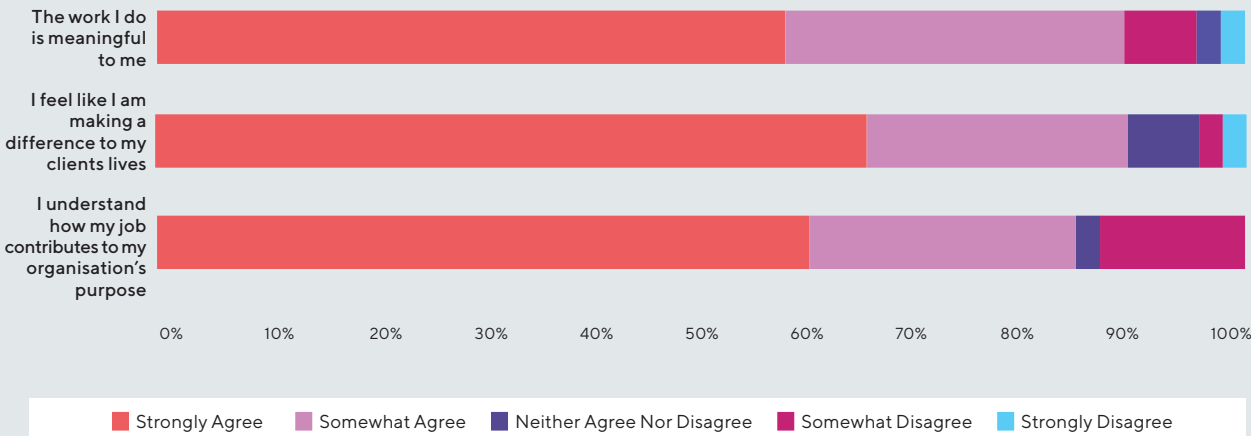
I want to work [as a DSW] for the lower rate because it's the work of my heart and I value working with [the clients]. ... [They] are amazing and wonderful, and they're just doing what they do and being who they are ...

One interviewee explained that just one support worker had the ability to make a positive impact in a client's life, by helping them to achieve their goals, to be independent, and to be happy.

Meaningful work

Eighty-nine per cent of respondents reported that the work they do is meaningful to them (N: 40), and they feel like they are making a difference in people's lives (N: 41). Eighty-four per cent of respondents (N: 38) agreed that they understand how their job contributes to their organisation's purpose.

ENGAGEMENT AND MOTIVATION



On the other hand, some interviewees were motivated to become DSWs because they were unemployed and/or had difficulty finding work elsewhere. Several recent entrants were mystified as to why some co-workers had chosen to work in a caring role when their attitude to their support work did not align with the client-focused, person-centred approach of both their employer and the disability sector more broadly.

Some suggested that 'psychometric testing is a necessity when hiring staff to work with a vulnerable cohort', as a lot of unsuitable people were working as DSWs. In their opinion, employers needed to be pickier regarding the DSWs they recruited. They felt that good people were needed in the sector rather than simply workers to fill shifts. One interviewee confided that they could tell within five minutes of speaking to a co-worker whether he or she really cared about the work or was simply doing a job for money.

Enjoyable aspects of work

Survey respondents identified a number of aspects about their job and work experience that were positive or enjoyable. A large proportion of respondents reported that they like the clients that they support (85%, N: 40) and they like making a difference to people's lives (77%, N: 36). Seventy per cent of respondents reported that they like the people they work with, are passionate about working in the disability sector, and like to help people. In regard to pay and conditions, many respondents ranked the pay/salary package options (60%, N: 28) and the hours (55%, N: 26) as positive aspects of their role.

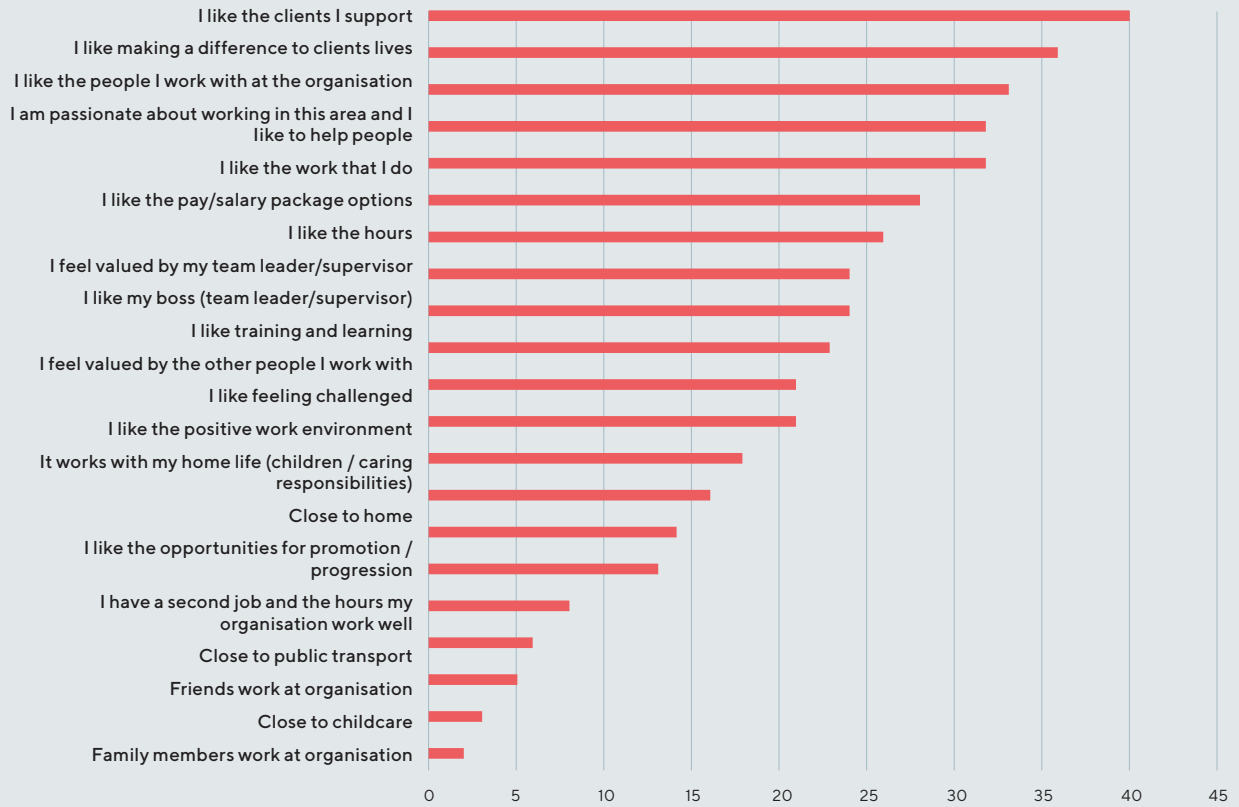
Other positive aspects of work cited by survey respondents included:

- Flexibility (N: 2); and
- Challenging themselves professionally and applying knowledge (N: 1).

I feel it challenges me in the area of understanding and supporting clients behavior tendencies and my capacity to support positive outcomes for them, it also may provide a pathway from my current study area of psychology towards behavior management or help understand behavior generally by challenging my capacity to understand people's individual drivers, triggers and the complexity of that. - SURVEY RESPONDENT

Interviewees most often described the interaction with clients as the most enjoyable aspect of their work. They valued the one-on-one, person-centred care that involved spending quality time together doing a puzzle, watching a movie, having a cup of tea, going shopping or bowling, or engaging in an outside activity or excursion.

ENJOYABLE ASPECTS OF WORK



Organisational Structure and Culture

Feeling supported

Over 70% of staff felt that they were supported by their organisation and their supervisors (73%, N: 33). However, there were a number of participants who do not feel supported by their organisation (20%, N: 9) or supervisor (18%, N: 8). There were also some variances between different segments of the survey population. For example, among casual staff only 59% (N: 10) felt supported by their supervisors and only 64% (N: 9) of respondents employed elsewhere as a disability support worker felt supported by supervisors. Survey respondents who were born overseas were more likely to report that they felt supported by their organisation and supervisor – 87% (N: 20) compared with 59% (N: 13) of respondents who were born in Australia.

