



WORKABILITY
Building tomorrow's NDIS Workforce



WORKABILITY QLD

NDIS WORKFORCE RESEARCH REPORT:
TOWNSVILLE NDIS REGION 2019

This research was undertaken for and supported by Jobs Queensland as part of the NDIS Workforce Research Project. For further information on the NDIS Workforce Research project visit <https://jobsqueensland.qld.gov.au/projects/ndis-workforce/>

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1 EXECUTIVE SUMMARY

This report outlines the NDIS key workforce themes and issues identified in the Townsville NDIS region drawn from secondary data analysis and qualitative interviews and focus groups conducted between May and August 2019. The key findings from the research are:

- Our research stakeholders report that the **NDIS** is a significant social and economic reform that will improve the lives of people with disability and create significant jobs and economic growth.
- While **transition** has been difficult for participants, providers and workers, the benefits of the scheme are recognised and there is a strong commitment to make it work.
- Growth in the number of **NDIS participants** has been slower than predicted in Queensland and Townsville, but growth continues. The Department of Social Services now predicts the NDIS will be fully operational by 2023.
- Accordingly, **jobs growth** has been slower than predicted but already as many as 1,000 new jobs have been created in Townsville NDIS region as a result of the NDIS. This is counter to the trend in job ads across the region and suggests the NDIS is supporting an otherwise difficult jobs market. Job advertisements and employer interviews give us insight into the kinds of roles and skills that are sought after.
- There is some evidence in this report suggesting that the **shortage** of NDIS workers is itself providing a barrier to the growth of the NDIS market, including long waiting lists, and qualitative data from employers report that skill shortages impact on participant growth.
- Jobs will continue to grow in Townsville NDIS region and across Queensland, however recruitment and skilling strategies will need to support this.
- A wide variety of **roles** including back office and direct support roles are required. Highest growth in NDIS expenditure is in individual support, which includes a variety of roles from assistance with daily living and household support to assisting with social and community participation and help in getting and keeping a job.
- The roles in highest **demand** are allied health professionals, and employers report that there are long waiting lists. The qualitative research suggests that the growth in the number of allied health professionals does not reflect the increased demand as evidenced by the number of providers reporting that they have long waiting lists, particularly for occupational therapists. Consideration should be given to extending the role of allied health assistants in a paraprofessional role to support allied health professionals.
- Providers emphasise **soft skills and matching** workers with the needs and preferences of individual participants as the most important factors in recruitment. There may be an opportunity for specific selection strategies and recruitment tools to assist employers to find the right workforce.
- For **training**, generally, employers prefer a Certificate III in either Community Services or Individual Support for support workers, however, the most significant growth in uptake of relevant enrolments since the roll-out of the NDIS has been for Cert II and III in Community Services, with only moderate growth in Cert III in Individual Support. This may indicate that some new workers may not be getting the training they need.
- Previously, disability workplaces have been the **training ground** for support workers and new allied health graduates. Providers and Local Area Coordinators (LACs) suggest that some

experienced workers are leaving employment to work as sole providers or work directly with self-managing or plan-managed participants. This leaves employers struggling to find experienced workers, but also means the traditional training ground has diminished.

- Regardless of the qualifications and experience of workers, it is always important to provide **induction training** to workers around the needs of the individual NDIS participant and their family. There may be an opportunity to involve the participant and family in this training in a more active way.
- There are several **skill sets** for NDIS workers that the Queensland government **subsidises** (see *Funding and Support for Skill Development in NDIS Related Occupations in Queensland* for further information), however qualitative data suggests that these subsidies have not been widely used in the region. These include behaviour support skills, induction to disability, medications assistance, and others. There needs to be greater promotion to NDIS employers about the subsidised qualifications available to them.
- Given the proportion of NDIS participants with autism or intellectual disabilities, there may be demand for more knowledge and skills of these disabilities. These may be better delivered as **non-accredited training** and could be offered in different locations in Townsville and other NDIS regions.
- Other strategies to make training **affordable** in the region include incorporating online and group training.

