Strengthening Queensland's NDIS workforce

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Executive summary

The implementation of the National Disability Insurance Scheme (NDIS) represents the most significant social policy reform in a generation. More than 55,000 Queenslanders were receiving NDIS-funded services as at 30 September 2019.

The increase in NDIS service delivery over recent years has created significant demand for workers to deliver these services, making it a major contributor to recent jobs growth in Queensland. The implementation of the NDIS has resulted in employers adjusting their business strategies and most workers report that it has changed the nature of their role.

The implementation has not been without challenges related to the workforce. Employers have reported difficulty recruiting for positions, particularly for support workers and allied health professionals such as Occupational Therapists and Physiotherapists. This difficulty is especially pronounced in regional and remote locations. There has also been a change in the stability of hours and work shifts available for much of the workforce due to the increased choice and control by participants. There is evidence of high levels of turnover in some parts of the sector.

The provision of quality NDIS services is underpinned by the availability of a suitably skilled and qualified workforce to deliver these services and the functions that underpin them. Strong demand from employers for additional workers to enter the sector is projected to continue, with NDIS-related occupations projected to be some of the fastest growing occupations in Queensland in the coming years.

Both technical and soft skills are critically important for the delivery of high quality NDIS services, but the access to and experiences of training for the NDIS workforce are mixed. Opportunity exists to improve the access and availability of suitable skills and capability development options for the NDIS workforce for both new entrants and existing workers.

This report summarises the outcomes of research undertaken by Jobs Queensland and WorkAbility Queensland to investigate the workforce challenges and opportunities associated with the implementation of the NDIS in Queensland. It outlines six key recommendations focussed on strengthening the NDIS workforce for the future.

The COVID-19 pandemic has had a significant impact on Queensland's labour market. Many of the drivers of employment growth in the NDIS workforce are unchanged by this recent disruption. There is an opportunity to leverage the growth of the NDIS to facilitate access to employment opportunities for Queenslanders and to support economic recovery. This has the dual benefit of improving the supply of workers for this important sector and harnessing the employment opportunities that the sector presents.

The NDIS sector and participants, its workforce and government all have a role to play in ensuring that the NDIS is underpinned by a skilled and capable workforce delivering the highest quality services possible – now and in the future. A strategic approach to NDIS market and workforce development will reap significant gains for Queensland and our economic recovery.

Background and context

The National Disability Insurance Scheme (NDIS) commenced roll-out in Queensland in 2016 and is now operational in all Queensland regions. At the commencement of the roll-out, the market for disability support was estimated to grow from 48,000 people in 2016 to 91,000 in 2019.[1] The state's disability support workforce was also expected to expand by between 15,900 and 19,400 additional full-time equivalent jobs.[2]

Jobs Queensland, in partnership with WorkAbility Queensland (a consortium of peak industry bodies), has commissioned research to investigate employer, employee and sole provider experiences in six NDIS roll-out sites across Queensland over the period 2018 to 2021. The research assesses and responds to the skills demand and supply issues resulting from the roll-out across Queensland and investigates current training and skills development for the sector. This will inform Jobs Queensland's advice to government. It will also be used to inform other stakeholders on the best ways to meet jobs growth and skills needs for the NDIS.

This report presents the key findings from research involving analysis of existing data sources undertaken in late 2019 as well as primary research conducted across six NDIS regions.

Methodology

The project has adopted a longitudinal, mixed method, participatory design.[3] It uses quantitative and qualitative data gathered at the state-wide level and from six regions representing different stages of the NDIS roll-out in Queensland. These regions are Townsville and Mackay being the most advanced roll-out sites, Toowoomba and Ipswich having commenced the NDIS roll-out somewhat later and Brisbane North and South the most recent.

Survey results that have informed the research findings can be found in the Appendix.

1   NDIS. (2016). *Queensland Market Position Statement.* Canberra: Australian Government. https://www.ndis.gov.au/media/372/download

2   Ibid

3   Denzin, N.K. and Lincoln, Y. S., (2012). *The Sage Handbook of Qualitative Research.* Thousand Oaks: SAGE Publications; Kindon, S., Pain, R., & Kesby, M. (Eds). 2007. *Participatory action research approaches and methods: Connecting people, participation and place.* London: Routledge.

Research participants

Survey respondents

32 employers	**77** employees	**37** sole providers

Focus groups

9

Interviews

20 employers	**7** employees	**11** sole providers	**3** local area coordinators	**2** self-managed participants

Regional forums

133 participants

Case studies

12   2 per region

Impact of COVID-19

This report draws on research conducted over the course of 2019. In 2020, as the final report and recommendations were being prepared, the world was being turned upside down by the COVID-19 pandemic.

It is important to pause and consider the known and emerging impacts of COVID-19 on people with disability, their families, the workforce and the organisations that employ them. The pandemic has resulted in a range of health directives that include social distancing requirements, quarantine and isolation, testing and tracing and travel restrictions.

Health directives include instructions for working in the disability sector. These include:

- access by supervised students to restricted shared disability accommodation;

- preventing people presenting with symptoms consistent with COVID-19 from entering a disability accommodation service; and

- avoiding staff, contractors and volunteers working across multiple care facilities.

These measures have resulted in a range of disruptions to essential services and supports to protect the health and safety of participants, families, workers and the wider community. This has included a contraction in the delivery of services (in the case of group-based services) and some adaptations to services that have resulted in their delivery in an online setting (in the case of therapies).

While a contraction in NDIS services because of COVID-19 has been seen in the first half of 2020, the level of impact that has occurred is not as significant when compared to many other industries. At the time of finalising this report, some restrictions are being eased and skills and labour shortages are already returning. This suggests a high level of effectiveness of the industry response to COVID-19 as well as the resilience of the industry to such health and economic impacts.

This report highlights the potential that the NDIS represents for economic growth and employment opportunities across all regions of Queensland. As at June 2020, almost 28,000 new Yellow Card holders (non-volunteers) have entered the NDIS workforce since the scheme commenced.[4] Nevertheless, based on the number of participants in the Scheme as at 30 June 2020, Queensland has only realised around 80 per cent of the projected growth potential of the NDIS.[5] A strategic approach to NDIS market and workforce development will reap significant gains for Queensland, particularly as we recover from the health and economic impacts of the pandemic.
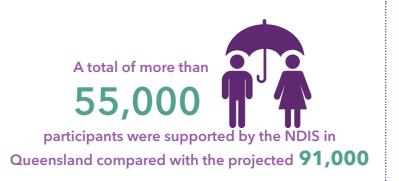
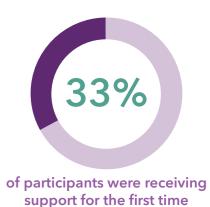# The NDIS in Queensland

Key findings

- NDIS service delivery has grown considerably in Queensland in recent years, albeit more slowly than was originally predicted.
- The largest categories of participants are those with autism or an intellectual disability.
- There is strong and ongoing demand for service delivery to support daily living, transport, support for social and community participation and help in getting and keeping a job.
- The patterns of participants and their expenditure were generally consistent across each of the study regions for this research.

The 2016 Queensland Market Position statement provided estimates of the distribution and growth of NDIS participants using population projections and phasing of NDIS implementation. In Queensland, the number of people eligible for support was forecast to nearly double.[6]

The predicted growth of the market is even more significant in dollar terms because of the increased amount of support being provided for existing participants. The market was expected to grow from approximately $1.8 billion to $4.3 billion in the three years to June 2019.[7] This growth in expenditure creates increased demand for services which in turn increases the number of NDIS workers that are needed. Most significantly, the funding model aims to provide people with disability greater choice over who delivers their supports, in addition to control over how those supports are delivered. This will create further change in the market since it may affect the array of supports and services that are demanded.[8]

Since commencing in 2016, the NDIS scheme has continued to grow, although more slowly than originally predicted.[9] As at 30 September 2019:

A total of more than **55,000** participants were supported by the NDIS in Queensland compared with the projected **91,000**

33% of participants were receiving support for the first time

The related market of active service providers has also continued to grow with

4,197 registered service providers in Queensland.* **of these** **2,735** were active NDIS providers in Queensland

including individual/sole trader operated businesses and 2,760 companies/organisations.

averaging around

20 NDIS participants **for each** **1** active NDIS provider[10]

6   NDIS. (2016). *Queensland Market Position Statement.* Canberra: Australian Government. https://www.ndis.gov.au/media/372/download

7   Ibid

8   Ibid

9   COAG Disability Reform Council. (2019). *Quarterly Report 30 September 2019.* Canberra: National Disability Insurance Agency. https://www.ndis.gov.au/about-us/publications/quarterly-reports

10   NDIS. (2019). *Quarterly Report* Q1 201920 Queensland Dashboard. Canberra: Australian Government. https://www.ndis.gov.au/about-us/publications/quarterly-reports/archived-quarterly-reports-2019-20#first-quarter-2019-20-q1

4   Following the development of this report, the methodology for the counting of Yellow Card holders changed. The details in this report were correct as at 30 June 2020.