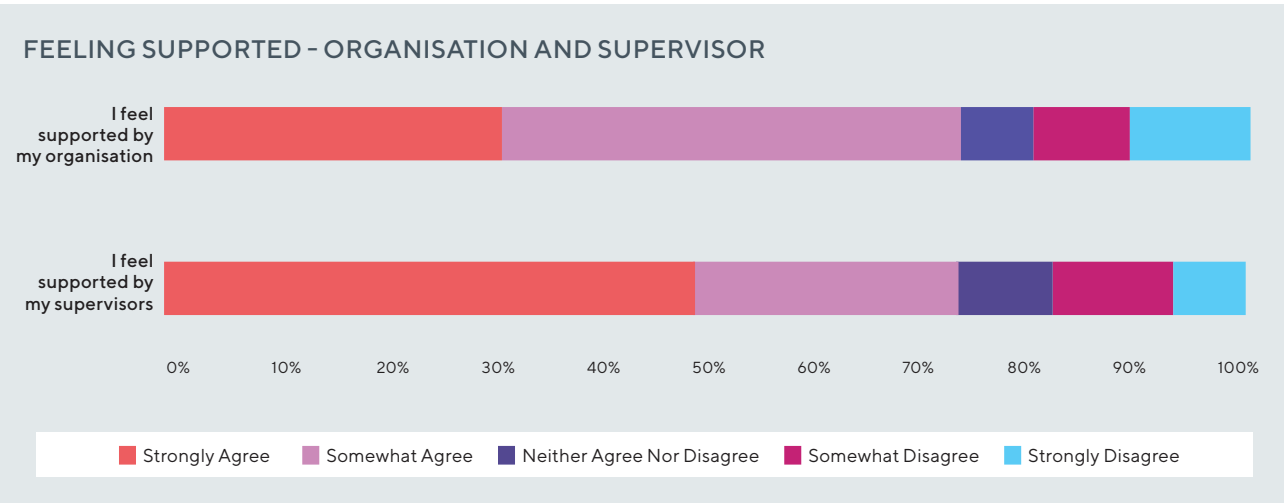
One service manager reflected that a learning culture would be beneficial, observing that the organisational culture needed to change ‘from the top down’:

If they [DSWs] make an error, it's not a learning culture; it's more of a blaming [culture]... Whereas we should work with [the DSW] and find out what's happened [and] why it's happened. Do a little bit of reflection ourselves. Did our systems fail them? Did we fail them? Or they could be just a bad seed and then you [should] move them along. ...

Look at how we communicate. ... The culture needs to change from the above and be genuine. I think that's what the organisation is missing. We're very kind to our clients, but to the staff, either you like them or you don't, and it's no in between. And if you don't like them, they're gonna know about it, which is sad.

Another DSW thought her organisation 'should be collaborative. They should lift and support their workers. Instead of, you know, just ploughing through people because they're chronically short staffed'. They should:

have actual programs that are maybe visible on the wall that are really easy to follow. ... I think some very targeted programs that work and for those and structure to implement them, but it has to be simple because you've got unskilled and engaged workers, but even them ... everyone wants to have a good day at work. ... So, it's just getting enough infrastructure in place to change it ... They need a functional targeted approach, you know with simple functional programs that engage the worker with the client, so they're not just sort of left to their own devices, you know, and the accountability as well.



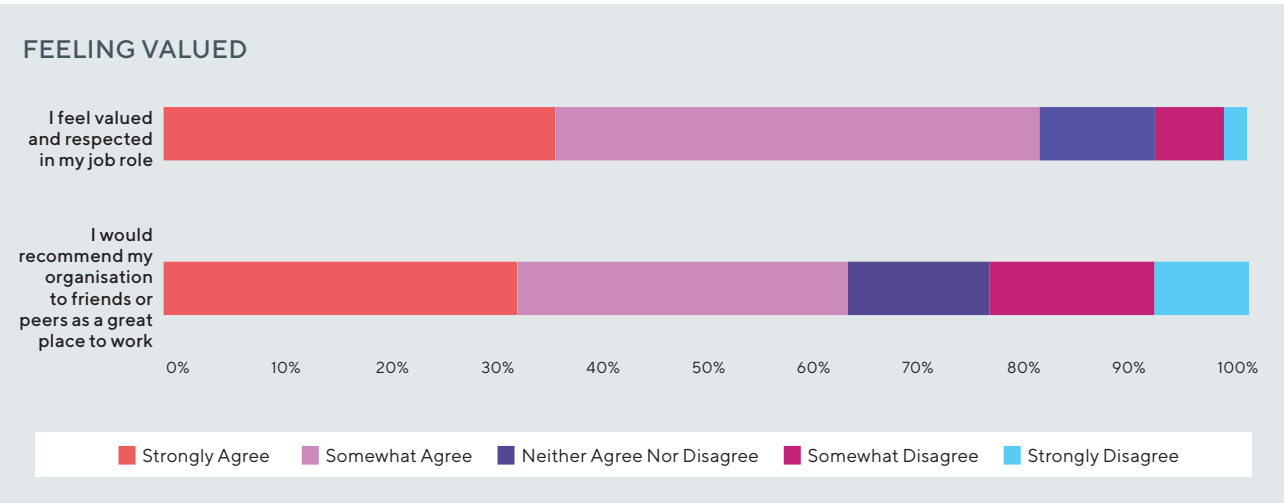
Feeling valued

One DSW observed that ‘I get the feeling sometimes I’m just the number. Like a person to fill a seat. ... I get that feeling because again, the communication isn’t as I would expect between myself and the line manager. I would expect more interaction when I’ve got problems.’

Several other interviewees also felt undervalued. ‘I would love them to appreciate staff more because this job we’re doing, it’s not that easy,’ remarked one DSW. Another interviewee felt that positive feedback and appreciation not only increased their self-esteem but also motivated them to work harder and stay in their current position.

One manager argued that the key to strengthening the workforce and improving retention for DSWs was:

just really [about] being recognised [and] appreciated. ... If people put in the hard yards and they're continually ... picking up the pieces and they're maxing themselves out every month, [then] I think there should be ... [an] incentive, like a bonus. [It] doesn't matter how small it is, it can be like a \$20.00 gift card ... If they [DSWs] are showed that they're appreciated that way, I think we'll have a stronger workforce. People wanting to work.



Supervision

In this research project, a significant number of DSWs reported that they did not receive regular supervision. Several interviewees stated that group supervision meetings which were scheduled monthly or bi-monthly often did not go ahead, and that one-on-one meetings took place 'very rarely' and then only if the need arose.

Most interviewees described their line manager as someone who was approachable with an open-door policy, however, many DSWs acknowledged that their supervisor was under immense workload pressures and there was rarely time for a scheduled one-on-one 'reflection and development' supervisory session or their annual performance review.

Several interviewees emphasised the difficulties inherent in knowing who exactly is in their team and providing regular and adequate supervision to a transient and fluid workforce of DSWs who are often:

- casually employed; and
- work across two or more locations.

It is challenging for a disability organisation to schedule non-client-facing work shifts for casual staff. While casual employees are encouraged to attend team meetings and other activities, the priority is client support work. One manager highlighted that casual staff would benefit from participating in team or organisation-focused meetings, however, they are unlikely to attend due to a number of factors, including work responsibilities at another location or organisation.

Nearly all interviewees felt that they would like more time with their supervisor, and this was particularly the case for casuals. Casual staff were least likely to receive one-on-one support from their line manager or supervisor.

Several DSWs interviewed reported very positive experiences with their supervisors:

We have [an] amazing area manager, amazing, amazing ... and you feel supported and when you write some problem ... and I do raise a lot of problem[s], trust me ... I always feel that they hear me and do something [to address] the problem that I raise or the feedback that I give. So yeah, that's really good.

And:

I find our manager very good. ... Any problems or issues [I have], I find the managers always approachable and can always give me advice to deal with issues.

One survey respondent felt they "needed [t]o be supported by [my] Supervisor", while an interviewee highlighted the poor retention rates among team leaders:

[I]f you look at the turnover of supervisors. It's just a complete nightmare, which is a real shame.

One service manager observed that the key to good supervisory support was having an open-door policy and building up a sense of trust with one's staff:

That has helped in all the houses I've managed ... and people feel comfortable coming to you if they've got an issue. Whereas, in the past ... They were scared to address the issues, so the issues ... built up and that's why then we had big turnover of staff ... I know myself, when I was a DSW, you know, if you don't have a service manager that you can approach, if something goes wrong, [then] you get anxiety ... So that's the difference there: being listened to.