2 INTRODUCTION

The NDIS commenced roll-out in Queensland in 2016 and is now operational in all Queensland regions. At the commencement of the roll-out in Queensland, the market for disability supports was estimated to grow from 48,000 people in 2016 to 91,000 in 2019 (NDIS, 2016). The State's workforce was also expected to grow from 13,550 – 16,550 full time equivalent (FTE) employees to more than double by the end of 2018-19 (NDIS, 2016).

The most recent Council of Australian Governments (COAG) Disability Reform Council, Quarterly Performance Report (2019) for the period 01 January 2019 - 31 March 2019 shows that in total, over 46,000 participants have now been supported by the NDIS in Queensland, with 27% receiving support for the first time. The related market of active services providers has also continued to grow with 2,689 registered service providers (of which 931 were individual/sole trader operated businesses and 1,758 were companies or organisations) as at 31 March 2019.

Jobs Queensland, in partnership with WorkAbility Queensland, has commissioned research to investigate employer, employee and sole provider experience in NDIS roll-out sites across Queensland over the period to 2021, when the jobs growth potential of the NDIS is expected to be realised. The research assesses and responds to the skills demand and supply issues resulting from the NDIS rollout across Queensland with a focus on the following NDIS regions: Townsville; Mackay; Brisbane North and South; Toowoomba; and Ipswich as well as analysis of annual State-wide trends. The research will investigate current training and skills development for the sector in the region to help inform Jobs Queensland's advice to government and will also be used to inform other stakeholders on the best ways to meet the jobs growth and skills needs for the NDIS.

This report presents the key findings from research undertaken in Townsville NDIS region including analysis of existing data sources and qualitative analysis and potential local solutions.

3 FINDINGS AND DISCUSSION

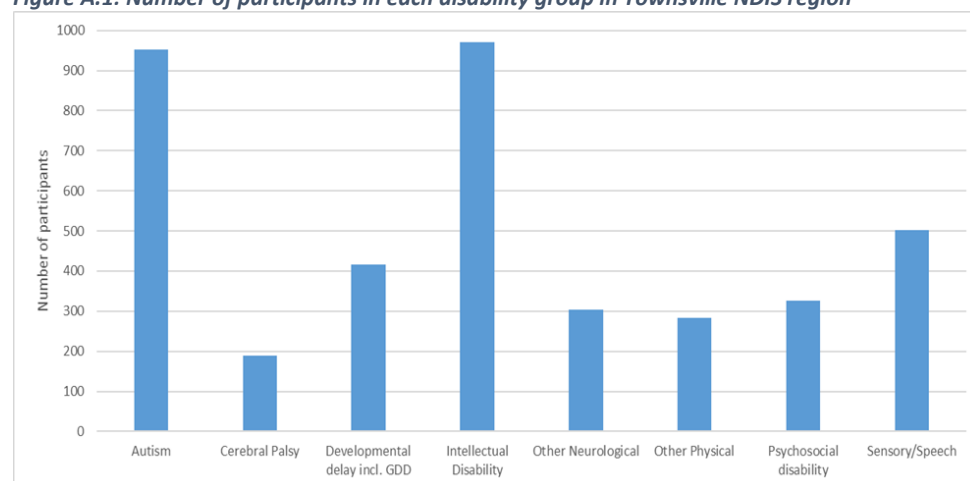
These findings draw on existing data sources and interviews with 13 stakeholders comprising five NDIS employers and three LACs who participated in focus groups, and two employers, an employee, a LAC and sole provider who each participated in separate interviews. The potential solutions draw on these findings as well as suggested strategies identified by 41 stakeholders who attended a regional forum in Townsville on 27 August 2019 at which the findings were presented and potential solutions explored.

3.1 Demand for NDIS Services

The 2016 Queensland Market Position Statement (NDIS, 2016) reported that an estimated 2,100 additional participants would enter the Townsville market between 2016 and 2019, resulting in 5,300 participants for the Townsville NDIS region in 2019. However, the take-up of the NDIS is occurring more slowly than projected. As at 31 March 2019, there were 3,953 active, registered NDIS participants in the Townsville NDIS region. This is an estimated increase of 753 participants since the introduction of the NDIS, or just 36% of the predicted growth in scheme participants.

The largest category of participants is those with intellectual disability, followed by participants with autism and participants with a sensory or speech disability (Figure A.1).