5   NDIS. (2016). *Queensland Market Position Statement*. Canberra: Australian Government. https://www.ndis.gov.au/media/372/download

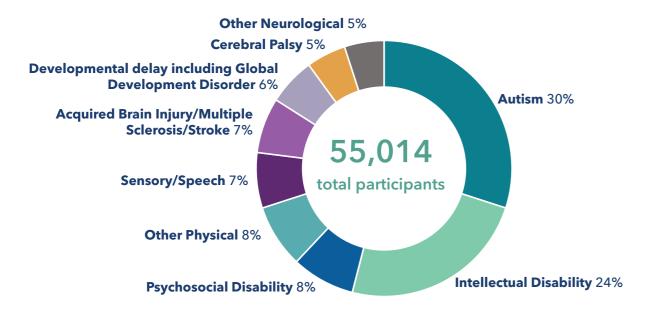The largest categories of participants are those with autism or an intellectual disability (Figure 1). These two categories are also showing the largest growth, though it should be noted that all categories continue to grow as the scheme rolls out. This participant profile is similar across each of the regions of focus.
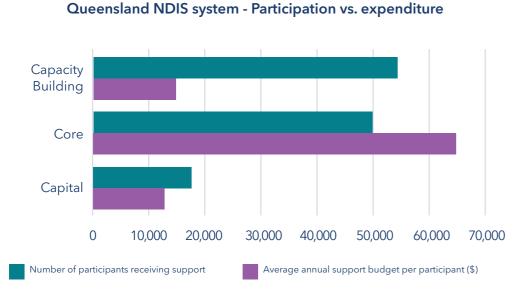
Figure 1. NDIS participants in Queensland by disability group, September 2019

Other Neurological 5%
Cerebral Palsy 5%
Developmental delay including Global Development Disorder 6%
Acquired Brain Injury/Multiple Sclerosis/Stroke 7%
Sensory/Speech 7%
Other Physical 8%
Psychosocial Disability 8%
Autism 30%
Intellectual Disability 24%

55,014
total participants

Source: NDIS. 2019. Participant numbers and plan budgets data [Data set]. Canberra: Australian Government. https://data.ndis.gov.au/data-downloads

In terms of the number of participants, demand for capacity building supports and core supports are both high (Figure 2). However, core supports expenditure is significantly greater than expenditure in other areas. This pattern of expenditure was evident in each of the six NDIS regions. Strong and ongoing demand for NDIS workers across Queensland who can assist with daily living, transport, support for social and community participation and help with getting and keeping a job is expected.

Figure 2. Queensland NDIS participation and average support expenditure, September 2019

Queensland NDIS system - Participation vs. expenditure

- Number of participants receiving support
- Average annual support budget per participant ($)

Source: NDIS. 2019. Participant numbers and plan budgets data [Data set]. Canberra: Australian Government. https://data.ndis.gov.au/data-downloads

Queensland's NDIS workforce

Key findings

- A comprehensive picture of the Queensland NDIS workforce is difficult to construct given current data limitations.

- There is an opportunity to increase the diversity of the NDIS workforce.

- Aged and Disabled Carers are the largest occupational grouping employed within the NDIS and employment in this and other NDIS-relevant occupations have been growing alongside the NDIS.

- Many employers and sole providers are adapting their business strategy in response to the rollout of the NDIS.

Workforce profile

In this section, a brief overview of the Queensland NDIS workforce is provided, drawing from the Australian Bureau of Statistics (ABS) 2016 Census of Population and Housing and Labour Force Survey publications, as well as a survey conducted for this research. It is important to note that due to the limitations of these data sources, a comprehensive picture of the current NDIS workforce is difficult to construct. This is due to the inability to determine the precise number of workers delivering disability services under the NDIS (as opposed to other types of care and allied health services).

The following Australian and New Zealand Standard Industry Classification (ANZSIC) classes have been used as a basis to define the NDIS workforce using 2016 Census data: Other Social Assistance Services; Other Residential Care Services; Other Allied Health Services; Physiotherapy Services; and Optometry and Optical Dispensing. From Census results, the most common Australian and New Zealand Standard Classification of occupations (ANZSCO) Level 1 unit groups are then identified and later used to help distinguish the NDIS workforce in other data sets.[11]

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11   See glossary for more information on ANZSIC and ANZSCO definitions

Workforce demographics

75.1% Female
(vs 48.2% female of all employment in QLD)

24.9% Male

Median age

43.5 years
(vs 40.4 years for all employment in QLD)

3.6% Indigenous
(vs 2.5% QLD overall)

14.0% Culturally and linguistically diverse
(vs 12.7% QLD overall)

2.6% Workers with disability
(vs 0.9% QLD overall)

Education attainment

- Graduate Diploma and Graduate Certificate Level 3%
- Not stated or inadequately described 2%
- Postgraduate Degree Level 9%
- Bachelor Degree Level 25%
- Advanced Diploma and Diploma Level 17%
- Certificate Level 23 %
- No Post-school Qualification 21%

Source: ABS. 2016. Census of Population and Housing, 2016.

Census data indicates lack of diversity in the NDIS workforce. The majority of workers are female, over the age of forty, non-Indigenous and from an English-speaking background. There is, however, a higher (relative to other sectors) representation of workers with disability or with lived experience of disability. Around 40 per cent of the identified workforce held a VET qualification. More detailed segmentation of this data shows that the level of diversity is somewhat better (in terms of age and cultural and linguistic background) for allied health-focussed workers than it is for social and residential care services workers (see Glossary for definition of industry classifications).

While the 2016 Census provides the most detailed data on the workforce, the rollout of the NDIS was only just underway when the Census data was collected. More recent insights (albeit not as detailed) can be obtained from the data collected from survey participants and the ABS Labour Force Survey.

The surveys carried out for this project in 2019 suggest that the introduction of the NDIS has not increased the age and gender diversity of the workforce in Queensland. In an encouraging sign, 11 per cent of employee survey respondents identified themselves as someone with a disability and 36 per cent had a family member with a disability, suggesting many current NDIS workers have a lived experience (Table 1). Further improvement across the range of diversity would be desirable to provide NDIS participants greater choice and opportunity to have workers who come from the age, gender, cultural, linguistic or First Nations heritage groups.

Also noteworthy is the relatively high level of education reported by survey participants. Thirty-one per cent of the employees who completed the survey had a Diploma/Associate Diploma and 20 per cent reported having a Postgraduate Degree or Graduate Diploma/Certificate (Table 2). This high level of education and training is important to bear in mind when considering how these same respondents responded to subsequent questions about skills gaps.

The sole providers who took part in the survey differed from the employees in that they had higher (although not equal) representation of males in the workforce (Table 3), were less diverse (Table 4) and more highly educated (40 per cent had a postgraduate degree or graduate diploma/certificate) (Table 5).

Employment profile

Occupation	Employment - Feb. 2016[1]	Change - Feb. 2016 to Feb. 2020[2]
Aged and Disabled Carers	**28,571**	**+11,179**
Welfare Support Workers	9633	+4805
Psychologists	4702	+3694
Social Workers	4635	+1711
Physiotherapists	4115	+911
Counsellors	3686	+1609
Occupational Therapists	2875	+987
Health and Welfare Services Managers	2574	+2891
Audiologists and Speech Pathologists / Therapists	2228	-632
Complementary Health Therapists	849	+1417

Source: ABS Labour Force, Australia, Detailed, Quarterly, May 2020

[1] Commencement of the NDIS roll-out in Queensland

[2] Figures inclusive of all Queensland workers in each occupational group and calculated using a four-quarter moving average.

ABS Labour Force Survey data reveals significant growth in most occupations across the disability workforce since the commencement of the roll-out of the NDIS in Queensland in 2016, particularly Carers and Support Workers and Health and Welfare Services Managers.[12] In addition, most Allied Health Professions (AHPs) have experienced significant growth. Importantly, as it takes three or more years for AHPs to become qualified, any current shortfall will be difficult to remedy within the domestic labour force in the short term. Demand for these workers is increasing across the nation, both within the NDIS sector and in response to increasing and competing demand for aged care and health care services.[13] The impact of the COVID-19 pandemic will increase the need for locally trained Carers and Support Workers, Managers and Allied Health Professionals.

12   The NDIS workforce also comprises a range of 'non-health care'-focussed workers that are essential to the delivery of NDIS services, including administration staff and transport drivers.

13   ABS. (2020). *6291.1.0.55.003 - Labour Force, Australia, Detailed, Quarterly, May 2020*. Canberra

Strengthening Queensland's NDIS workforce

Impact of the NDIS Transition

Many employers and sole providers are adapting their business strategies in response to the rollout of the NDIS and moving to a more market-driven model. This is flowing through to a variety of changes within organisations, including:

Business models

Surveyed employers commonly reported implementing changes to address:

- Financial sustainability and systems 72%
- Workforce development 63%
- Service model design 53%

Employers in focus groups identified the need to:

Adopt a more business-oriented mindset
ADOPT

Respond to greater diversity of needs and demands of individual participants
RESPOND

Develop person-centred and customer-driven approaches
DEVELOP

Expand their administration workforce for tasks such as managing service agreements, invoicing, debt collection, accounting, service bookings and rejections and marketing
EXPAND

"…you see it with all the providers, they're cutting services or adding services based on demand. Things used to be pretty clear cut and you just did the same thing Monday to Friday, whereas everyone's innovating and everything's different"

(Mackay Employer).

Work roles

Fifty-three per cent of surveyed employees and 50 per cent of sole providers reported their role had changed with the introduction of the NDIS.