Several supervisors interviewed argued that managers with experience of support work – those who had worked their way up the ladder from DSW to a managerial role – made the finest supervisors: it was beneficial to their relationship with staff because they had an intimate knowledge of disability support work and could build trust with DSWs. In contrast, managers who had not worked their way up were perceived by some interviewees to be very bureaucratic in their approach:

It's more an admin role. There's no experience. [There's less empathy] because they don't understand what it's like to be on the floor. ... it's just very clinical, you know. ... [They're] maybe not as approachable because they don't understand. ... [If] you haven't worked your way up ... if you don't understand [DSWs], how are you going to manage them if you've never worked on the floor, never done a peg feed or managed the seizure of a customer? How are you going to help your staff?

Organisational structures, systems and support

When asked what their employer could do to improve their work life, several survey respondents answered that they needed '[m]ore support from management' and '[m]anagement needs to be more responsive to staff.'

Regional interviewees (both managers and DSWs) reported feeling less supported and more isolated than others. One felt their organisation was a bureaucracy. Another believed their employer provided the time and support to staff that was in its capacity as a disability organisation.

One interviewee felt that their organisation needed to be more compassionate to staff to improve retention rates. They cited the example of an unwell DSW, with no family in Australia, who lived in constant fear of losing his job:

We're not kind enough. ... Look at what he's given you. He's done everything. [At the] drop of a hat, he will pick up shifts and most of my staff will pick up shifts here. So, I think it's be a little bit kinder and look at the situation individually. And then I think, once you do that, staff will stay.

One manager felt that their organisation's unclear systems were the main factor in the high turnover rates of DSWs. In their opinion, support workers experienced annoyance and frustration because they did not understand what was going on or whom to get answers from, and so they left. Several managers reported struggling with unclear systems and organisational bureaucracy:

So, if I'm stuck on something and I need support – my group manager's very good – but say if I have to go to another department, for an example. ... It can take three weeks ... so that sort of thing is frustrating. ... They might say "contact this person. Contact that [person]," then that person will say "Contact that person". ... Or they can take a while to get back to you.

And:

I find that a lot of times I'll try and ask somebody a question and I'll get told that I've asked the wrong person. You don't get told who you need to know to ask questions from. I think information doesn't get passed on correctly through the different departments, so you don't know unless you keep asking and then somebody might tell you. You know, we need someone that we can just go back to and say, "How do I do this?" And that person can ... point us in the right direction to go and ask and ... I don't feel we have that resource to go to. I do tend to ask fellow service managers that I'm familiar with, but even they don't always know things either. Yeah. So, I find it very difficult to do my job correctly because I don't know a lot of things I need to know to do.

Some interviewees reported that at times there may be no supervisor working in the Residential House or cluster of units that DSWs are working in.

Alternatively, if a DSW is providing in-home care or working as part of the Community Inclusion team, supervisors might only be accessible by phone:

Let's say my line manager is sick, right? And their phone isn't available. I don't know who the next line manager is and, again, this is the problem with the internal training from the worker's point of view. ... in theory the line manager should be accessible, but they're overworked because they're looking after so many people and they're not always working. So, it's confusing from my point of view who actually [is contactable].

Several managers spoke about the challenges involved in navigating internal structures and systems, including clarity around where and from whom to get assistance with routine questions.

Some email communications from HR, team leaders and supervisors were variously described by several interviewees as 'nasty', 'aggressive', 'threatening' and 'offensive' in tone. One manager related that their staff felt harassed by HR regarding compliance around NDIS, Working with Children checks and COVID-19 vaccinations:

I've lost a few staff. ... they weren't happy with the process and the way it was executed by the HR team. It was the language [around COVID-19 vaccinations]. It was the aggressiveness.

Several survey respondents also expressed their disappointment with the availability and responsiveness of managers and supervisors:

When I raise a point of concern with my Supervisor, I expect at least an acknowledgement of receipt.
- SURVEY RESPONDENT

They [managers] don't respond to my emails or calls most of the time. That's been disap[p]ointing for me being so new in the industry.
- SURVEY RESPONDENT

(88%, N: 15) and respondents who work in community settings (80%, N: 8). In contrast, the proportion of respondents who felt supported by co-workers was lower among metro respondents (64%, N: 18), respondents who work part-time (62%, N: 16), respondents who work in residential settings (67%, N: 20) and respondents employed elsewhere as a disability support worker (60%, N: 9).

One manager observed that despite having an open and supportive team, they were supportive to a point and within capacity as well. One support worker commented:

I think [my employer] does everything they can to orientate you and to give you induction and things like that. But I wasn't really prepared for the staff. ... They're just not very welcoming. A lot of them have been there for a very long time ... [and] I found the staff quite unaccepting of me. ... I just feel really unwelcome at work. And they [my employer] know this is a problem.

One former DSW was disappointed in their disengaged co-workers who spent their time gaming on their smartphone during a support shift at a day centre:

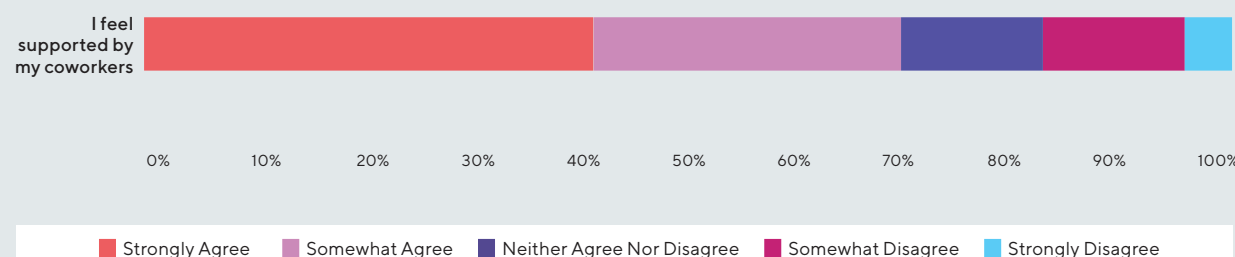
I'm not intimidated by dysfunctional workers. I'm there for the client. But younger workers coming in aren't able to do that. They're gonna get intimidated before you know it. ...

This interviewee described the work as 'exhausting' and noted that '[y]ou hardly have time to do your notes'.

Effective co-workers

Seventy per cent (N: 32) of survey respondents reported that they felt supported by their co-workers with 17% (N: 8) disagreeing. The cohorts most likely to report that they felt supported by co-workers were regional respondents (92%, N: 12), respondents employed as casuals

FEELING SUPPORTED - CO-WORKERS



Unhelpful, disengaged, inadequately trained or dysfunctional co-workers posed a significant challenge for many of the DSWs interviewed as part of this project. One DSW reported feeling so dispirited and unsafe by the behaviour of their colleagues that they were thinking of quitting their job soon:

[Other staff members] leave me feeling unsafe ... because ... they have their earphones in all the time. They're on their phone all the time and they don't do their job, and when you ask them to do something [they] act like I'm invisible ... I'm just finding it really stressful and unsupportive. ... this is like the truth of ... why you get disheartened, and you start feeling more stressed about it.

Another DSW described stories of neglect and co-workers 'tak[ing] shortcuts rather than doing things properly'. Cutting corners was possible with non-verbal clients as they were not able to complain, so some DSWs took advantage of this:

You still see a lot of neglect in disability, and that's a shame. ... that was my first big challenge that I had to just overcome [when I first started] and say [to myself], "OK, that's OK, you do your best. Don't worry about the others". Yeah, the neglect, [it was] something that I had to deal with a lot at the beginning. Not anymore, luckily ... Old staff were stood down. Yeah, it's all fresh here.

Recently hired DSWs repeatedly referred to co-workers whom they felt had worked there too long and were doing things in 'old school' ways:

I think it's when ... you have someone who's been there for many years and they're not a team player and quite possibly they need retraining, and their ideologies and thoughts are not aligned with the current present-day person-centred [approach]. ... I find that a problem ... I find it disturbing that some people have been there ... for too long. ... They limit food to some of the residents because they believe they shouldn't be having this. Their mindset can be that they don't need that special chair or that special thing ... and it's just a mindset that doesn't go with the current program, and I just found it hard to believe that these people can be there for years and years with this same outlook and not have any refreshers ... That's concerning.

Several interviewees concurred with one survey respondent who felt that disability organisations needed to retrain long-term employees and 'help older care providers learn the newer person-cent[re]d approach'. One manager felt that their biggest challenge as a supervisor at a residential house was 'ensuring that we have qualified, engag[ed] staff that know what they're doing':

There's a couple of [support workers] that have been here since day dot and ... there's a bit of a culture here of we've got people that are very task orientated as opposed to you know that nice [empathetic, client-centred approach] ... And I don't know how to instil that in someone, like, I've tried. You know, what can we do to make sure that we are engaging more?