Figure A.1: Number of participants in each disability group in Townsville NDIS region

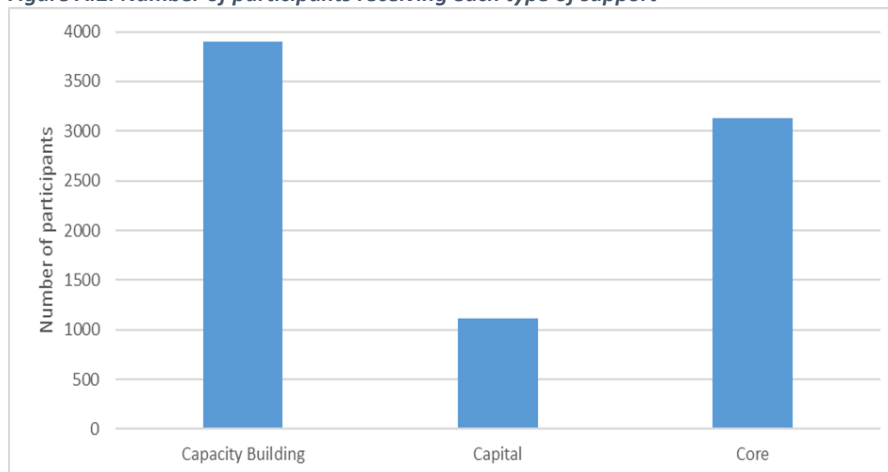


Source: NDIS. (2019). Participant numbers and plan budgets data [Data set]. Retrieved from <https://www.ndis.gov.au/about-us/data-and-insights/data/participant-numbers-and-plan-budgets-data>

The NDIS participant plan data (2019) shows the largest category of approved NDIS support is for capacity building, which includes assessment, therapy and/or training by a professional such as an occupational therapist, physiotherapist or registered nurse. This category also includes early childhood intervention for occupational therapy and speech therapy assessment and intervention, along with a range of services provided by direct support worker roles.

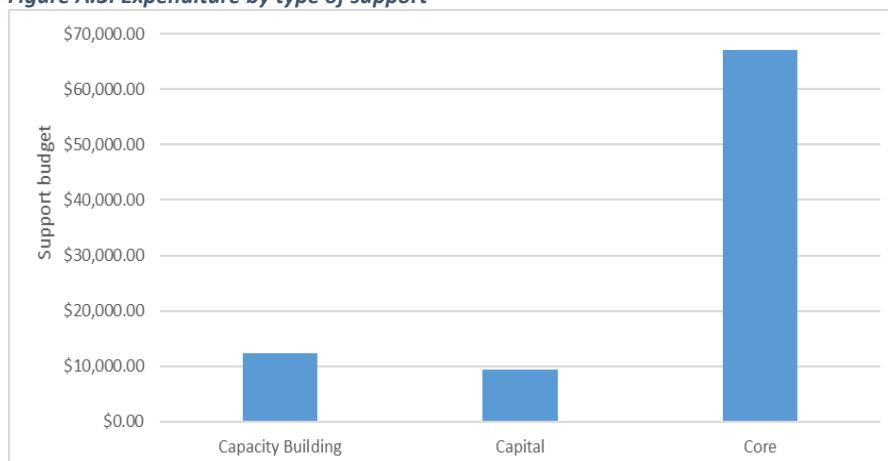
The second largest category is for core supports, which includes assistance with daily living; assistance with daily personal activities; assistance with household tasks, assistance in shared living arrangements / supported independent living, transport; and assistance with social and community participation (Figure A.2). These are all services provided by direct support workers. Figure A.3 shows that by far the greatest expenditure is for core supports, which reflects the high demand for direct support workers delivering these supports.

