INQUIRY INTO IMPLEMENTATION OF THE NATIONAL DISABILITY INSURANCE SCHEME AND THE PROVISION OF DISABILITY SERVICES IN NEW SOUTH WALES

Organisation:United Voice NSW BranchDate Received:10 August 2018



New South Wales Branch President Amy Bell Secretary Mel Gatfield

Implementation of the National Disability Insurance Scheme and the provision of disability services in New South Wales

Submission by United Voice

August 2018

Authorised by Mel Gatfield, Branch Secretary United Voice NSW Level 1, 187 Thomas St Haymarket New South Wales 2000 nsw@unitedvoice.org.au

About United Voice

United Voice is a union of workers organising to win better jobs, stronger communities, a fairer society and a sustainable future. Members of United Voice work in a diverse range of industries including aged and disability care, cleaning, security, early childhood education and care, hospitality, healthcare, emergency services and manufacturing.

United Voice New South Wales Branch has coverage of 'in home' disability and aged care workers many of which work across both client groups—representing almost 2,000 home care workers in the state of NSW.¹ As the people working in the disability sector on a daily basis, United Voice members appreciate the opportunity to have their opinions, concerns and experiences considered as part of this inquiry. Please note that United Voice NSW does not have coverage of residential disability care workers, which are covered by other care unions in NSW.

¹ A note on terminology: Home care workers provide domestic assistance, personal care and complex care assistance to people with disability and older people and in their homes and in the community. Home care workers can also be referred to as: attendant care workers, home support workers, domiciliary care workers, personal care attendants/assistants, home care aides, home health assistants/aides, direct care workers, direct support workers/professionals, in-home support workers, disability support workers, community support workers, and community care workers.

Introduction

United Voice thanks the committee for the invitation to make a submission to this important inquiry into the implementation of the National Disability Insurance Scheme (NDIS) in New South Wales. United Voice New South Wales Branch has coverage of 'in home' disability and aged care workers, representing almost 2,000 home care workers in the state of NSW. As the people working in the disability sector on a daily basis, United Voice members appreciate the opportunity to have their opinions, concerns and experiences considered as part of this inquiry. As such, this submission will address the term of reference related to workforce issues impacting on the delivery of disability services. The key message for the committee's consideration in this inquiry is that there is a current and looming workforce crisis that threatens the effective functioning of the NDIS scheme and puts the quality of care for participants at risk. This is caused by a range of job quality issues that create difficulties attracting and retaining quality staff. These issues have previously existed in the sector but have been exacerbated by the funding and pricing structures under the NDIS. Therefore, at the time when the sector requires an extreme expansion in its workforce, the conditions of work are being eroded, making this goal more challenging and perhaps unattainable without intervention. As has been frequently noted, the disability workforce is required to double over the transition period to meet the demand for disability care services under the scheme.²

It is also important to note that these workforce challenges are not dissimilar and run in parallel to the those affecting the aged care workforce, which also needs a large scale increase in home care workers in response to the ageing population and the policy and consumer shift to care being provided in the home. It has been recognised that these labour markets are interrelated and, therefore, the competition for workers is and will be intensified even further.³

The importance of this scheme cannot be overstated, thus it is highly concerning to those invested in the success of the NDIS to see the threat the current workforce challenges pose. These workforce issues are unsustainable and stop-gap measures will only result in poor outcomes at best, or great harm at worst, for this vulnerable community. Therefore, United Voice urges the committee to advocate that grappling with these workforce challenges is central to the effective functioning of the NDIS.

This submission will provide further detail and insight into the key job quality issues affecting in-home disability care workers—low pay, fragmented and unpredictable working time, high stress and work intensity, and insufficient training—indicating which areas need addressing to improve the quality of work and therefore address the supply of workers needed and the quality of care. Overall, it is an occupation that is severely undervalued and insufficiently compensated, making it difficult to attract and retain the needed highly skilled workers. Acknowledging that the design of the scheme is largely under the control of the federal government, a relevant role for the NSW Government in addressing some of these concerns include providing additional funding for a robust sector training scheme and other workforce development initiatives.