As one interviewee related:

I'm very much interested in shifting the work culture because I'm [an] advocate ... So, I have no problem speaking out and standing up, especially for people who are so vulnerable.

Organisational Safety

Occupational health and safety was identified by some interviewees as a significant issue, particularly those working in residential houses supporting clients with behaviours of concern. Participants identified several factors as undermining workplace safety, including staff shortages, high workloads, stress and burnout, and bullying and discrimination.

Staff shortages

Chronic staff shortages and working with inexperienced agency staff were two of the most cited workplace challenges for both survey respondents and interviewees. All the service managers interviewed as part of the project had 'stepped onto the floor' to work support shifts and sometimes overnight shifts. They reported that this was a common scenario across all residential houses due to staff shortages. This meant that they were often working two jobs and had difficulty completing their own administrative work:

we can't even get agency [staff], like, we're that stretched. I mean, I had to do a shift yesterday. An overnight shift 'cause I had no staff and managers are doing that. ... It's not just me. I know a few managers had to switch computers off and go work the floor and then catch up on their admin.

DSWs interviewed related that there are never enough staff and that this affected staff ratios and increased the burden of work for the remaining staff. For example, two support workers might be working a shift at a residential house where there are supposed to be three workers on the floor. One DSW lamented that there was no compensation in pay, despite the increased workload.

Most interviewees attributed the protracted staff shortages to the COVID-19 pandemic and current wave of influenza infections, and viewed these employee absences in the broader context of nation-wide staff shortages. One interviewee remarked, however, that they had noticed that there were never staff shortages on weekends at their high-intensity service, due to the penalty rates paid on those days.

Many survey respondents felt that the single most important thing their organisation could do to improve their working life was 'ensure enough staffing', 'increase [the] number of carers', or 'employ more staff'. Several managers and supervisors who were interviewed pointed out that the funding model of disability organisations does not support this. They felt there was simply no money to employ more staff and some disability support organisations were under incredible financial pressures and struggling to survive:

So, there's only so much time in a day and because of how funding works, we can't have more people come into the team because the funding doesn't support it ... I can see the constraints, but it's kind of a Catch-22 ... there's only so much you can do with time.

Workloads and time pressures

In this research project, interviewees recounted that some DSWs were working 100 hours per fortnight, and one had worked 19 days in a row without a break. Several support workers described regularly working a shift without taking their 30-minute break entitlement because the work demands were too high, or that they could not leave work because there would be no-one there to watch the clients. Others felt pressured to work double shifts and overtime due to staff shortages and the lack of agency staff available:

[T]hose people need you, you know, you can't just go home. ... The more you work with [the clients], there's a connection. ... I feel ... the responsibility you have to do overtime ... It's very tough.

'There's never enough time' was a common refrain from interviewees. A few managers felt that their unmanageable workloads affected innovation and program development:

We struggle to have time to get paperwork done. We struggle to have time to sit down and have a conversation and resolve maybe issues or thoughts or better ways to support the customers. We're just pushed all the time to just keep being there and to help the customers.

Administrative burdens and new skills and competencies required under the NDIS

One survey respondent's plea that their employer 'reduce the current paperwork load on staff' was echoed by others throughout the data collection process. Interviewees spoke repeatedly of the struggle to find the time to complete their paperwork.

Some interviewees reported that administrative burdens diminished the time available for interaction with their clients. Several expressed regret that they were not always able to spend enough time with clients due to being 'snowed under' with paperwork and other tasks:

There was more emphasis on getting the paperwork done and, for example, star charting on paper some resident's behaviour rather than dealing one-on-one with them as a person and ... resolving the issue. ... And I do believe that staff spend too much time in their little room doing that paperwork rather than being involved with the residents.

One manager pointed out that most DSWs entered the disability sector because they cared about people and excelled at that aspect of support work, but that did not necessarily mean that they were skilled at spending half an hour at the end of their shift typing up observations as part of a client's complex behaviour support plan or meal management plan.

Another service manager reported that:

probably the biggest [complaint from DSWs] is [that] the role has gone past just customer care for them. Years and years ago, it was just all customer [care], a file note, and sort of that's it, but now ... they're finding it hard to do their monthly individual reporting. ... There's file notes, food charts, bowel charts. ... which is necessary, but ... admin has increased also because there's [client] goal trackers through the NDIS. ... So, to do the individual monthly reporting or the goal trackers [is difficult] ... because it's nonstop because they're on the floor, and, yeah, it's nonstop.

Stress and burnout

When survey respondents were asked about the top three things that their employer could do to improve their work life, one stated that '[I would like] less stress due to [being] understaffed', while another wanted 'recognition of [the] responsibilities and stress on employees working short-staffed constantly.'

Several interviewees pointed to the fact that DSW team leaders, in particular, were frequently 'burning out' and leaving their job. One former DSW at a community hub described it as 'always frantic' and this, in turn, had a negative impact on the workplace culture:

There were never enough workers, it seemed, and the workers weren't happy about that. They were always spread a bit thin. There were no check-ins from the supervisors. Not at any time did anyone take me aside and ask me how it was going or anything like that. There was a lovely worker who ended up being bumped up to a supervisor ... and he got burnt out. He was just spread to within an inch of his life. You could see it. ... It's just a whole chronic situation. You know, it's a perfect storm ...

Some survey respondents and interviewees felt that new and inexperienced DSWs were suffering stress and burnout due to inappropriate client-support worker matching. One team leader felt that many new DSWs were leaving because they were rostered on to support high-intensity clients with behaviours of concern. The interviewee felt that these recent entrants were taken advantage of because they lacked the confidence to say 'no' to shifts with challenging clients. Similarly, one survey respondent felt that their organisation needed to:

Match difficult clients with carers with the skills that are able to manage them easily, express they can do so and have a rotation of staff as needed. Support DSW[s] ... request[s] to not work with particular clients if behaviours are too stressful or if DSW[s] express that the capacity to cope is over threshold of a learning challenge or coping. This will prevent burnout and leaving jobs.
– SURVEY RESPONDENT

Discrimination, bullying and harassment

The research found that some participants had experienced or witnessed discrimination, bullying and harassment. Some participants raised concerns about aggressive clients and dysfunctional co-workers. One survey respondent felt that their employer needed to '[b]e more professional and support staff grievances and [take] bullying issues seriously'. A few interviewees spoke of discrimination in their workplace. One service manager described the discriminatory manner in which 'managers approach the staff' as a main factor impacting staff turnover of DSWs:



Especially staff that have come from overseas and English may not be their first language. ... I think as managers we need to get to know that person because they're highly educated, like, my staff here ... they've got more qualifications than I have ... PhDs and Masters, but because of their situation, they haven't been able to bring what they have overseas here ... and it's not acknowledged here.

Nearly one-fifth of survey respondents (19%, N: 9) disagreed that discrimination is not tolerated, with 6% (N: 3) of these strongly disagreeing. Similarly, 17% of survey respondents (N: 8) disagreed that bullying and harassment are taken seriously, with 9% (N: 4) of these strongly disagreeing. Concerns about discrimination and harassment appeared to be higher for survey respondents who were born in Australia, with 32% (N: 7) disagreeing that discrimination is taken seriously and that bullying and harassment are not tolerated.

Among the survey respondents who are no longer employed by the partner organisation, two strongly disagreed that their organisation does not tolerate discrimination with one strongly agreeing and one providing a neutral response.

Eighty-three per cent (N: 24) of metro respondents agreed that discrimination is not tolerated and 76% (N: 22) agreed that bullying and harassment are taken seriously, but substantially fewer regional respondents agreed (62%, N: 8).

Over 80% of respondents who work in residential settings agreed that discrimination is not tolerated (84%, N: 26) and that bullying and harassment are taken seriously (83%, N: 25). Significantly, however, 40% (N: 4) of respondents who work in community hub or day service settings disagreed that discrimination is not tolerated and 30% (N: 3) strongly disagreed that bullying and harassment are taken seriously.