Figure A.2: Number of participants receiving each type of support



Source: NDIS. (2019). Participant numbers and plan budgets data [Data set]. Retrieved from <https://www.ndis.gov.au/about-us/data-and-insights/data/participant-numbers-and-plan-budgets-data>

Figure A.3: Expenditure by type of support

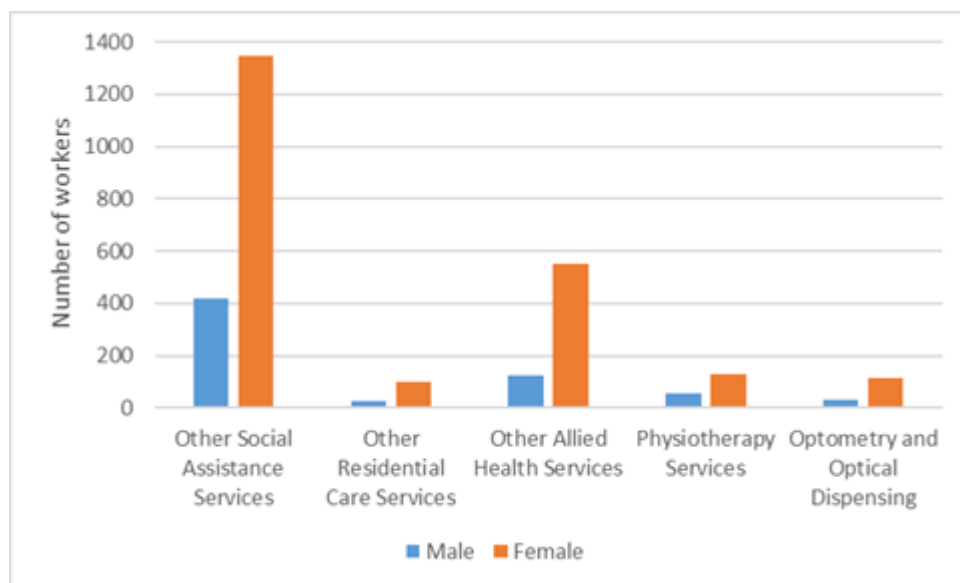


Source: NDIS. (2019). Participant numbers and plan budgets data [Data set]. Retrieved from <https://www.ndis.gov.au/about-us/data-and-insights/data/participant-numbers-and-plan-budgets-data>

3.2 Pre-NDIS workforce

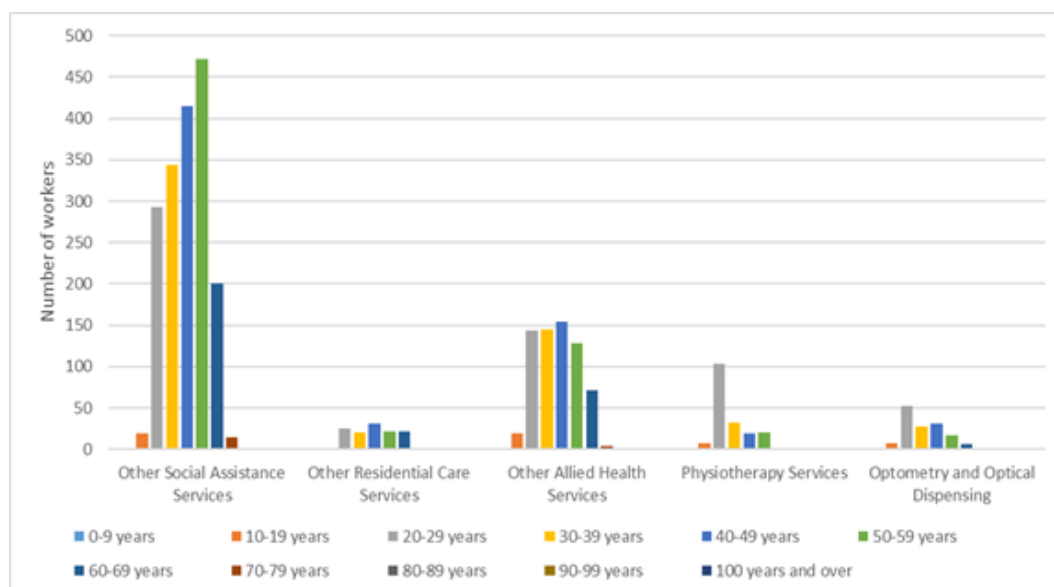
The 2016 ABS Census data shows that the largest number of workers employed in NDIS-relevant industry sectors in the Townsville region are female (see Figure A.4) in the age groups 50-59 years for social assistance services and 40-49 years for residential care services and allied health services. However, the largest number of workers employed in physiotherapy services and optometry and optical dispensing is in the age group 20-29 years (Figure A.5).