We also enclose as an attachment research conducted by Cortis et al. (2017) at the Social Policy

³ Commonwealth of Australia (2017) Future of Australia's aged care sector workforce committee report, available at: <u>https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Community_Affairs/AgedCareWorkforce45/Report</u>; NILS (2016) National Aged Care Workforce Census and Survey – The Aged Care Workforce, 2016, available at: <u>https://agedcare.health.gov.au/sites/g/files/net1426/f/documents/03_2017/nacwcs_final_report_290317.pdf</u>

² Productivity Commission, National Disability Insurance Scheme (NDIS) Costs Study Report, October 2017, p. 36, available at: <u>https://www.pc.gov.au/inquiries/completed/ndis-costs/report</u>.

Research Centre at UNSW, commissioned jointly by this union with the Australian Services Union and the Health Services Union. This research illustrates these workforce issues compellingly and in greater detail and was commissioned due to the grave concern for the impact of the NDIS on working conditions for members. United Voice would also welcome the opportunity to provide further evidence to the committee during the public hearings.

Workforce issues impacting on the delivery of disability services

Pay and insecure working hours and contracts

This is a sector that has long experienced low pay, but what is most concerning is that the current funding arrangements under the NDIS are actively working to place even further downward pressure on wages. Cortis et al. (2017) found the capped prices for disability support work are too low to cover the actual costs of service provision and, most concerning, prevent providers from meeting the minimum award or enterprise agreement conditions.⁴

Not only does the NDIS funding and pricing framework institutionalise low pay, it entrenches award conditions as the ceiling rather than the minimum, preventing any capacity for providers to appropriately compensate and attract skilled and experienced workers. The supports provided under the NDIS are not ones that can be carried out exclusively with entry-level, unskilled workers. Not only do the low wages act as a barrier to entry, it is a disincentive to remain in the sector as it becomes apparent that there is no prospect for pay progression over time, thus making it difficult for workers to justify remaining in the sector. The following example of one United Voice member is typical of the sector: this member has over 30 years of experience, yet remains paid only \$24 per hour, an increase of only a few dollars an hour above an unskilled and inexperienced worker. Her skill level is vital to meeting the needs of disabled clients with complex needs and the care received by her clients would be unparalleled compared to those provided by a new entrant. As is common in the sector, only those who have a deep personal conviction in the work they do can sustain these efforts for so little reward. The staff shortages among disability support workers demonstrate that this is not a sustainable strategy.⁵

Surveys of United Voice home care members show that the severely insufficient pay is a primary concern. Only 17 per cent of disability care workers in NSW/ACT believed they were paid fairly, with the same proportion indicating they were satisfied with their pay.⁶ This dissatisfaction is unsurprising given the current pay levels are simply not enough for workers to live on and do not reflect the skill and nature of work in this sector.

Take home pay and inability to support my family, the cost of rent/living expenses where my work are all areas I am concerned about. **United Voice member**

Pay rates are disgusting: grade 2 \$20.20 per hour for the work we do and the skills **United Voice member**

 ⁴ Cortis, N., Macdonald, F., Davidson, B., and Bentham, E. (2017). *Reasonable, necessary and valued: Pricing disability services for quality support and decent jobs* (SPRC Report 10/17). Sydney: Social Policy Research Centre, UNSW Sydney
⁵ Commonwealth of Australia (2018) Joint standing committee on the NDIS, Transitional arrangements, available at https://www.aph.gov.au/Parliamentary_Business/Committees/Joint/National_Disability_Insurance_Scheme/Transition/Rep

ort ⁶ Cortis, N. (2017). Working under the NDIS: Insights from a survey of employees in disability services (SPRC Report 13/17). Sydney: Social Policy Research Centre, UNSW Sydney, pp. 17-18.

This low pay exists despite the work requiring substantial levels of skill to be completed under difficult working conditions. Workers can be required to support those with complex or high needs care, and undertake activities such as PEG feeding, using hoists and lifts during personal care and manual bowel care. In this context, workers understandably feel insufficiently compensated.

The precariousness of the work and financial insecurity not only stem from the low pay rates but is also compounded by the payment structures and work scheduling techniques for home care workers. By being paid according to each instance of service provision, rather than being employed for continuous shifts, workers must bear the risk of client demand. This results in variable and unpredictable hours, but also in highly fragmented work days with large 'breaks of engagement'. Subsequently, workers are only paid for a few hours of work spread across a very long work day. These extended breaks are not equivalent to genuine rest periods during days off and is therefore often cited as a particularly troubling aspect of the work. Additionally, it is currently not an award condition to be compensated for all forms of travel time, thus this represents a major form of unpaid work, further reducing the effective pay rate of worker.⁷ Finally, workers also take on some of the risk for 'late cancellations', whereby if a client reschedules generally less than one days' notice, the worker is often not paid unless they accept alternative work or might not be paid for the full service period that would have been worked. With greater notice, the worker will not be paid yet may not necessarily receive additional compensatory work, thus rostered hours cannot be relied on.