Aggressive/abusive clients

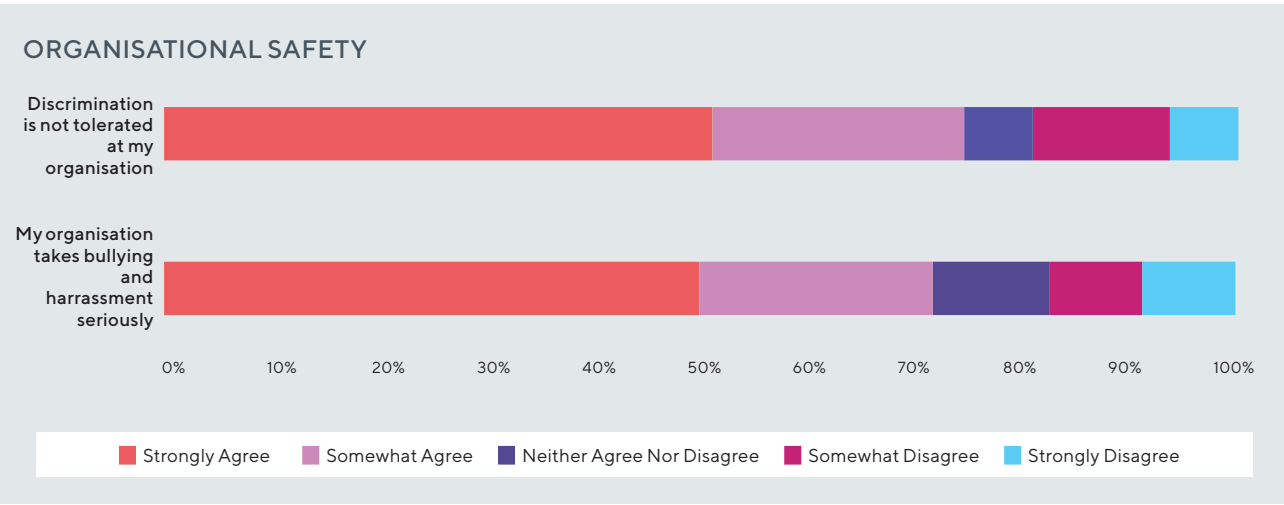
The DSWs interviewed for this project almost universally indicated that working with the clients was the most enjoyable aspect of their work (see '5.2 Engagement and Motivation' above), however, those same clients were also perceived to be one of the most difficult aspects of their job. Clients were routinely described as 'very challenging'. Interviewees detailed the physical dangers of their work, including being hit by a client or an incident where a DSW had a television thrown at them. Survey respondents wanted 'greater protection for staff from potentially a[g]gressive/abusive residents' and 'plans/[p]ractices [put] in place to protect staff who are working with customers with [behaviours of concern]'.

DSWs from culturally and linguistically diverse backgrounds reported being subjected to racism, aggression and verbal abuse from disrespectful clients who called their support worker 'useless':



Sometimes it could be there is this client you work with, support, so he doesn't like people from, you know, African origin, is always a bit aggressive towards, you know, people with dark skin. ... Whenever he sees me, sometimes he goes very aggressive ... Sometimes I try to deescalate, you know, leave his presence at that point in time. ... it's hard.

One survey respondent felt that 'buddy shifts with new clients should be mandatory' to ensure the safety of DSWs.



Job Satisfaction, Intention to Stay and Career Pathways

Several managers interviewed pointed out that it is difficult to generalise about the level of job satisfaction among recently hired DSWs due to the sheer diversity of this group and the wide range of settings and contexts in which they work. The answer was 'massive' and 'complicated' because the job satisfaction of an individual DSW depends on their personal circumstances, including their work setting, mode of work, expectations of the job versus reality, relationship with co-workers, level of supervisor support and access to training and professional development, to name but a few. The support worker who delivers in-home services by themselves, for example, would have a very different experience of work compared to a DSW working in a team environment in a community hub or residential house.

One manager believed that most of their team was satisfied with their current employer because DSWs had many opportunities to leave and seek work with another disability organisation in the current job market, where support workers are in such high demand:

I think a lot of them are [satisfied] because at this point in time, where the industry is, [if] people aren't happy, there's plenty of positions popping up elsewhere. ... [A]nd we've seen that, we've seen a lot of that. So, I think the staff that are currently working and have stayed within their roles are satisfied because they have a passion for their jobs.

An interviewee reflected on the high levels of staff turnover in their department and identified two distinct types of support workers: those who stayed for less than a year and those who were in it for the long haul, perhaps even the rest of their working life. Moreover, there was a perception among some interviewees that, while many DSWs were suited to their jobs and were motivated by admirable reasons, others did not have the right level of skill or commitment.

One manager concluded that the type of DSW who stayed in their department long term was 'a higher level of worker':

I think a lot of turnover that we have is people [who] just aren't built for that type of work. They find it really hard.

Intention to stay

Most interviewees were eager to continue working as a DSW for their current employer, despite various challenges faced in their daily working lives. Only two DSWs were considering leaving their job: one due to apathetic and disengaged co-workers, and the other because they were seeking the consistency of permanent part-time work and too few shifts were being offered to them as a casual employee. The survey data tells a different, more worrying story, however.

Survey respondents were asked how long they could see themselves staying at their organisation. More than one-third of respondents (35%, N: 16) indicated that they only intended to stay with their current employer for up to 12 months, including 16% (N: 7) who intend to stay 0 to 6 months.

Another 35% of respondents (N: 16) indicated that they intend to stay in the sector between 2 and 4 years. Twenty-nine per cent of the respondents indicated that they intended to stay for over 5 years, including 9% (N: 4) who intend to stay for 20+ years.

Survey respondents who were born in Australia were more likely to report that they only intend to stay for up to 12 months – 50% (N: 11) compared to 22% (N: 5) of respondents born overseas.

The five survey respondents who are no longer employed by the partner organisations listed multiple reasons for leaving the organisation:

- I wanted to feel safer at work (N: 3)
- I wanted a job closer to home (N: 2)
- I wanted more shifts (N: 1)
- I wanted greater work/life balance (N: 1)
- I wanted more recognition for the work I did (N: 1)
- I wanted to feel less tired/exhausted by work (N: 1)

- I was studying / returning to study (N: 1)
- Travel (N: 1)

Of these, three survey respondents specified other reasons for leaving, namely:

- 'I did not feel safe because of one staff and the supervisor was not willing to help. I asked for a change of location but she will rather want me resigned than stay'
- 'One of the staff became terrible at work and he was in the supervisor camp. Office

- became toxic'
- 'Mental health'

Respondents were asked if they were to leave their current employer, would they continue to work as a disability support worker. Fifty-nine per cent of respondents (N: 27) intend to continue as a disability support worker, 22% (N: 10) said they did not intend to continue as a disability support worker and 20% (N: 9) preferred not to say.

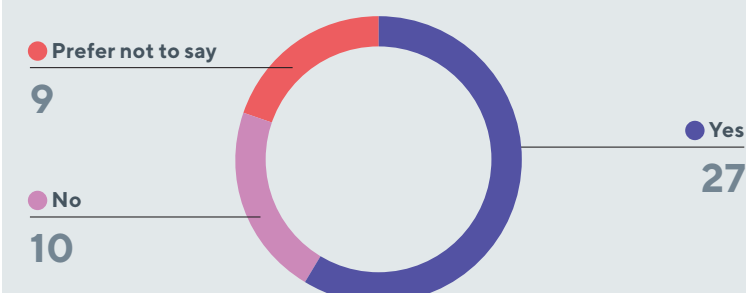
KEY STATISTICS – INTENTION TO STAY WITH CURRENT EMPLOYER

- More than one-third of respondents (35%, N: 16) indicated that they only intend to stay with their current employer for up to 12 months, including 16% (N: 7) who intend to stay 0 to 6 months.
- Thirty-two per cent of part-time respondents (N: 8) intend to stay for up to 12 months.
- Thirty-nine per cent of casual staff (N: 7) intend to stay for up to 12 months, including 22% (N: 4) who intend to stay for 0 to 6 months.
- Forty per cent of respondents from residential care settings (N: 12) intend to stay for up to 12 months, including 17% (N: 5) who intend to stay 0 to 6 months.
- Twenty-two per cent of respondents from community hub or day service settings (N: 2) intend to stay for up to 12 months, while the remaining 78% (N: 7) intend to stay for 2 to 4 years.

INTENTION TO STAY WITH CURRENT EMPLOYER



INTENTION TO STAY AS DISABILITY SUPPORT WORKER



Factors influencing decision to leave

Survey respondents identified a number of factors that would influence their decision to leave their organisation. These included factors related to pay and conditions, as well as personal circumstances and wellbeing. A desire to make more money was the factor cited by the most respondents, followed by a desire for career change and career advancement.