Figure A.4: Gender profile of workers employed in NDIS-relevant industry sectors in Townsville NDIS Region



Source: Australian Bureau of Statistics 2016, Census of Population and Housing (2016), TableBuilder. Findings based on use of ABS TableBuilder data.

Figure A.5: Age profile of workers employed in NDIS-relevant industry sectors in Townsville NDIS Region



Source: Australian Bureau of Statistics 2016, Census of Population and Housing (2016), TableBuilder. Findings based on use of ABS TableBuilder data.

ABS Census data shows that the largest number of workers employed in NDIS-relevant sectors are non-Indigenous and English speaking. These figures come from the 2016 Census and therefore may not represent current labour market conditions, but they do provide some insight into whether there was capacity for new workers to enter the NDIS workforce at around the time that the NDIS was introduced. This data combined suggests there is

significant opportunity in the region to target these under-represented populations to grow the NDIS workforce in the Townsville region.

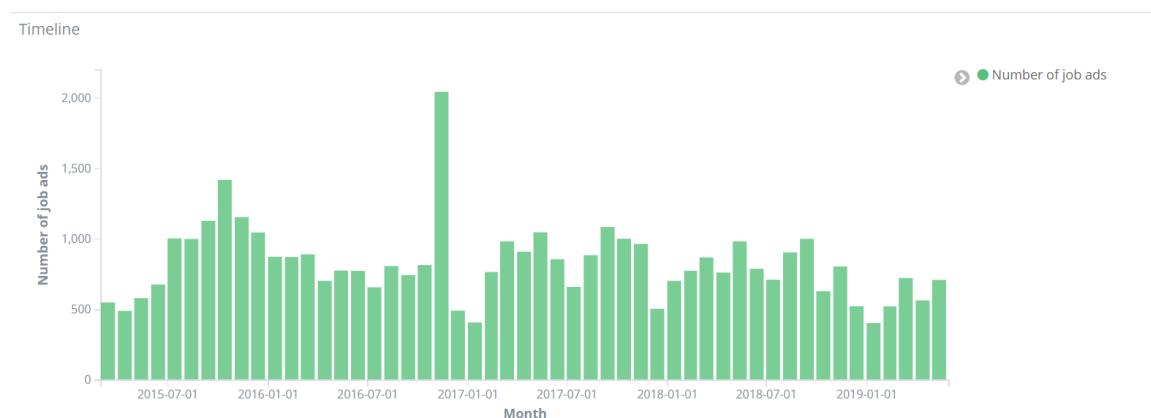
3.3 Demand for NDIS workers

The 2016 Queensland Market Position statement (NDIS, 2016) predicted that there would be 5,300 participants for the Townsville NDIS region by June 2019. However, NDIS participant and plan data (2019) shows that as at 31 March 2019, there were 3,953 active, registered NDIS participants in the Townsville region. This is an estimated increase of 1,347 participants since the introduction of the NDIS, that is, 64% of the predicted growth in scheme participants.

This jobs growth is a result of increased levels of support for people receiving supports prior to the NDIS, as well as the significant growth in the number of people expected to receive supports under the NDIS. As we have seen participant growth has been slower than predicted, nevertheless we see evidence of significant NDIS jobs growth in the Townsville NDIS region already.