Case study: Four days a week Marlene works for one service provider, starting around 9 am and finishing 13 and a half hours later at around 10:30 pm. In her job with this employer Marlene is paid only for the five to six hours she spends with clients over four or five separate shifts. In addition to this Marlene spends about an hour and 45 minutes travelling back and forth from her home to work between shifts, travelling a total of 100 km per day excluding her first and last trips. She is not paid for any of this travel time, nor does her employer reimburse her for costs associated with the use of her own car to undertake the travel. This unpaid travel time between shifts, along with unpaid administration work associated with her job, add up to about 8 hours over the 4 days, an additional 26% of the 30 hours' work Marlene is paid for.⁸

There is also a high degree of multiple job-holding owing to being unable to secure sufficient hours through one employer.⁹

Workload and work stress

A second key issue that contributes to difficulty retaining staff is the inherently stressful nature of the work, which is exacerbated by poor and difficult work practices that have been intensified by the NDIS. Disability care involves high emotional, cognitive and physical demands while working in isolation in unpredictable environments. Workers need to manage at times demanding interactions with clients and their families, including violence and abuse, enter homes of clients with sometimes insufficient information on the client's condition posing the stress of unknown risks, de-escalate difficult and challenging behaviours in public on social outings and take on the emotional toll of often

⁷ Cortis, N., Macdonald, F., Davidson, B., and Bentham, E. (2017). *Reasonable, necessary and valued: Pricing disability services* for quality support and decent jobs (SPRC Report 10/17). Sydney: Social Policy Research Centre, UNSW Sydney

⁸ Cortis, N., Macdonald, F., Davidson, B., and Bentham, E. (2017). *Reasonable, necessary and valued: Pricing disability services for quality support and decent jobs* (SPRC Report 10/17). Sydney: Social Policy Research Centre, UNSW Sydney, p. 74.

⁹ Macdonald, F and Charlesworth, S 2016, 'Cash for care under the NDIS: Shaping care workers' working conditions?', Journal of Industrial Relations, vol. 58, no. 5, pp. 627-646.

intensely personal relationships for people with very few other avenues of support. This stress is exacerbated by time pressures through the way work is structured and scheduled, as outlined previously. Additionally, time pressures have been intensified under the shift from block-funding to individualised funding frameworks under the NDIS and with the introduction of competitive markets as the focus is drawn to cost containment. Consequently, workers often feel they are 'racing' to complete the set tasks within the allocated time frame.

"There has been an increased psychological and physical pressure on the worker to work within more condensed and rigid time frames" **United Voice member**

This is especially so under the current context where the NDIA pricing model has been set too low. As the research by Cortis et al. (2017) shows, the pricing model assumes only three minutes of time is spent travelling or not with the client (such as completing or reviewing records or communicating with head office), meaning this work often becomes unpaid work by already low paid workers. Consequently, in the survey of disability workers more than half of respondents (55.9%) agreed or strongly agreed with the statement 'Under NDIS, I don't have enough time to do everything in my job' and only 11.4% disagreed, which puts quality care and support at risk.

The flexibility to respond to arising needs has been lost, adding to unpaid work and worker stress. Members have reported that since the transition to the NDIS that, for example, if a client was to experience a bowel movement towards the end of the client's scheduled time, previously the worker would stay on to undertake the personal care work needed, but now permission must be granted by the head office depending on whether the client has the funds available. In the event that the client does not have available funds, often the support worker will elect to stay on in unpaid time due to their own sense of dedication and professionalism.

"Before we could spend extra time if needed with a client in crisis, now it is all about hours and money."⁴⁰

Adding to worker stress is the way in which rostering is completed. Rosters for home care workers are highly unpredictable and variable. While workers will often receive a version of a roster within the minimum timeframe, there will often be multiple revisions, with as little as a few hours' notice. It has also become a form of unpaid work for workers to manage calls from head office for additional work in their time off. This form of scheduling leads workers to feel like they are virtually always 'on call', making it difficult to plan their own lives but also the stress of feeling the need to check their rosters constantly.