Other factors cited by survey respondents included:

- Entrepreneurial aspirations, e.g., 'To develop my own unique role/ service in disability se[r]vices'.
- Desire to pursue an alternative career and interests – e.g., 'Would like to be full time musician and artist'.
- Frustration at organisational systems and processes – e.g., 'I would like to not have to chase up my pay every week as I was being consistently underpa[i]d and management kept saying they would fix it but never did'.

Career pathways

The lack of suitable career pathways for both new and experienced disability support workers emerged as an issue of fundamental importance for DSWs and their managers in the survey and interview data for this project. Only one survey respondent who is no longer employed by the partner organisation strongly agreed that they saw a path to advance their career with 60% (N: 3) disagreeing and one providing a neutral response.

'I would like better skill[s] training and career advancement,' commented one survey respondent, while another wanted a 'clear path to promotion' mapped out for them. Yet another sought 'some notion of how career progression can occur (seminar? information session? training offered indiscriminately to increase skill levels across the workforce?)'.

Several interviewees noted that the problem stemmed from the fact that career advancement options in the disability support workforce tended to be DSW to manager, with

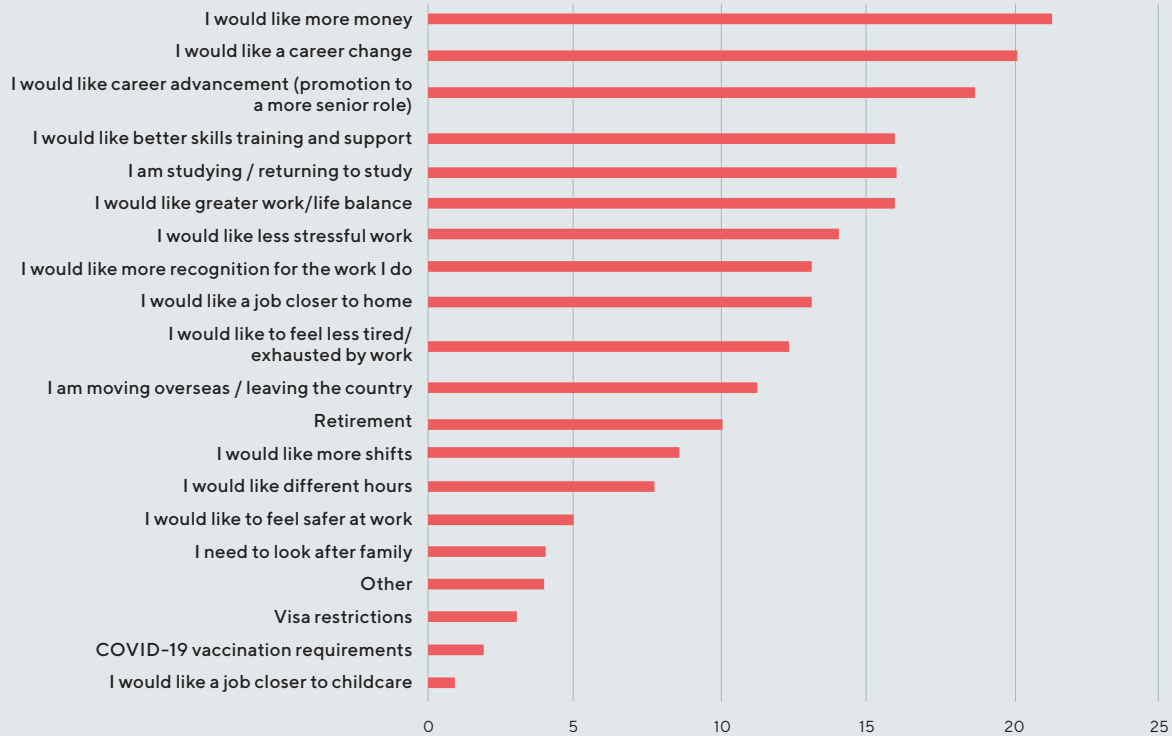
very little else available. It was felt that, there is no scope to acknowledge and reward exceptional DSWs who have experience and extra training.

Despite these obstacles to promotion, when asked about their future plans and long-term career aspirations, many DSWs aspired to advance to more senior roles in the disability sector, such as case worker, support coordinator, shift supervisor, team leader or training to be a registered nurse in a disability setting.

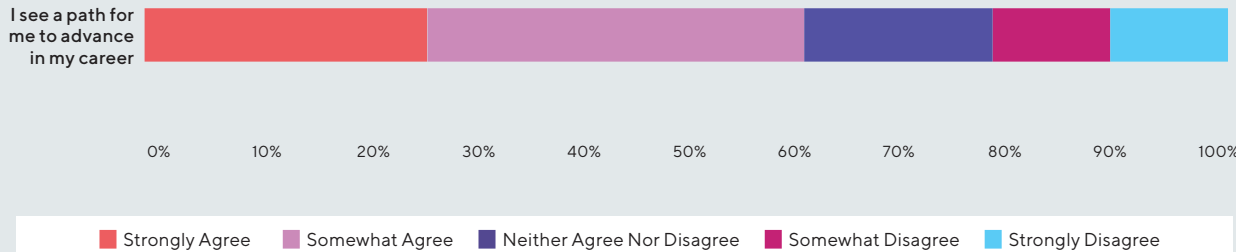
KEY STATISTICS – CAREER PROGRESSION

- Only 61% of survey respondents (N: 28) reported that they see a path to advance their career. Respondents who were born overseas were more likely to report that they see a path to advance their career – 75% (N: 18) compared to 45% (N: 10) of respondents born in Australia.
- Metro respondents were more likely to report that they see a path to advance their career. Seventy-one per cent of metro respondents (N: 20) saw a career path compared to 46% (N: 6) of regional respondents.
- Only 57% of residential workers (N: 17) and 50% of community hub or day service workers (N: 5) saw a path to advance their career.
- Seventy-three per cent (N: 11) of respondents employed elsewhere as a disability support worker agreed that they see a path to advance their career, but only 55% (N: 17) of respondents not employed elsewhere agreed that they see a path to advance their career.

FACTORS THAT WOULD INFLUENCE DECISION TO LEAVE



CAREER PATHWAYS



Leadership training for DSWs

One recent entrant interviewee observed that disability support work is beset with inexperienced team leaders because no DSWs want to fill that role: the pay is too low and the workload is unmanageable, so it is a difficult position to fill with capable and experienced staff members.

Several interviewees, particularly managers, thought that employers themselves needed to invest in a better outcome, since the current funding model does not support it.

One manager observed that:

there needs to be a higher focus on the building of disability support workers to transition to being the next line of management, so they can be the next generation of management, because I think a lot of disability support workers don't realise that they can move into that space.

I don't think we train disability support workers on how to supervise others. We train managers how to do it, but ... it's not until you are a manager that you're trained how to do that. ... So, I think we kind of need to go to the bottom level and go "OK, let's have the 'how to supervise staff' [training], and 'how to have difficult conversations'" and how to do all that sort of stuff for managers. So that needs to be targeted at a different level ... even if there's two modules for the training and DSWs can do module one and the managers do module two ... because that [lack of leadership training] might hold people back from going for a manager role because they're like, "I don't know what to do". ... Let's train them beforehand and make them stronger DSWs [so] that when they step into management roles, you don't have to spend the first six months training them. Like, let's partially get them there. I think it's across-the-board [training] because some people ... might not even necessarily want to go into a manager role [but] might want to build their confidence in how they interact with others.

This manager argued that further training for DSWs on the NDIS and how funding structures work would be extremely beneficial for disability organisations. For example, when DSWs are writing their client progress notes they will be more inclined to do it correctly because they understand how funding is affected (and potentially lost) if they do not work towards certain goals for the client.

A SURVEY RESPONDENT'S THOUGHTS ON CAREER PATHWAYS FOR DSWs

I've noticed that there isn't much in the way of internal training or growth [at my workplace] for DSW staff that don't have Bachelor degrees. ... I would love to have a path for growth within the company, which would recognise [upskilling] as a way of retaining staff, providing stimulation and prevent[ing] burnout and low pay as a reason to leave the industry. This [would] ... enable diversification and growth that can nourish ... staff contentment, add value to the team and [build] pathways for business and staff. ...

It could follow AQF package/level/qualification/units and add up to a qualification within a certain time frame. This makes a "job" a potential career or growth area for all and is learnt within the framework of the company. It's a sort of kudos to the old way of working your way up. Not everyone has a Uni dream but are better at on [the] ground work ... [There's] nothing worse than outgrowing all that experience and initial love of the job.