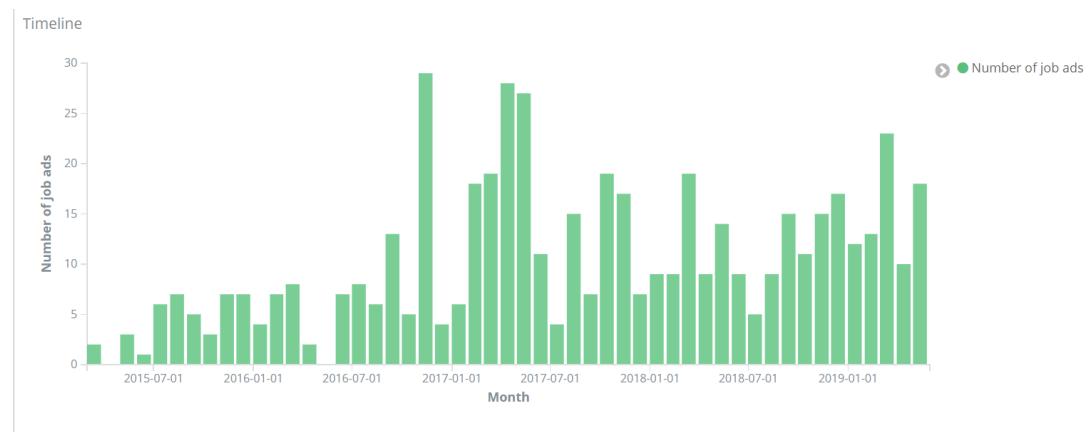
Analysis of job advertisements provides insight into the trends in workforce demand for NDIS related positions in the Townsville NDIS region. Although there appears to have been a small decline in job advertisements for the Townsville NDIS region overall since July 2015, there has been a significant *increase* in job ads mentioning 'disability services' and 'NDIS' during the same period (see Figure A.7).

Figure A.6: Monthly count of all job ads for Townsville NDIS Region



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. skills.csiro.au. CSIRO's Data61 acknowledges the kind contribution of Adzuna Australia's datasets to this research.

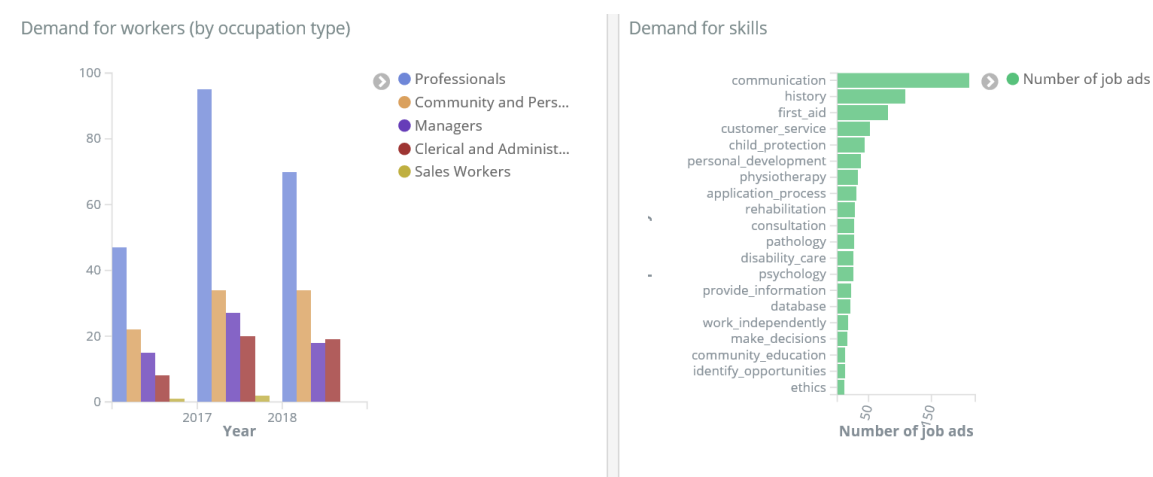
Figure A.7: Monthly count of “disability services” or “NDIS” job ads in Townsville NDIS Region



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. skills.csiro.au. CSIRO's Data61 acknowledges the kind contribution of Adzuna Australia's datasets to this research.

Figure A.8 shows the mix of roles that are being advertised, with the largest category being for professional occupations. While the number of professional roles is likely to be relatively small compared with direct support workers, these job advertisements suggest skill shortages are highest for professional roles (for example occupational therapists, physiotherapists, speech pathologists and psychologists). Other roles with significant job ads growth include community and personal service workers, managers and clerical and administrative workers. The right-hand side of Figure A.8 lists the types of attributes (e.g., the ability to communicate) that were mentioned in these job ads. 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.