Employees reported that the model requires them to work across several different clients and relationships, making it more difficult to form strong relationships with clients.

Sole providers, on the other hand, have in some cases been able to focus their efforts on providing more services to fewer participants.

"…I can work directly with the client. It means that I can give them absolute choice and control and I'm not held back by organisational policies"

(Toowoomba Sole Provider).

While some sole providers have identified delays in the registration process as inhibiting the growth of their businesses, some also report being able to service the growing number of self-managed participants in the interim who can exercise that choice.

Regional/remote delivery

Distance has been one standout issue for providers in regional areas, particularly for those servicing remote communities. Reported strategies include:

The establishment of metropolitan head offices to manage core functions with smaller branch offices in more regional areas to extend the reach of services

Expanding branch offices across the region as more participants come on board in each area

Metropolitan providers expanding their operations into the regions

"…as the NDIS rollout has progressed, we've been able to open offices in [new regional] areas…now we've actually got people on the ground in a lot of those places"

(Townsville employer).

Future Plans

About half of the employers and sole providers surveyed intended to continue delivering the same services to the same market

28% of employers

30% of sole providers

were planning to expand their market (attract more customers)

Fewer survey respondents to report that they were planning to reduce their market or to change the range of supports they were delivering

This suggests that a significant number of service providers are open to taking on the increased number of NDIS participants who are entering the scheme.

Meeting the Demand for NDIS workers

Key findings

- Many employers report difficulty recruiting staff, particularly for support worker and allied health professional roles.

- The number of people employed in NDIS-related occupations is projected to grow significantly over the coming years.

- Recruitment strategies include attracting workers from other industry sectors and into traineeships.

- Latent capacity exists within segments of the existing NDIS workforce, but rostering challenges present difficulty in utilising this additional capacity.

- Many workers in the sector are experiencing stress related to their role which may contribute to turnover, but most gain satisfaction through their work.

In 2016, it was estimated that the size of the Queensland NDIS workforce would need to double to match the projected growth in participant numbers. The growth in participant numbers has occurred more slowly than was originally anticipated.[14] While the extent of workforce growth has also been lower than first anticipated, the number of workers providing NDIS services has still grown considerably. This section examines how demand for NDIS workers has been changing alongside the roll-out of the NDIS.

NDIS workforce demand

Employers surveyed for this research indicated that their largest category of workers are direct support workers (48 per cent reported that direct support workers made up over 80 per cent of their workforce). Administration staff were another significant group, comprising more than 40 per cent of the workforce for 32 per cent of the employers that were surveyed. In comparison, most of the employers surveyed did not employ any allied health assistants, tradespersons or transport workers. (Table 6)

Employers were also asked whether they have enough staff to meet the needs of their current NDIS participants and if not, the number and type of additional workers needed. Responses to these questions reinforced the importance of direct support workers in the sector with 77 per cent of employers reporting that they needed more of these workers and 35 per cent of employers needing ten or more of these workers just to meet the needs of their existing NDIS participants. The next most in demand occupations are administration staff with 62 per cent of employers reporting a shortage, and support coordinators (49 per cent reporting shortages). Allied health professionals are also in demand with five per cent of employers needing to recruit ten or more of these workers to meet their current needs. (Table 7)

Job advertisements data provides another indicator of employer demand for workers. CSIRO's Data61 has mined a dataset of more than eight million job ads to capture data on employer demand for workers and skills. To identify NDIS-relevant job advertisements, CSIRO Data61 searched the Adzuna Australia database[15] using the terms "disability services," and "NDIS", focusing on monthly job ads in Queensland since July 2015. Figure 3 shows that there has been a significant increase in NDIS-relevant job ads, even though the overall number of job ads (across all industry sectors) for the period declined slightly.[16]

The increasing numbers of NDIS-relevant job advertisements was evident in all the study regions although strongest in Ipswich and Toowoomba and weaker in Brisbane North and Brisbane South (where the NDIS roll-out was only just commencing).
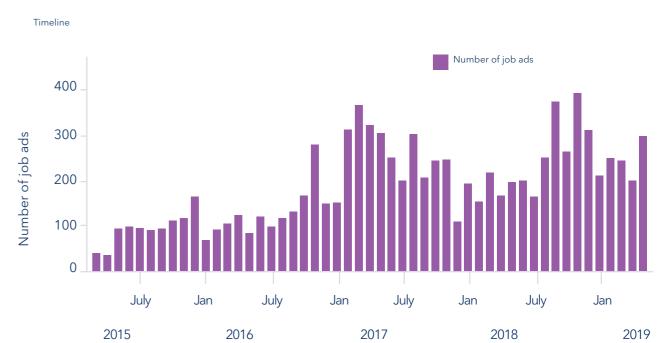
Figure 3. Monthly count of "NDIS" or "Disability Services" job ads in Queensland

Source: Mason, C., Chen, C., Wan, S., Trinh, K., Duenser, A., Sparks, R., Walker, G., Zhao, Y., Burns, S., Reeson, A., Jin B., Naughtin, C. 2019. Data61 Australian Skills Dashboard. CSIRO. dmorg.csiro.au. CSIRO's Data61 acknowledges the kind contribution of Adzuna Australia's datasets to this research.

The types of roles were advertised in these job ads can be seen in Figure 4. After the roll-out of the NDIS in 2016 there was very strong growth in job ads for professional roles (indicative of many NDIS-focussed occupations such as Physiotherapists, Psychologists, Counsellors, Occupational Therapists, etc.). Job ads for community and personal services roles (indicative of Aged and Disability Carers) have also been increasing. There was also a significant increase in demand for managers (indicative of Health and Welfare Services Managers) between 2016 and 2017.
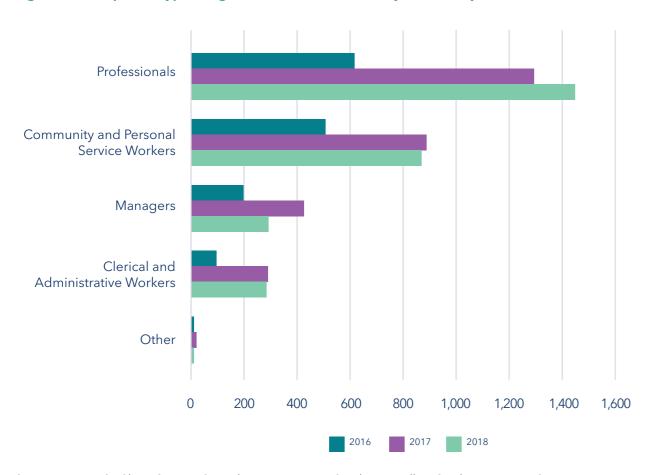
This trend (where the growth in job ads was strongest or more sustained for professional roles) was again consistent across each of the study regions. Given that professional and managerial roles tend to be over-represented in online jobs boards relative to other occupations, this trend may reflect the fact that different recruitment strategies are being employed for professional and non-professional workers.

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14   NDIS. (2016). *Queensland Market Position Statement - Queensland*. Canberra: National Disability Insurance Agency.

15   These data are drawn from an aggregator of job ads and may not be representative of the local labour market overall. However, a comparison of the job advertisement statistics for Adzuna Australia, the Internet Vacancy Index (IVI) published by the Department of Jobs and Small Business and ABS Labour Force Statistics indicates a reasonable level of agreement.

16   The dip in NDIS-relevant job ads occurring in December and January of each year reflects seasonal variability and is exhibited in all types of job ads.

Figure 4. Occupation type sought in "NDIS" or "Disability Services" job ads in Queensland

Source: Mason, C., Chen, C., Wan, S., Trinh, K., Duenser, A., Sparks, R., Walker, G., Zhao, Y., Burns, S., Reeson, A., Jin B., Naughtin, C. 2019. Data61 Australian Skills Dashboard. CSIRO. dmorg.csiro.au. CSIRO's Data61 acknowledges the kind contribution of Adzuna Australia's datasets to this research.

The top terms found in these job ads provide additional insight into what NDIS employers are seeking from job candidates.[17] 'Communication' was most frequently mentioned, appearing in relevant job ads twice as many times as the next highest term. The frequency of the terms, 'psychology', 'rehabilitation' and 'physiotherapy', suggest that many job ads were for allied health professionals.

Top terms in "NDIS" and "Disability Services" job ads in Queensland

#1 Communication
(referenced double the amount of the next highest term)

#2 History
#3 First Aid
#4 Child Protection
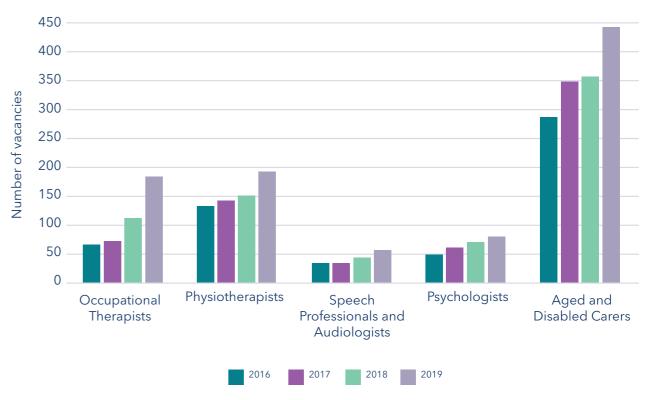#5 Psychology
#6 Customer service
#7 Consultation
#8 Work independently

Source: Mason, C., Chen, C., Wan, S., Trinh, K., Duenser, A., Sparks, R., Walker, G., Zhao, Y., Burns, S., Reeson, A., Jin B., Naughtin, C. 2019. Data61 Australian Skills Dashboard. CSIRO. dmorg.csiro.au. CSIRO's Data61 acknowledges the kind contribution of Adzuna Australia's datasets to this research.