I believe this creates loyalty and life/work balance being valued in a company. It becomes a lifestyle. Family. Belonging. Community. It is [the] fabric of life.

Appendix 1: Profiles of Former Employees From Survey Data

Former employee #1

Worked part time in a residential care facility in regional Victoria for 10 months. Respondent was female, aged between 20 and 24 years, born in Australia, spoke English at home, had completed Year 12 and did not have any caring responsibilities. Respondent cited several reasons for leaving – 'I wanted greater work/life balance', 'I wanted more recognition for the work I did', 'I wanted to feel less tired/exhausted by work', 'I wanted a job closer to home', 'I was studying / returning to study' and 'travel'. Respondent provided positive or neutral responses to questions about preparedness and organisational safety. Respondent is currently working as a disability support worker at another organisation.

Former employee #2

Worked part time in a residential care facility in metro Melbourne for 9 months. Respondent was male, aged between 45 and 49 years, born in Nigeria, spoke Yoruba at home, had completed a postgraduate qualification and had caring responsibilities. Respondent cited two reasons for leaving 'I wanted to feel safer at work' and 'I did not feel safe because of one staff and the supervisor was not willing to help. I asked for a change of location but she will rather want me resigned than stay'. Respondent provided positive or neutral responses to questions about preparedness and organisational safety. Respondent strongly disagreed that they felt supported by their organisation and their supervisor.

Former employee #3

Worked as casual in clients' homes in regional Victoria for 4 months. Respondent was male, aged between 50 and 54 years, born in Australia, spoke English at home, had completed a Certificate qualification and had caring responsibilities, a son with autism. Respondent cited three reasons for leaving 'I wanted to feel safer at work', 'I wanted more shifts', and 'I wanted a job closer to home'. Respondent strongly disagreed that they felt supported by their organisation and their supervisor and somewhat disagreed that they felt supported by their co-workers. Respondent strongly disagreed that they saw a path to advance their career, that discrimination is not tolerated, that bullying and harassment is taken seriously by their former employer, that they felt valued and respected, and would not recommend their organisation as a great place to work. Respondent is not currently working as a disability support worker in another organisation.



Former employee #4

Worked part time in a residential care facility in metro Melbourne for 9 months. Respondent was male, aged between 45 and 49 years, born in Nigeria, spoke Yoruba at home, had completed a postgraduate qualification and had caring responsibilities. Respondent cited two reasons for leaving 'I wanted to feel safer at work' and 'One of the staff became terrible at work and he was in the supervisor camp. Office became toxic.' Respondent strongly disagreed that they felt supported by their organisation and somewhat disagreed that they felt supported by their co-workers and their supervisor. Respondent strongly disagreed that they saw a path to advance their career, that discrimination is not tolerated, that bullying and harassment is taken seriously by their former employer, that they felt valued and respected, that they were satisfied with their overall level of pay and would not recommend their organisation as a great place to work. Respondent is currently working as a disability support worker in another organisation.



Former employee #5

Worked casually in a residential care facility in metro Melbourne for 11 months. Respondent was female, aged between 20 and 24 years, born in Kenya, spoke Swahili at home, had completed a diploma or advanced diploma qualification and had caring responsibilities. Respondent somewhat disagreed that they felt prepared for their role. Respondent's reason for taking on the role was 'I needed a job'. Respondent cited their mental health as their reason for leaving. Respondent is currently working as a disability support worker in another organisation.

Endnotes

- ¹ National Skills Commission Labour Market Insights – Aged and Disabled Carers ANZSCO ID 4231 <https://labourmarketinsights.gov.au/occupation-profile/Aged-and-Disabled-Carers?occupationCode=4231>
- ² Baines, D., Macdonald, F., Stanford, J., Moore, J. (2019). Precarity and Job Instability on the Frontlines of NDIS Support Work, The Centre for Future Work at the Australia Institute, p. 5.
- ³ Cho, Y. J., & Song, H. J. (2017). Determinants of turnover intention of social workers: effects of emotional labor and organizational trust. *Public Personnel Management*, 46(1), p. 42.
- ⁴ One example is Healy et al.'s study of newly recruited social workers and community services workers: Healy, Karen, Gai Harrison, and Michele Foster. (2015). Job Satisfaction and Workforce Retention of Newly Qualified Social Work and Community Services Workers: An Australian Pilot Study. *Advances in Social Work and Welfare Education*, 17(1).
- ⁵ Burning Glass Labour Market Insights Database 2015–2018, quoted in Department of Social Services, *NDIS National Workforce Plan: 2021–2025*, June 2021, p. 17.
- ⁶ Victorian Department of Families, Fairness and Housing. (2021). *Understanding the workforce experience of the NDIS: Longitudinal research project: Year Three*, August 2021, p. 15.
- ⁷ National Skills Commission Labour Market Insights – Health Care and Social Assistance <https://labourmarketinsights.gov.au/industries/industry-details?industryCode=Q>
- ⁸ National Skills Commission Labour Market Insights – Health Care and Social Assistance <https://labourmarketinsights.gov.au/industries/industry-details?industryCode=Q>
- ⁹ National Skills Commission Labour Market Insights – Aged and Disabled Carers ANZSCO ID 4231 <https://labourmarketinsights.gov.au/occupation-profile/Aged-and-Disabled-Carers?occupationCode=4231>
- ¹⁰ Australian Bureau of Statistics – Labour Force Australia, June 2022 <https://www.abs.gov.au/statistics/labour/employment-and-unemployment/labour-force-australia/latest-release>
- ¹¹ Karp, P. 'As Australian job vacancies double, which sectors are facing the biggest labour shortages?' in *The Guardian*, Tuesday 19 July 2022.
- ¹² Ibid.
- ¹³ Victorian Skills Authority (2022) Victorian Skills Plan for 2022 into 2023: A shared vision for skills-led solutions, p. 3.
- ¹⁴ Cho, Y. J., & Song, H. J. (2017). Determinants of turnover intention of social workers: effects of emotional labor and organizational trust. *Public Personnel Management*, 46(1), p. 42.
- ¹⁵ Radford, K., & Chapman, G. (2015). Are all workers influenced to stay by similar factors, or should different retention strategies be implemented?: Comparing younger and older aged-care workers in Australia. *Australian Bulletin of Labour*, 41(1), p. 61.
- ¹⁶ Baines, D., Macdonald, F., Stanford, J., Moore, J. (2019). Precarity and Job Instability on the Frontlines of NDIS Support Work, The Centre for Future Work at the Australia Institute, p. 5.
- ¹⁷ National Disability Services. (2021). *State of the Disability Sector Report 2021*, p. 43; National Disability Services. (2020). *State of the Disability Sector Report 2020*, p. 49.
- ¹⁸ One example is Healy et al.'s study of newly recruited social workers and community services workers: Healy, Karen, Gai Harrison, and Michele Foster. (2015). Job Satisfaction and Workforce Retention of Newly Qualified Social Work and Community Services Workers: An Australian Pilot Study. *Advances in Social Work and Welfare Education*, 17(1).
- ¹⁹ ABS Disability and carers: Census – Information on core activity need for assistance – released 28/06/2022. See Disability and carers: Census, 2021 | Australian Bureau of Statistics (abs.gov.au)
- ²⁰ Megan J. Judd, Kate P. Dorozenko & Lauren J. Breen. (2017). Workplace Stress, Burnout and Coping: A Qualitative Study of the Experiences of Australian DSWs. *Health & Social Care in the Community*, 25(3), p. 1109.
- ²¹ Explore disability careers – <https://www.vic.gov.au/career-pathways-disability> accessed 18 August 2022.
- ²² HESTA. (2021). *State of the sector: 2021: Community and disability services workforce insights*, p. 26.
- ²³ About the Royal Commission | Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability accessed 18 August 2022.
- ²⁴ Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability, *Interim Report*, October 2020. p. 25.
- ²⁵ Ibid. p. 379