"You refresh your phone after the client and you have no changes, so you head off to your next client and by the time you get there, they have changed your clients around without telling you" **United Voice member**

Compounding worker stress and reducing the attractiveness of the sector is the high proportion of non-standard work, which has increased substantially under the NDIS. As of 2018, 42 per cent of the

¹⁰ Cortis, N., Macdonald, F., Davidson, B., and Bentham, E. (2017). *Reasonable, necessary and valued: Pricing disability services for quality support and decent jobs* (SPRC Report 10/17). Sydney: Social Policy Research Centre, UNSW Sydney, p. 31.

disability workforce is casually employed,¹¹ this is up from 31 per cent in 2010.¹² National Disability Services (NDS) also report that the growth in new employment is predominantly casual, suggesting this trend is likely to continue. This is despite the NDS also reporting that most job applicants in the sector are seeking permanent work and that turnover of workers, at 35 per cent per annum, is much higher among casuals.¹³ In addition to creating job insecurity, this is also concerning for worker wellbeing given these workers are not entitled to paid personal and carer's leave, when workers in this sector report higher average days of such leave annually.¹⁴

The cumulative effect of these sources of stress are physical injuries, exhaustion and burnout, as they are also not effectively mitigated by protective factors such as training, mentoring, support networks, or even acknowledged through appropriate levels of pay.¹⁵ Unsurprisingly, ongoing stress under poor working conditions fuel the retention issues in the sector.¹⁶

Training

Finally, a critical concern related to job quality for home care workers and the quality of support provided through the NDIS is the provision of training. Since the transition to the NDIS, research shows there has been a reversal on already low levels of training occurring in the sector:

"No. Not now. We used to, but before NDIS. Since NDIS, no. We have no training, we used to have it ..., we would have a total day where no clients/customers had service that day, where all staff came in, we had training for the full day or shift, which would be some upgrading of mental health training, manual handling, clients, new client inductions so staff would have a general awareness of who a new person was coming in, and enough details to at least get past. You would have team meetings for people who have one-on-one direct support, that all their staff could get together during the week and have a chat and see what was working, what wasn't working, come up with new plans. ...NDIS came in and we stopped doing that because the company assumes, designates that nobody's going to pay for me to sit around and learn. I as a worker, and I as a parent – I'm a parent of a child with a disability, I would rather have a well-trained staff than somebody who was just flying by the seat of their pants."⁴⁷

Similarly, the recent evaluation of the NDIS found the sector was undergoing 'de-professionalisation', whereby roles were increasingly undertaken by workers with fewer skills and experience than prior to the transition to the scheme.¹⁸ The research by Cortis et al. (2017) showed that this was because the

¹¹ National Disability Services (NDS) (2018) *Australian Disability Workforce Report*, February 2018. Pg 4. Available at: <u>https://www.nds.org.au/policy/australian-disability-workforce-report-second-edition-highlights-workforce-risks1</u>

 ¹² Martin B and Healy J (2010) Who Works in Community Services? A Profile of Australian Workforces in Child Protection, Juvenile Justice, Disability Services and General Community Services. Adelaide: National Institute of Labour Studies.
¹³ National Disability Services (NDS) (2018) Australian Disability Workforce Report, February 2018. Available at

https://www.nds.org.au/policy/australian-disability-workforce-report-second-edition-highlights-workforce-risks1 ¹⁴ Cortis, N., Macdonald, F., Davidson, B., and Bentham, E. (2017). *Reasonable, necessary and valued: Pricing disability services for quality support and decent jobs* (SPRC Report 10/17). Sydney: Social Policy Research Centre, UNSW Sydney. p. 14.

¹⁵ Evesson J and Oxenbridge S 2017 'The psychosocial health and safety of Australian home care workers: risks and solutions', New South Wales State Insurance Regulatory Agency.

¹⁶ Evesson J and Oxenbridge S 2017 'The psychosocial health and safety of Australian home care workers: risks and solutions', New South Wales State Insurance Regulatory Agency.