17   It is important to note that some of these words (e.g., history) may reflect organisational attributes (e.g., "our organisation has a history of…") rather than attributes sought from job candidates.

The Internet Vacancy Index (IVI) published by the Australian Government also highlights the growth in NDIS-relevant job ads since 2016. The IVI data show that job ads for Occupational Therapists, Physiotherapists and Aged and Disabled Carers have all grown significantly between 2016 and 2019 (see Figure 5).[18] However, it is not evident which of these job ads were from disability service providers (as opposed to aged care providers and other employers of these workers).

Figure 5. Average number of job advertisements in NDIS-relevant occupations in Queensland

Source: Department of Jobs and Small Business. 2020. IVI Detailed Occupation Data

Jobs Queensland's Anticipating Future Skills data provides longer-term projections of employment in Queensland for industries, regions, occupations and qualifications[19]. Over the five years to 2024, employment in the 'Other Social Assistance Services' industry class (which in addition to disabilities assistance includes other social support services such as aged care and welfare services) is projected to grow by 18.8 per cent which is twice the projected rate of growth for Queensland's labour market overall.

Unsurprisingly, many of the occupations essential to the delivery of NDIS services are also projected to grow strongly. Aged and Disabled Carers is projected to experience the largest growth of all NDIS-focused occupations.[20] The trend of above-average employment growth in these occupations is evident across Queensland, with particularly high projected growth in those regions experiencing significant population growth (such as Ipswich and the Sunshine Coast).

18   Department of Jobs and Small Business. (2020). IVI Detailed Occupation Data. Canberra: Australian Government.

19   These projections were undertaken prior to the COVID-19 pandemic. AFS data are being updated to take into account the impact of the pandemic.

20   Jobs Queensland. (2020). *Anticipating Future Skills*. Ipswich. Queensland Government

Figure 6. Projected employment growth in NDIS-relevant occupations, 2019-2024

Aged and Disabled Carers +7667 (+19.9%)

Psychologists +1642 (+24.8%)

Social Workers +1543 (+23.9%)

Welfare Support Workers +1252 (+10.2%)

Counsellors +1244 (+24.0%)

Physiotherapists +1172 (+20.7%)

Health and Welfare Services Managers +832 (+20.6%)

Occupational Therapists +663 (+19.8%)

Audiologists and Speech Pathologists / Therapists +423 (+19.5%)

Complementary Health Therapists +298 (+20.4%)

Occupations projected to increase by 2024

Source: Jobs Queensland 2020. Anticipating Future Skills. Figures inclusive of all Queensland workers employed in each occupation.

Recruitment strategies

The qualitative data from interviews and focus groups undertaken for this report confirms a variety of recruitment strategies are being used for non-professional workers including word of mouth, WorkAbility Jobs Roadshows, information sessions and forums, as well as promoting the opportunities that are available in the industry through employment agencies, schools, training organisations, universities, regional councils and Chambers of Commerce. These strategies seek to source workers who may have transferable skills and are looking to diversify from their current careers, or those who might be interested in working in the industry for the first time while acquiring further training and skills on the job.

Stakeholders emphasised the value of forums to engage those already caring for family members to attract them into the industry by showing them how their experience could lead to a sustainable career. Another innovative solution was to use WorkAbility Jobs Roadshows to identify, interview and recruit large numbers of new staff quickly.

"Speed [interviewing] goes really well, forty people came in, seven employers, a good proportion of the forty will get a job out of it. It's a good way of capturing people who are new to the industry"

Brisbane North forum attendee

The need to match workers to NDIS participants according to their needs and preferences also points to the value in new recruitment strategies. This ranges from seeking individuals who can perform multiple roles, all-rounders who can cover a wider range of duties including administration, those willing to take on split shifts, and those in the same cultural group or with similar lived experience to the participants requiring supports.

One of the concerns associated with the introduction of the NDIS was that it might lead to increased 'casualisation' of the workforce. Since the NDIS was introduced, participants now control funding and choose when and where their supports will be provided. Consequently, employers have less certainty about how many hours of support they will provide. One way they can deal with this uncertainty is by relying more on casual workers.

Only 39 per cent of surveyed employees were employed full-time and this may reflect the fact that 60 per cent of employees reported that they had dependent family members (Tables 8 and 9). Twenty-one per cent of surveyed employees were employed on a casual basis (Table 8), which is consistent with the proportion of casual workers in the Australian labour market.[21]

Survey findings related to the prevalence of casual employment do not align with the findings of other research on this issue. The qualitative data gathered through this survey also strongly indicated that there has been a change in the stability of hours and shifts available to the casual workforce since the introduction of the NDIS due to the increased choice and control of participants. In addition, data collected nationally indicates that around 40 per cent of the disability workforce is employed on a casual basis and that the rate of casualisation has been steadily increasing since 2015.[22]

Changing supply of NDIS workers

Given that demand for NDIS workers is likely to remain high, it is important to understand how well the supply of workers is responding to this demand. A valuable source of data on the change in the number of NDIS workers comes from Yellow Card and Yellow Card Exemption cardholders reported by the Queensland Department of Seniors, Disability Services and Aboriginal and Torres Strait Islander Partnerships. Any person working in either a paid or volunteer role in an environment where disability services are provided to a person with a disability must hold a Yellow Card or Yellow Card Exemption. If the person already holds a Blue Card (required when working or volunteering in certain roles with children, including children with disability), and intends to provide disability services to an adult with disability, the person must hold a Yellow Card or Yellow Card Exemption.[23]

Yellow Card and Yellow Card Exemption cardholders are required to renew their cards every three years. A significant increase in the number of Yellow Card and Yellow Card Exemption cardholders over time suggests that many new workers are entering the disability services workforce.

Figure 7 displays the number of Yellow Card (excluding volunteers) in Queensland in each of the six-month periods leading up to and following the roll-out of the NDIS in Queensland in January 2016. There were almost twice as many cardholders at 31 December 2019 (68,500) as there were at 31 December 2015 (35,400). This is a clear signal that the Queensland labour market is responding to increased demand for NDIS workers. Furthermore, this increase in number of Yellow Card cardholders was evident across all the regions studied in response to the roll-out of the NDIS.

21 The ABS (2018) reports that in August 2018 (when the most recent Characteristics of Employment Survey was carried out) only 25 per cent of employees were not entitled to paid leave (lack of entitlement to paid leave is one of the main indicators for casual employment)

22 National Disability Services. (2019). *State of the Disability Sector Report 2019*. Deakin: NDS. https://www.nds.org.au/news/state-of-the-disability-sector-report-2019-released

23 Queensland has committed to implementing nationally consistent worker screening under the NDIS which will expand the scope of screening requirements for people who are providing particular supports and services to people with disability.

Figure 7. Change in the number of Yellow Card and Yellow Card Exemption cardholders

Source: Queensland Department of Communities, Disability Services and Seniors

NDIS roll-out in Queensland

1. 1 January 2016 - Townsville, Charters Towers and Palm Island (selected groups)
2. 1 July 2016 - Townsville, Charters Towers (expanded groups)
3. 1 October 2016 – Townsville, Hinchinbrook, Burdekin, west to Mt Isa and to the Gulf of Carpentaria
4. 1 November 2016 – Mackay, Isaac and Whitsundays
5. 1 January 2017 – Toowoomba and west
6. 1 July 2017 – Ipswich, Lockyer, Scenic Rim and Somerset
7. 1 October 2017 – Bundaberg
8. 1 January 2018 – Rockhampton, Gladstone and west
9. 1 July 2018 – (Greatest number of participants) – Far North Qld, Fraser Coast and Burnett, South East Queensland (except Moreton Bay region)
10. 1 January 2019 – Moreton Bay region.

Workforce retention and utilisation

High rates of workforce attrition were identified by both employers and employees as an area of difficulty. This issue was most pronounced in relation to direct support workers among surveyed employers (Table 10). Reasons for high staff turnover emerging from the interviews and focus groups are attributed to factors such as the demanding nature of the work, inconsistent hours, lack of job security, and low pay levels. Workforce attrition can also have a flow-on impact to service delivery. One stakeholder reported receiving feedback from participants that, *"…every time I get a support worker, it's someone else. I do not know them. I have to tell my story again because they've moved on or whatever, and that's a lot for someone"* (Townsville Focus Group Attendee).

> " *[this work is] really hard and it takes its toll on the worker, which is why it's not something that people do for a length of time…you're not guaranteed full-time [and] it's also not really well-paid either"*
>
> *Townsville Focus Group Attendee*

More than half of employees and sole providers surveyed reported that they considered leaving their job either "at least somewhat", "quite a bit" or "a great deal". Despite these issues, it appears that both groups of workers can find meaning in their work. Four out of five workers (employees and sole providers) reported that their job satisfied their personal needs and that they looked forward to another day of work at least some of the time (Table 21).