- ²⁶ Ibid. p. 379
- ²⁷ Baines, D., Macdonald, F., Stanford, J., Moore, J. (2019). Precarity and Job Instability on the Frontlines of NDIS Support Work, The Centre for Future Work at the Australia Institute, p. 4
- ²⁸ Ibid. p. 4.
- ²⁹ Ibid. p. 4.
- ³⁰ Ibid. p. 5.
- ³¹ Ibid. p. 5.
- ³² Ibid. p. 12.
- ³³ Ibid. p. 20.
- ³⁴ Ibid. p. 15.
- ³⁵ Cortis, N., & van Toorn, G. (2020). Working in new disability markets: A survey of Australia's disability workforce. Sydney: Social Policy Research Centre, UNSW Sydney. <http://doi.org/10.26190/5eb8b85e97714> p. 6.
- ³⁶ Ibid. p. 6.
- ³⁷ Ibid. p. 6-9.
- ³⁸ Ibid. p. 60-61.
- ³⁹ Ibid. p. 60-61.
- ⁴⁰ Ibid. p. 59.
- ⁴¹ Cosgrave, C., Hussain, R., & Maple, M. (2015a). Retention challenge facing Australia's rural community mental health services: Service managers' perspectives. *The Australian Journal of Rural Health*, 23(5), p. 272.
- ⁴² Ibid. p. 273.
- ⁴³ Cho, Y. J., & Song, H. J. (2017). Determinants of turnover intention of social workers: effects of emotional labor and organizational trust. *Public Personnel Management*, 46(1), 41-65, p. 44. <https://doi.org/10.1177/0091026017696395>
- ⁴⁴ Stevens, Martin et al.. (2021). What encourages care workers to continue working in intellectual disability services in England? Interview Findings. *Journal of intellectual disabilities*, 25(1), pp. 13-30.
- ⁴⁵ Baines, D., Macdonald, F., Stanford, J., Moore, J. (2019). Precarity and Job Instability on the Frontlines of NDIS Support Work, The Centre for Future Work at the Australia Institute, p. 12
- ⁴⁶ Cortis, N., & van Toorn, G. (2020). Working in new disability markets: A survey of Australia's disability workforce. Sydney: Social Policy Research Centre, UNSW Sydney, p. 49.
- ⁴⁷ Ibid. p. 51.
- ⁴⁸ Victorian Department of Families, Fairness and Housing. (2021). *Understanding the workforce experience of the NDIS: Longitudinal research project: Year Three*, August 2021, p. 15.
- ⁴⁹ Cortis, N., & van Toorn, G. (2020). Working in new disability markets: A survey of Australia's disability workforce. Sydney: Social Policy Research Centre, UNSW Sydney, p. 35.
- ⁵⁰ Ibid. p. 35.
- ⁵¹ Ibid. p. 35.
- ⁵² Cosgrave, C., Hussain, R., & Maple, M. (2015a). Retention challenge facing Australia's rural community mental health services: Service managers' perspectives. *The Australian Journal of Rural Health*, 23(5), p. 272.
- ⁵³ Ibid. p. 272.
- ⁵⁴ Department of Social Services, *NDIS National Workforce Plan: 2021-2025*, June 2021, p. 17.
- ⁵⁵ Cortis, N., & van Toorn, G. (2020). Working in new disability markets: A survey of Australia's disability workforce. Sydney: Social Policy Research Centre, UNSW Sydney, p. 69.
- ⁵⁶ Ibid. p. 62.
- ⁵⁷ Judd, M.J. Dorozenko K.P & Breen, L. J. (2017). Workplace Stress, Burnout and Coping: A Qualitative Study of the Experiences of Australian DSWs. *Health & Social Care in the Community*, 25(3), p. 1110.
- ⁵⁸ Ibid. p. 1110.
- ⁵⁹ Ibid. p. 1110.
- ⁶⁰ Ibid. p. 1112.
- ⁶¹ Ibid. p. 1112.
- ⁶² Ibid. p. 1112.
- ⁶³ Ibid. p. 1112.
- ⁶⁴ Cosgrave, C., Hussain, R., & Maple, M. (2015a). Retention challenge facing Australia's rural community mental health services: Service managers' perspectives. *The Australian Journal of Rural Health*, 23(5), p. 274.
- ⁶⁵ Lincoln, M., Gallego, G., Dew, A., Bulkeley, K., Veitch, C., Bundy, A., Brentnall, J., Chedid, R. J., & Griffiths, S. (2014). Recruitment and retention of allied health professionals in the disability sector in rural and remote New South Wales, Australia. *Journal of Intellectual & Developmental Disability*, 39(1), 86-97, p. 93.
- ⁶⁶ Victorian Department of Families, Fairness and Housing. (2021). *Understanding the workforce experience of the NDIS: Longitudinal research project: Year Three*, August 2021, p. 17.
- ⁶⁷ Ibid. p. 17.
- ⁶⁸ Ibid. p. 17.
- ⁶⁹ Ibid. p. 17.
- ⁷⁰ Ibid. p. 17.
- ⁷¹ Ibid. p. 17.
- ⁷² Adebayo, B. Nichols, P. Albrecht, M. A. Brijnath, B. Heslop, K. (2021) 'Investigating the Impacts of Acculturation Stress on Migrant Care Workers in Australian Residential Aged Care Facilities' in *Journal of Transcultural Nursing*, Volume 32: 4.
- ⁷³ Ibid.
- ⁷⁴ Deroy, S. Schutze, H. (2021) 'Factors supporting retention of health and wellbeing staff in Aboriginal health services: a strengthbased case study' in *Human Resources for Health*, 19: 35, p. 4.
- ⁷⁵ Ibid. p. 8.
- ⁷⁶ Moskos, M., & Isherwood, L. (2019). Individualised funding and its implications for the skills and competencies required by DSWs in Australia. *Labour & Industry* (Brisbane, Qld.), 29(1), 34-51, p. 38.
- ⁷⁷ Ibid. p. 38.
- ⁷⁸ Burning Glass Labour Market Insights Database 2015-2018, quoted in Department of Social Services, *NDIS National Workforce Plan: 2021-2025*, June 2021, p. 17
- ⁷⁹ Baines, D., Macdonald, F., Stanford, J., Moore, J. (2019). Precarity and Job Instability on the Frontlines of NDIS Support Work, The Centre for Future Work at the Australia Institute, p. 35.
- ⁸⁰ Victorian Department of Health and Human Services. (2019). *Understanding the workforce experience of the NDIS: Longitudinal research project: Year Two*, December 2019, p. 19.
- ⁸¹ Department of Social Services, *NDIS National Workforce Plan: 2021-2025*, June 2021, p. 17.
- ⁸² Cortis, N., & van Toorn, G. (2020). Working in new disability markets: A survey of Australia's disability workforce. Sydney: Social Policy Research Centre, UNSW Sydney, p. 75.
- ⁸³ Radford, K., & Chapman, G. (2015). Are all workers influenced to stay by similar factors, or should different retention strategies be implemented?: Comparing younger and older aged-care workers in Australia. *Australian Bulletin of Labour*, 41(1), 58-81, p. 62.
- ⁸⁴ Ibid. p. 62.
- ⁸⁵ Eisenberger, R., Huntington, R., Hutchison, S. and Sowa, D. (1986), 'Perceived Organisational Support', *Journal of Applied Psychology*, vol. 71, pp. 500-507 cited in Radford, K., & Chapman, G. (2015). Are all workers influenced to stay by similar factors, or should different retention strategies be implemented?: Comparing younger and older aged-care workers in Australia. *Australian Bulletin of Labour*, 41(1), 58-81, p. 62.
- ⁸⁶ Ibid. p. 65.
- ⁸⁷ Radford, K., & Chapman, G. (2015). Are all workers influenced to stay by similar factors, or should different retention strategies be implemented?: Comparing younger and older aged-care workers in Australia. *Australian Bulletin of Labour*, 41(1), 58-81, p. 66.
- ⁸⁸ Healy, Karen, Gai Harrison, and Michele Foster. (2015). Job Satisfaction and Workforce Retention of Newly Qualified Social Work and Community Services Workers: An Australian Pilot Study. *Advances in Social Work and Welfare Education*, 17(1), p. 8.
- ⁸⁹ Stevens, M. Moriarty, J. Manthorpe, J. Harris, J. Hussein, S. Cornes, M. (2021) 'What encourages care workers to continue working in intellectual disability services in England? Interview findings' in *Journal of Intellectual Disabilities*, Vol 25(1), p. 22.
- ⁹⁰ Cosgrave, C., Hussain, R., & Maple, M. (2015b). Factors impacting on retention amongst community mental health clinicians working in rural Australia: a literature review. *Advances in Mental Health*, 13(1), 58-71.
- ⁹¹ Megan J. Judd, Kate P. Dorozenko & Lauren J. Breen. (2017). Workplace Stress, Burnout and Coping: A Qualitative Study of the Experiences of Australian DSWs. *Health & Social Care in the Community*, 25(3), p. 1114.



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