¹⁷ Cortis, N., Macdonald, F., Davidson, B., and Bentham, E. (2017). *Reasonable, necessary and valued: Pricing disability services* for quality support and decent jobs (SPRC Report 10/17). Sydney: Social Policy Research Centre, UNSW Sydney, p. 41. ¹⁸ NILS (2018) Evaluation of the NDIS: Final Report. National Institute of Labour Studies. Available at:

https://www.dss.gov.au/disability-and-carers/programs-services/for-people-with-disability/national-disability-insurancescheme/ndis-evaluation-consolidated-report

current funding does not allow for costs associated with training. Additionally, as previously mentioned, the pricing under the NDIS also does not allow for engaging workers with higher skill levels (as it assumes the employment of workers at Level 2.3 of the SACS award, thus not providing sufficient funding to compensate workers beyond this level). This lack of training and skills compromises workers' ability to provide quality and safe supports, and potentially their own safety.¹⁹

Additionally, in the absence of employer-funded training, nor is there any incentive for workers to invest in their own skills under the current pay structures that do not offer sufficient pay progression according to gualifications or experience. Under these circumstances, the government needs to intervene in this 'market failure' to ensure a skilled workforce to provide the required and necessary level of care. With responsibility for vocational education funding, this is a role that the NSW government could play to directly and effectively address some of the implementation issues with the NDIS. Indeed, the Productivity Commission recommended that state governments "play a greater role in identifying workforce gaps and remedies tailored to their jurisdiction".²⁰ While it is acknowledged that gualifications relevant to disability support workers are currently included on the Smart and Skilled NSW Skills List, the cost of these qualifications still exceeds \$1000 for most individuals, which still presents a significant barrier particularly in light of low levels of pay. Given the extent to which the supply of skills needs to be increased, it would be worthwhile for the government to consider making such gualifications fee free when undertaken through the public provider. Such an initiative is in place currently within Victoria,²¹ in addition to a \$26 million workforce development initiative.²² As can be seen in the figure below, NSW enrolments in qualifications relevant to the occupation of aged and disability carer have been decreasing rapidly since 2014.



Figure 1: NSW program enrolments in courses aligned to the occupation 'aged and disabled carer'

Source: NCVER VOCSTATS

¹⁹ Cortis, N., Macdonald, F., Davidson, B., and Bentham, E. (2017). *Reasonable, necessary and valued: Pricing disability services for quality support and decent jobs* (SPRC Report 10/17). Sydney: Social Policy Research Centre, UNSW Sydney, p. 67. ²⁰ Productivity Commission 2017, National Disability Insurance Scheme (NDIS) Costs, Study Report, Canberra, p. 57,

available at https://www.pc.gov.au/inquiries/completed/ndis-costs/report/ndis-costs.pdf

²¹ Victorian Minister for Training and Skills (15 June 2018) 'New course to grow disability support workforce', available at <u>https://www.premier.vic.gov.au/new-course-to-grow-disability-support-workforce/</u>

²² NDIS Victoria, (2018) *Disability Workforce*, available at <u>https://www.vic.gov.au/ndis/getting-ready/disability-</u> <u>workforce.html</u>; Victorian Government (2016), *Keeping our sector strong: Victoria's workforce plan for the NDIS*, available at: <u>https://www.vic.gov.au/system/user_files/Documents/ndis/NDIS_Workforce_Plan_Document_FullVersion_WEB.pdf</u>

In the context of significant unemployment in certain parts of NSW, and even higher levels of youth unemployment, there is capacity to simultaneously actively address these issues by investing in the disability workforce. Ultimately, more must be done to incentivise workers to see the disability sector as a worthwhile career choice, while simultaneously working to improve worker skills and job quality, and quality care outcomes for participants.

Conclusion

It is clear that the working conditions for disability support workers are highly inadequate, leading to the severe workforce challenges that threaten the objectives and sustainability of the scheme. Workers are paid very little for the level of skill and responsibility involved, which is further diluted by workers being paid through quasi-piece rates, with significant unpaid work and highly fragmented working time. They are under enormous stress trying to complete the necessary level of care and support within tightly defined time frames, and in isolation under challenging conditions, in addition to worsening job and income security. Finally, career structures that promote skill and professionalism are lacking and worsening as training provision is being reduced under the NDIS and there are minimal rewards attached to increasing skills and experience. When the reality of working as a frontline support worker in the NDIS involves such difficult conditions for little reward, it is not surprising that the sector's workforce issues are intensifying. This has ramifications far beyond being a logistical problem for service providers: it leads to a workforce under stress that cannot deliver on the care the scheme intended to provide for its participants. It is therefore critical for the NSW Government to take all available steps to improve the conditions for disability support workers in order to ensure the successful implementation of this landmark scheme.