There may be potential to meet some of the increased demand for NDIS services within the existing workforce. Thirty-nine per cent of surveyed employees reported that they would like to work additional hours (Table 11). Despite this latent capacity in the existing workforce, many employers felt that they were understaffed.

It may be that available shifts are at similar times and days so that existing staff are not available for the additional shifts. It may also be that the employees who seek more work are not employed by the employers who need more staff. Twenty-two per cent of surveyed employees were delivering NDIS-related services outside of their employing organisation, perhaps as independent workers. The difficulty in coordinating rostering arrangements between multiple employers may be preventing those other workers who seek more hours from doing the same.

The qualitative interviews and focus groups shed light on some of the rostering issues that lead to underutilisation of potentially available staff. These include:

- The need to match workers' skill sets with the requirements of each specific role.
- A lack of time for training and handover, resulting in a need for workers who can hit the ground running with an understanding of the work and reporting requirements.
- It is often not appropriate to channel several different staff through participants' homes and existing staff are consequently asked to work additional hours rather than engaging unfamiliar workers who may have extra capacity. This can lead to fatigue and burnout which may be a contributing factor to staff turnover.
- For individuals working for more than one employer, an attempt to fill their available hours for the week might mean that despite being listed as on-call, they are not always available as they are engaged elsewhere.

Workforce resilience

In the survey, employees were asked whether they were experiencing challenges that were affecting their ability to deliver services (Table 12). The most commonly reported challenges were:

33% Uncertainty associated with demand for services

29% Availability of adequate training

21% Requirements for specialist knowledge

17% Geographic location

During interviews and focus groups, some support workers suggested that they are the least informed in the system, often taking on participants without being provided with information about the person's NDIS plan or even participant goals. Employees also reported uncertainties with availability of work, waiting too long for shifts, not enough shifts being available or waiting on out-of-date equipment to be upgraded.

The subject of travel is another common theme, particularly in regional locations where services are sometimes provided to outlying communities. Stakeholders reported the NDIS does not provide adequate enough allowances to cover the cost and time required for travelling long distances.

On balance, the survey data suggest that most workers are experiencing stress, but they are nevertheless able to gain satisfaction from their work. It may be that some groups of workers are experiencing more stress than others. According to employers, turnover levels are relatively high amongst disability support workers and allied health professionals. These workers are most directly involved in the delivery of disability services and thus may be experiencing the brunt of any negative effects from the transition to the NDIS.

Employees describe some of the stressors in interviews and focus groups. The need for leaner organisations has led to additional stress. Burnout has been reported due to longer working hours and high expectations. Other employees reported experiencing issues around boundaries with participants or fielding complaints from clients when they can't understand the requirements or when participants' expectations cannot be met. An employer revealed that due to the casual nature of employment in the industry, many of their employees face pressures that they "…can't go away, they can't get a house, they can't go on holiday, they can't have babies" (Townsville Employer). Others have reported the need to get a second job due to there not being enough shifts to financially sustain themselves.

While these stressors are contributing factors to turnover, a common theme to emerge is that what often keeps people in the workforce is the NDIS participants. Some stakeholders also identified that they thrive on the stress and work better when there is a lot to do, highlighting some diversity in levels of resilience across the workforce.

"…I love the work, and I feel confident in what I'm doing"

Mackay employee

NDIS workforce skills

Key findings

- Technical skills relevant to the delivery of NDIS services are consistently identified as the most significant skills gap across the workforce.

- Soft skills such as interpersonal skills, adaptability and flexibility are increasingly important in the new customer-driven market.

- Non-accredited training is widely used within the sector, particularly for support workers, which reflects the varied importance placed on and experiences with accredited training by employers.

- The increase in new workers entering the NDIS sector has not been matched by an increase in the uptake of relevant VET qualifications.
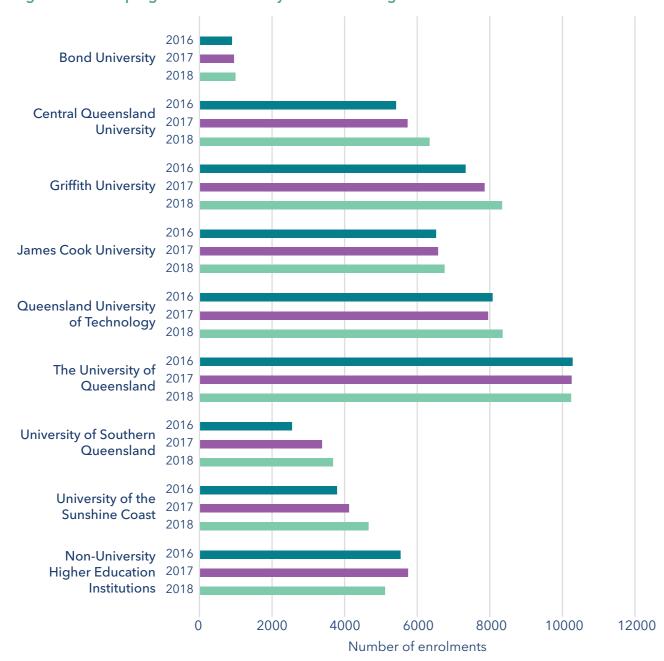
To understand how the NDIS is affecting skills needs, survey respondents were asked whether they experienced skills gaps across five specific skills areas. Amongst employers, employees and sole providers, technical skills represented the most significant gap. However, sole providers appeared to feel more confident about their skills than did the employees. Half of the sole providers reported that they had no skills gaps, whereas only 27 per cent of employees reported having no skills gaps. (Tables 13, 14 and 15)

	Technical Skills	Adaptive Skills	Collaborative Skills	None
Percentage of survey respondents identifying the following skills gaps				
Employers (in their current employees)	66%	62%	48%	-
Employees (in their current role)	57%	22%	24%	27%
Sole Traders (in their current role)	45%	18%	20%	50%
Percentage of employees identifying the following skills needed to develop in order to progress their career	59%	27%	31%	20%

Stakeholders and employers interviewed throughout the regions identify soft skills (including the right values, adaptability, flexibility) and employability skills as well as technical and administration skills as important for NDIS roles. Some indicated that customer service skills and communication skills will also be important in a customer-driven market.

Training data are useful both in terms of understanding the pipeline of future NDIS workers and as an indicator of skill levels. Figure 8 shows enrolments in health programs (which include allied health degrees) have either remained stable or increased at higher education institutions across Queensland. Increased enrolments are strongest at universities with a strong regional presence.[24] Graduates from these universities may be more likely to work in regional communities where allied health workers are in high demand. However, university enrolments are difficult to interpret as they do not provide sufficiently detailed information to determine whether students are likely to work in disability services.

Figure 8. Health program enrolments by Queensland higher education institutions

Number of enrolments

Changes in enrolments and completions in NDIS-relevant VET qualifications over time is shown in Figure 9. [25] With the exception of the Certificate IV in Disability, none of these qualifications are disability-specific and cover workers in areas such as Aged and Home Care. Commencements in the Certificate III in Individual Support - which has a stream for disability support workers - has remained relatively constant over the three years of the NDIS roll-out. It is reasonable to expect there would have been a commensurate growth in the uptake of VET qualifications to meet the growing workforce needs of the NDIS.

Figure 9. Commencements in relevant VET programs in Queensland

Queensland annual number of commencing students

■ 2016 ■ 2017 ■ 2018
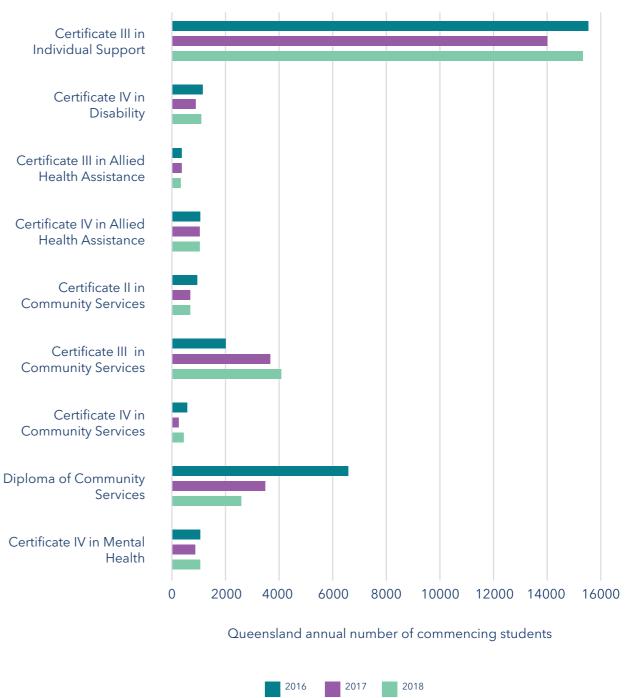
Source: VOCSTATS, NCVER

Source: Department of Education and Training. 2018. uCube – Higher Education Data Cube [Data cube]. http://highereducationstatistics.education.gov.au/

24   Department of Education and Training. (2018). *uCube – Higher Education Data Cube* [Data cube]. Brisbane: Queensland Government. http://highereducationstatistics.education.gov.au/

25   NCVER. (2020). *VOCSTATS*. Adelaide: National Centre for Vocational Education Research www.ncver.edu.au › research-and-statistics › vocstats

Traineeships provide an entry-level pathway for entering the workforce, however this training pathway is under-utilised in the disability sector. Research by Jobs Queensland and WorkAbility Queensland in 2018 identified barriers to greater uptake of traineeships in the sector that included a lack of training culture, low awareness of training pathways, few traineeships being offered and challenges associated with certain types of service delivery.[26] A range of strategies were identified to address these challenges. Stakeholders throughout the regions emphasised the value of traineeships in addressing recruitment and training challenges related to the NDIS.

"… [We] took on 12 school-based trainees and we had a 50% success rate in that we still have 50% of those school-based trainees as full employees now three years later"

Brisbane South focus group attendee

Figure 10. Commencements in Queensland in Certificate III in Individual Support or Disability traineeship and non-traineeship pathways 2016/17 – 2018/19[27]

Pathway	2016/17 Total	2017/18 Total	2018/19 Total
Traineeship	299	254	318
Non-traineeship	7446	7232	8524
Total	7745	7486	8842

Source: Department of Employment, Small Business and Training. 2020. Note: Data inclusive of funded training only

In 2018/19,

of the **more than 8,800** people that commenced a Certificate III in Individual Support in Queensland, only **around four in every 100** did so through a traineeship pathway.

Stakeholders across most regions regard the delivery of existing qualifications such as the Individual Support and Community Services certificates by some training providers as not adequately equipping future NDIS workers. There appears to be greater demand for specific skills not covered in accredited training. Concerns were also raised about the variability of outcomes between training providers.

Employers surveyed reported offering non-accredited training rather than accredited training to their employees (Table 17). Employers offer a range of support for employees to undertake skills development (Table 18). Around half of surveyed sole providers indicated a willingness to undertake accredited training, which is only slightly less than the stated willingness to undertake non-accredited training (Table 19).

"We find that there is quite a diverse level of competency that people come out with depending on the training organisation that they do their individual support qualification through"

Ipswich employer

Survey results highlight the emphasis NDIS employers currently place on non-accredited training

Types of training offered to employees

81% Non-accredited training

28% Accredited training

6% No training provided

Types of support offered for training

88% Opportunity to practice skills that are currently being developed

75% Mentoring / feedback

72% Flexible work arrangements

69% Paid time to undertake training

47% Payment of course fees

Sole trader willingness to undertake training

Which of the following types of training are you/would you consider undertaking?

56% Non-accredited training

51% Accredited training

18% No training

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26   Jobs Queensland and WorkAbility Queensland. (2018). *Building the NDIS Workforce Through Traineeships.* Ipswich: Jobs Queensland. https://jobsqueensland.qld.gov.au/resources/reports-and-plans/

27   Note that data includes all those undertaking the age and home and community streams, so the numbers completing traineeships in the disability sector specifically will be even lower.

While in-house training is currently prioritised by most stakeholders, providers indicated in interviews that they struggle to cover the cost of such training. One employer reflected, *"I think one of the more difficult things for us is NDIS won't fund training… say if a person's been working with someone for a period of time, and they're leaving, the NDIS doesn't allow the funding to do double-ups or shadow shifts, so that the person that's coming onboard learns about the [participant]"* (Brisbane Employer). One employee stated that they now only get one buddy shift before commencing work independently, whereas they used to *"…get to spend a few days with someone who's experienced who can take them through the ropes, who is then maybe rostered on with them"* (Mackay Employee).

In regional and remote locations, there are additional expenses associated with travel for staff to attend training or for training to be brought to the region. An employer reflected, *"Certainly, it [training] would be cheaper if we can have it in the regions. Plus, also, it's easier on rostering, as well. You're not sending somebody away for a few days"* (Mackay Employer). In some regional areas, organisations have introduced online training, however, this has not been embraced by everyone.

The need for workers themselves to absorb some of the costs of training featured strongly in interviews and focus groups, with reports of buddy shifts happening in employees' own time and training being self-funded. A Townsville stakeholder reported a growing expectation by some organisations for support workers to come fully trained, which put pressure on them to self-fund their own training.

There was also reported need for specialist knowledge in relation to mental health and positive behaviour support. Employers report that clients themselves are requesting workers with an understanding or experience of mental health. It is also reported that employees have left the sector because they find it challenging to deal with clients in confronting situations, and do not have adequate training to cope. In some cases, trainers have been brought in from overseas to deliver training in positive behaviour support.

> *"…positive behaviour support is a big area. A lot of people are looking for that training at the moment and it's hard to get."*
>
> *Townsville employee*

These challenges can be particularly pertinent in regional areas if training is not tailored to the population, as it may be too *"…clinical and so it's inflexible for culturally and linguistically diverse populations, for Aboriginal [and Torres Strait Islander] populations."* A Townsville employee also pointed out that very different skills are needed when dealing with guardianship cases, depending on whether you are dealing with the family or a public guardian.

Strengthening the NDIS workforce

This research shows that key stakeholders are positive about the impact of the transition to the NDIS with its increased focus on enhancing the social and economic participation and choice and control of people with disability. However, the transition has not been without challenges related to the NDIS workforce. This is particularly the case for providers and employees in more regional locations where the shortage of allied health professionals and support workers, the cost of transport and lack of local specialised training options are more acute.

The delivery of the NDIS is causing organisations to adjust their business strategies and most workers report that it has changed the nature of their role. Workers commonly report finding the uncertainty about long term demand for services challenging. There has been a change in the stability of hours and shifts available to the workforce due to the increased choice and control of participants. There is evidence of high levels of turnover, particularly amongst new staff which suggests that more effective targeted recruitment activity would improve efficiency.

The allied health workforce (especially Occupational Therapists and Physiotherapists) is not growing in line with demand for their services. Apart from seeking to attract skilled migrant workers in these categories, the use of delegated allied health assistants represents a potential opportunity to meet demand and manage budgets efficiently.

Direct support workers (the largest group in the workforce) also appear to be in high demand. While the survey sample was relatively small, it is significant that employers commonly (77 per cent) reported needing more direct support workers. The fact that 35 per cent of employers in the survey reported needing 10 or more direct support workers just to meet the needs of their current NDIS participants indicates that shortages of workers are likely to be impacting on the quality of service delivery and inhibiting economic growth. In addition, 40 per cent of employers reported that they experienced high turnover within their disability support worker staff.

The COVID-19 pandemic has had a significant impact on Queensland's labour market. Now more than ever, a strategic approach to NDIS market and workforce development is required. This will provide significant gains for Queensland, in terms of strengthening the NDIS workforce and for our economy and society more broadly as we recover from the health and economic impacts of the pandemic.

This research identified there are six key areas for action.

Place-based approaches

Jobs Queensland research consistently points to the value and importance of place-based approaches to skills and workforce development across Queensland's diverse regions. In the disability sector, previous WorkAbility Queensland activities have demonstrated the value of place-based approaches that provide industry leadership and leverage the value of the local skills ecosystem. The value of this place-based approach was frequently cited in interviews and focus groups as part of this research, and stakeholders in all regions emphasised the need for local solutions to be applied to local challenges.

Recommendation 1

It is recommended that further funding for industry-led and place-based approaches would support regional workforce planning and development, as well as localised attraction and job matching. This approach may be reasonably broadened to extend beyond the NDIS workforce and include aged care and other relevant sectors. Place-based approaches should be supported by regional coordinators who act as a local driver for workforce priorities, including Allied Health Assistants strategies, targeted recruitment of workers in demand in the region, boosting jobs and retention in regional and remote locations, local traineeships, and online learning.

NDIS-related career promotion

NDIS employers are using a variety of recruitment strategies including word of mouth, WorkAbility Jobs Roadshows, information sessions and forums, as well as promoting the opportunities that are available in the industry through employment agencies, schools and other stakeholders. A common barrier is that jobs and careers in the NDIS continue to have a low profile and appear to be undervalued. A targeted career promotion campaign would aid in boosting the profile of the sector, attracting young, diverse people to the industry, helping to address skills gaps and contribute to addressing the workforce shortages. This is a national issue and may benefit from a coordinated approach across Australia.

A key finding from this research is that although workers find aspects of their work challenging, the challenges are mitigated by the meaningfulness of their work. Workers report that they gain satisfaction from their ability to make a difference in someone else's life. They also believe that the NDIS is improving opportunities for them to participate and contribute to the lives of people with disability. By sharing stories and capturing evidence about the ways in which NDIS workers support social inclusion and improve quality of life, there is an opportunity to simultaneously recognise the value of employees' work whilst also promoting the value of this work externally.

The research findings also highlight a lack of diversity in the current NDIS workforce; providers participating in the interviews emphasised that this has made it difficult for them to provide workers that suit the needs and preferences of many NDIS participants. There is value in targeting recruitment efforts to a wider range of potential workers. This includes (but is not limited to) attracting more males, people with lived experience of disability, younger people, members of the LGBTIQ community, Aboriginal and Torres Strait Islander peoples and people from culturally and linguistically diverse backgrounds.

Recommendation 2

It is recommended that the Queensland Government work with other jurisdictions to deliver a coordinated career promotion campaign, linked to training pathways and job matching, to support attraction and retention of workers in the NDIS. Such a campaign should focus on:

- *raising awareness of the nature and value of NDIS work*
- *leveraging the intrinsic rewards provided by NDIS work*
- *promoting entry level and professional roles*
- *attracting a more diverse pool of workers*
- *championing the social and economic participation of people with disability*
- *linking to employment services, training programs and qualifications*
- *engaging employers, employees and people with disability in campaign design.*

Traineeships

Stakeholders throughout the regions suggested that traineeships may be another way to assist in addressing recruitment and training challenges. There are policy and historical barriers to implementing traineeships in the disability sector, in particular due to the large proportion of casual workers in entry level roles and the supervision arrangements in the industry. Previous research undertaken by Jobs Queensland and WorkAbility Queensland has identified the opportunity that traineeships represent to build the NDIS workforce, yet challenges remain.

Recommendation 3

It is recommended the Queensland Government work with WorkAbility Queensland to establish a new customised traineeship pathway for entry level roles in disability support that prioritise on-the-job learning and support qualification attainment in the industry. Such a traineeship pathway should address:

- *eligibility for casual workers*
- *appropriate trainee supervision in the community service context*
- *effective on-the-job learning and assessment strategies*
- *financial support required to ensure success*
- *application to varied trainee cohorts (e.g. school-based, new labour market entrant, career changer)*
- *education and support for employers*
- *potential application of the traineeship model in the related community aged care sector.*

Allied Health Assistants

The research findings highlight the shortage of allied health professionals, particularly Physiotherapists and Occupational Therapists in regional and remote locations. These shortages may be impacting the growth in NDIS participants in some regions due to delays in service provision and long waiting lists. Stakeholders participating in interviews and focus groups, including self-managed NDIS participants, suggested that greater use of Delegated Allied Health Assistants could help reduce the demand on allied health professionals and related waiting lists for allied health services, while also providing a more cost-effective service for NDIS participants.

The role of allied health assistants is commonly used in aged care and hospital settings supported by Certificate III and IV qualifications and related skills sets. However, there appear to be practical barriers to uptake by disability providers and allied health professionals. Stakeholders participating in focus groups suggested that these barriers relate to a reluctance of Local Area Coordinators and NDIS planners to include allied health assistant services in the plans of NDIS participants. Stakeholders further speculated that the role is poorly understood among disability providers and there may be some reluctance on the part of allied health professionals to delegate services to assistants.

Recommendation 4

It is recommended the Queensland Government invest in an action research project that supports the establishment of allied health assistant roles in priority areas such as rural and remote locations. The action research project should aim to:

- *have significant involvement and buy-in from sector stakeholders*
- *identify and remove barriers to implementation of the role*
- *consider financial support and incentives for establishment of these roles*
- *deliver appropriate training to suitable candidates*
- *provide training and support to allied health professionals in relation to delegated practice*
- *provide telehealth training and support to enable remote service delivery*
- *promote the allied health assistant role to NDIS planners, plan managers and self-managed participants*
- *engage allied health professional associations, employers, VET and university stakeholders, assistants and people with disability in design and implementation*
- *provide guidance to support wider uptake of the roles across industry, including engagement with the VET sector, universities and professional associations to promote the role.*

Improving information dissemination to assist in future planning

One of the challenges in strategic workforce planning for the NDIS is the lack of suitable data sets to comprehensively measure and monitor the disability workforce. The standard classification for industries (ANZSIC) does not specify the disability sector and the standard classification for occupations (ANZSCO) combines aged care and disability support workers into the single category of Aged and Disabled Carers. Many occupations that are common in the NDIS, such as Occupational Therapists, are also common in hospital settings and aged care, so it is not possible to determine if changes in these occupations reflect changes in the NDIS workforce. Some existing data sets, such as Yellow Card applications, provide valuable insights to inform future workforce planning. However, even this data set has limited information and despite a range of efforts, there remains limited specific data on the NDIS workforce. Developing new data sets will provide workforce data and projections specific to this workforce.

Recommendation 5

It is recommended the Queensland Government work with other jurisdictions to identify and capitalise on existing and potential administrative data sets that will help guide future NDIS workforce policy planning and implementation. This work should consider:

- *gathering more detailed worker data as part of the national worker screening program (such as role, workplace setting, qualifications, etc.)*

- *identifying and using relevant data from NDIS plan information that provides insight into demand and supply of workforce*

- *revision of ANZSIC and ANZSCO to explicitly include the disability sector and key roles*

- *establishing an NDIS workforce census similar to those previously undertaken in aged care.*

Addressing skills gaps and training needs

The findings from this research indicate that lack of technical skills (such as manual handling, CPR, medications, and specialist skills such as positive behaviour support) represents the key skills gap in the NDIS workforce. Although providers indicated a preference for workers to complete an appropriate accredited qualification, many providers interviewed and those participating in the focus groups expressed concern about the quality of VET training delivered, noting a lack of fit for purpose. Stakeholders reported some variability in the quality of training depending on the training provider. This suggests the need for greater industry involvement in the assessment of NDIS-relevant competencies. The research findings also show strong support for involving people with disabilities, carers and family members in the training of the NDIS workforce. The NDIS has a strong focus on improving the social and economic participation of people with disability and emphasises tailored supports that provide choice and control for participants. The provision of training services by people with lived experience of disability will enhance the relevance of the training while also providing a means by which people with disability can improve their economic independence.

Stakeholders also suggested that there is a lack of funding support under the NDIS for the provision of in-house training of NDIS workers. At the same time, many employers were unaware of the funding and supports available to grow and train their workforce.

Recommendation 6

It is recommended the Queensland Government work with WorkAbility Queensland to improve both accredited and non-accredited training for the NDIS workforce. This includes through existing avenues such as the NDIS Training and Skills Support Strategy and other avenues as necessary. This work should consider:

- *increased engagement between the sector and training providers to help inform delivery and assessment strategies*

- *avenues to increase the use of industry assessment of students and/or industry validation of assessment strategies*

- *strategies to increase opportunities for people with disability, their carers and family members to be engaged as trainers and assessors*

- *new models that allow individuals and their families to provide on-the-job learning environments and assessment centres in their homes*

- *training specifically targeted to self-managed NDIS participants in areas such as micro-business skills*

- *ensuring training for this workforce is targeted to unregistered as well as registered NDIS providers*

- *exploration of how the training system can better support in-house and mandatory training provided by employers*

- *development of high-quality online learning and assessment resources for NDIS worker training*

- *promotion of the training subsidies and incentives for NDIS-related occupations already provided by the Queensland and Australian Governments.*

Glossary

Adzuna Australia: Online site that aggregates advertised job information from several employment websites.

Australian and New Zealand Standard Classification of Occupations (ANZSCO), 2013 (Version 1.3)

Managers plan, organise, direct, control, coordinate and review the operations of government, commercial, agricultural, industrial, non-profit and other organisations, and departments.

Professionals perform analytical, conceptual and creative tasks through the application of theoretical knowledge and experience in the fields of the arts, media, business, design, engineering, the physical and life sciences, transport, education, health, information and communication technology, the law, social sciences and social welfare.

Technicians and Trades Workers perform a variety of skilled tasks, applying broad or in-depth technical, trade or industry specific knowledge, often in support of scientific, engineering, building and manufacturing activities.

Community and Personal Service Workers assist Health Professionals in the provision of patient care, provide information and support on a range of social welfare matters, and provide other services in the areas of aged care and childcare, education support, hospitality, defence, policing and emergency services, security, travel and tourism, fitness, sports and personal services.

Clerical and Administrative Workers provide support to Managers, Professionals and organisations by organising, storing, manipulating and retrieving information.

Sales Workers sell goods, services and property, and provide sales support in areas such as operating cash registers and displaying and demonstrating goods.

Machinery Operators and Drivers operate machines, plant, vehicles and other equipment to perform a range of agricultural, manufacturing and construction functions, move materials, and transport passengers and freight.

Labourers perform a variety of routine and repetitive physical tasks using hand and power tools, and machines either as an individual or as part of a team assisting more skilled workers such as Trades Workers, and Machinery Operators and Drivers.

Australian and New Zealand Standard Industrial Classification (ANZSIC), 2006 (Revision 2.0)

Other Social Assistance Services: This class consists of units mainly engaged in providing a wide variety of social support services directly to their clients. These services do not include accommodation services, except on a short stay basis.

Other Residential Care Services: This class consists of units mainly engaged in providing residential care (except aged care) combined with either nursing, supervisory or other types of care as required (including medical).

Other Allied Health Services: This class consists of units mainly engaged in providing allied health care services not elsewhere classified. These units consist of independent allied health practitioners not elsewhere classified mainly engaged in providing health care and treatment services.

Physiotherapy Services: This class consists of units of physiotherapists mainly engaged in providing assessment, diagnosis, treatment (such as manipulation, massage and therapeutic exercise) and help in preventing disorders of human movement.

Optometry and Optical Dispensing: This class consists of units of registered optometrists mainly engaged in testing sight, diagnosing sight defects or in prescribing or dispensing spectacles or contact lenses on prescription.

Capacity Building Supports: A support that enables a NDIS participant to build their independence and skills.

Capital Supports: An investment, such as assistive technologies - equipment, home or vehicle modifications, or for Specialist Disability Accommodation.

Core Supports: Supports that enable NDIS participants to complete activities of daily living.

Employability Skills: Ability to perform and innovate in the workplace.

Focus Groups: Where stakeholders meet to discuss and provide feedback on specific topics.

Forum: Designated meeting where views and ideas can be expressed and shared.

Internet Vacancy Index (IVI): The IVI is based on a count of online job advertisements newly lodged on three main job boards (SEEK, CareerOne and Australian JobSearch) during the month.

NDIS: The National Disability Insurance Scheme was initiated by the Australian Government for Australians with disability (including intellectual, physical, sensory and psycho-social disabilities).

NDIS Participants: Persons with disability recognised under the NDIS and eligible for NDIS support.

NDIS Providers: Organisations and sole traders providing services subsidised or supported by the NDIS.

NDIS Workforce: The human capital delivering or supporting the provision of NDIS funded services.

Non-accredited Training: Training which does not form part of a nationally recognised VET or higher education qualification.

Primary Research: New data collected by a person or group directly, rather than being reliant on data collected by others.

Qualitative Research: Primary research involving collecting non-numerical data through mediums such as asking open ended questions.

Self-Managed Participant: Participants in the NDIS scheme, who manage their own NDIS funding.

Yellow Card: Criminal history check for use by a a NDIS non-government service provider on behalf of a person engaged or seeking to be engaged by the service provider. Disability Services Act, 2006, Section 52.

Appendix

Table 1: Diversity characteristics of NDIS employees (Employee Survey)

Background information	% of employees answering "yes"
Do you identify as someone with disability?	11
Does a member of your family have a disability?	36
Do you identify as someone from an Aboriginal and/or Torres Strait Islander background?	3
Do you identify as someone from a culturally and/or linguistically diverse background?	9

Table 2: Qualification levels of NDIS employees (Employee Survey)

What is your highest level of qualification?	% of employees
Post-graduate Degree/Certificate	20
Bachelor's Degree	16
Diploma/Associate Diploma	31
VET Certificate	11
High School Certificate (QCE or equivalent)	13
Other	9

Table 3: Gender of NDIS sole providers (Sole Provider Survey)

Gender	% of sole providers
Male	35
Female	65

Table 4: Diversity characteristics of NDIS sole providers (Sole Provider Survey)

Background information	% of sole providers answering "yes"
Do you identify as someone with disability?	14
Does a member of your family have a disability?	34
Do you identify as someone from an Aboriginal and/or Torres Strait Islander background?	0
Do you identify as someone from a culturally and/or linguistically diverse background?	4

Table 5: Qualification levels of NDIS sole providers (Sole Provider Survey)

What is your highest level of qualification?	% of sole providers
Post-Graduate Degree/Certificate	40
Bachelor's Degree	23
Diploma/Associate Diploma	21
VET Certificate	6
Other	9

Table 6: Workforce profiles (Employer Survey)

What % of your NDIS workforce falls into each of the following categories?	% of employers answering					
	0%	1 to 20%	20 to 40%	40 to 60%	60 to 80%	80 to 100%
Local or regional managers	12	48	16	16	4	4
Plan managers	37	47	5	5	0	5
Support coordinators	21	54	13	8	0	4
Administration staff	7	61	0	25	4	4
Allied health professionals	38	38	6	6	6	6
Allied health assistants	71	14	0	7	0	7
Direct support workers	4	4	4	11	30	48
Tradesperson	63	25	6	6	0	0
Transport	54	31	8	0	0	8
Other	67	11	0	11	0	11

Table 7: Additional workforce needs (Employer Survey)

How many more staff would you ideally have in order to meet the needs of current NDIS participants?	% of employers answering				
Type of staff needed	No more	One more	Between one and five more	Between five and ten more	Ten or more
Regional or local managers	68	16	12	4	0
Plan managers	67	14	19	0	0
Support coordinators	50	21	29	0	0
Administration staff	38	19	31	8	4
Allied health professionals	59	14	23	0	5
Allied health assistants	62	14	19	5	0
Direct support workers	23	0	27	15	35
Tradespeople	84	5	11	0	0
Transport staff	89	5	5	0	0

Table 8: Employment type in NDIS services (Employee Survey)

What is your current employment status?	% of employees
Full-time (contract)	8
Full-time (continuing)	31
Part-time (contract)	19
Part-time (continuing)	20
Casual	21

Table 9: Family responsibilities of NDIS employees (Employee Survey)

What family responsibilities do you have?	% of employees
None	40
Dependent partner	16
Dependent child or children	48
Dependent grandchildren	2
Dependent family member(s)	6
Dependent parent(s)	2
Dependent other relative(s)	2

Table 10: Workforce turnover (Employer Survey)

Which of the following roles in your organisation experience high turnover?	% employers identifying high turnover in the role
Regional or local managers	0
Plan managers	0
Support coordinators	7
Administration staff	7
Allied health professionals	20
Allied health assistants	0
Direct support workers	40
None (our organisation does not have a problem with employee retention)	47

Table 11: Employee additional work hours (Employee Survey)

Working hours	% employees answering "yes"
Are you working any additional hours in NDIS-related services outside this organisation?	22
If hours were available, would you like to work additional hours?	39

Table 12: Challenges identified (Employee Survey)

Please indicate any challenges you are facing that are contributing to gaps in skills and impacting on service delivery	% of employees
Require specialist knowledge	21
Geographic location of the outlet	17
Lack of availability of adequate training	29
Unknown demand for long-term services	33

Table 13: Workforce skills gaps (Employer Survey)

Do your employees have skills gaps in any of the following areas?	% employers answering yes
Foundation skills – general literacy, numeracy and communication skills and the ability to investigate and integrate knowledge	48
Adaptive skills – the ability to adapt and apply skills/ knowledge and work independently.	62
Collaborative skills – teamwork and interpersonal skills	48
Technical skills – application of professional and technical knowledge and standards.	66
Employability skills – ability to perform and innovate in the workplace.	48

Table 14: Skills needed to perform in current role (Employee Survey)

What (if any) types of skills do you need to develop further to perform your current role in the NDIS sector?	% of employees
Foundation skills	6
Adaptive skills	22
Collaborative skills	24
Technical skills	57
Employability skills	18
None	27
Unsure	4

Table 15: Skills needed to perform in current role (Sole Provider Survey)

What (if any) types of skills do you need to develop further to perform your current role in the NDIS sector?	% of sole providers
Foundation skills	18
Adaptive skills	18
Collaborative skills	20
Technical skills	45
Employability skills	18
None	50

Table 16: Skills needed for career progression (Employee Survey)

What (if any) types of skills do you need to develop further to progress further in your career within the NDIS sector?	% of employees
Foundation skills	12
Adaptive skills	27
Collaborative skills	31
Technical skills	59
Employability skills	18
None	20
Unsure	8

Table 17: Types of training offered by NDIS employers (Employer Survey)

Type of training offered to employees	% employers reported
Accredited training (for example VET)	28
Non-accredited training	81
No training provided	6
Other	0

Table 18: Support offered for employee training (Employer Survey)

Type of support for training	% employers reported
Payment of course fees	47
Flexible working arrangements	72
Paid time to undertake training	69
Opportunity to practice skills that are being developed	88
Mentoring/feedback	75
Other	0

Table 19: Types of further training being considered (Sole Provider Survey)

Which of the following types of further training are you/would you consider undertaking?	% of sole providers
Accredited training (e.g. VET)	51
Non-accredited	56
No further training	18

Table 20: Workforce resilience (Employee Survey)

On a scale of 1 (strongly disagree) to 5 (strongly agree) please respond to the following:	% of employees answering "agree" or "strongly agree"
I don't let work stress get on top of me	35
I think I'm good at dealing with work pressures	54
I don't let bad performance or outcomes at work affect my confidence	39
I'm good at dealing with setbacks at work (e.g. poor performance, negative feedback)	43

Table 21: Turnover intentions (Employee Survey)

On a scale of 1 (not at all) and 5 (a great deal), how often do you:	% of employees answering, "at least somewhat", "quite a bit", or "a great deal"
Dream about getting another job that will better suit your personal needs?	57
Get frustrated when not given the opportunity at work to achieve your personal work-related goals?	61
Consider leaving your job?	54
Feel you would be likely to accept another job at the same compensation level should it be offered to you?	52
Feel that your current job is satisfying your personal needs?	76
Look forward to another day at work?	80

Table 22: Availability of Employee Assistance Programs (Employee Survey)

Availability of an EAP	% of employees answering "yes"
Does your Employer provide an Employee Assistance Program (EAP), e.g. Counselling?	80

Table 23: Workforce resilience (Sole Provider Survey)

On a scale of 1 (strongly disagree) to 5 (strongly agree) please respond to the following:	% of sole providers answering "agree" or "strongly agree"
I don't let work stress get on top of me	43
I think I'm good at dealing with work pressures	68
I don't let bad performance or outcomes at work affect my confidence	46
I'm good at dealing with setbacks at work (e.g., poor performance, negative feedback)	49

Table 24: Turnover intentions (Sole Provider Survey)

On a scale of 1 (not at all) and 5 (a great deal), how often do you:	% of sole providers answering, "at least somewhat", "quite a bit", or "a great deal"
Dream about getting another job that will better suit your personal needs?	51
Get frustrated when not given the opportunity at work to achieve your personal work-related goals?	70
Consider leaving your job?	54
Feel you would be likely to accept another job at the same compensation level should it be offered to you?	41
Feel that your current job is satisfying your personal needs?	81
Look forward to another day at work?	81