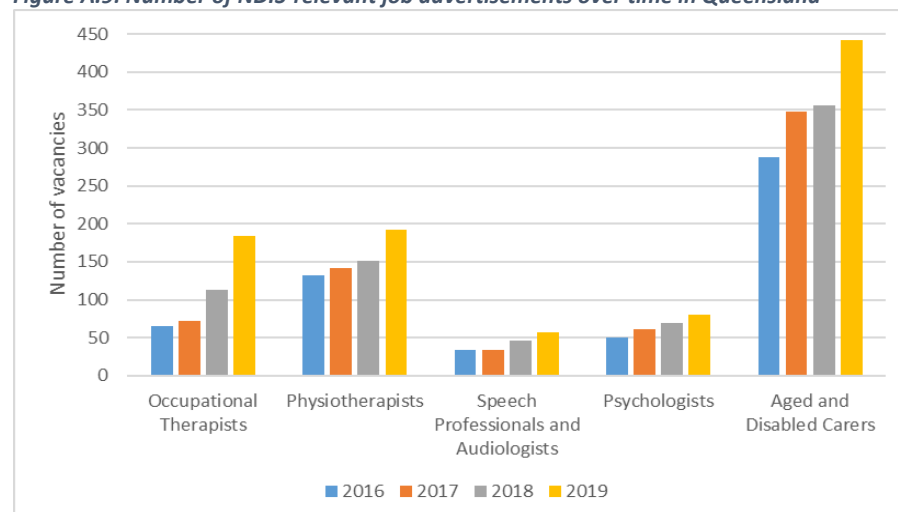
Figure A.8: Types of occupations and attributes mentioned in “NDIS” and “disability services” job ads in Townsville NDIS Region



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. skills.csiro.au. CSIRO's Data61 acknowledges the kind contribution of Adzuna Australia's datasets to this research.

For the purpose of comparison, we also provide job ads information from the Internet Vacancy Index (IVI), which concords vacancies from the three major job boards. Figure A.9 shows that across Queensland there has been an increase in job ads for aged and disabled carers, psychologists and physiotherapists. It should be noted that it is not possible to determine whether the job ads in this data are relevant to the NDIS or for other sectors which employ these workers (e.g., aged care, community and health services).

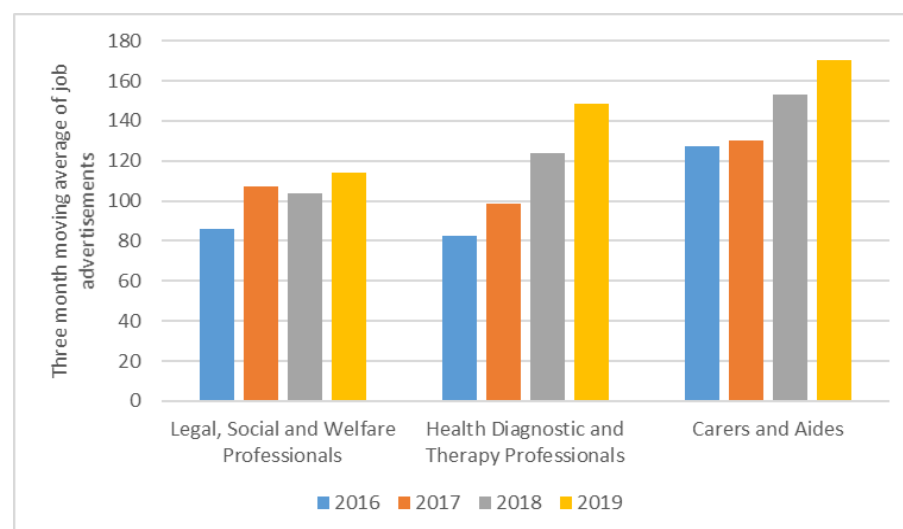
Figure A.9: Number of NDIS-relevant job advertisements over time in Queensland



Source: Department of Jobs and Small Business. (2019). IVI Detailed Occupation Data – March 2006 onwards (Excel [Data set]). Retrieved from <http://lmip.gov.au/default.aspx?LMIP/GainInsights/VacancyReport>

The data retrieved from the IVI and presented in Figure A.10 is for Far North Queensland, which is the closest fit in this data set for the Townsville NDIS region. Although it is not possible to classify these job ads at the same occupational level, these graphs suggest that there has been strong growth in job ads across NDIS-relevant occupations in Far North Queensland.

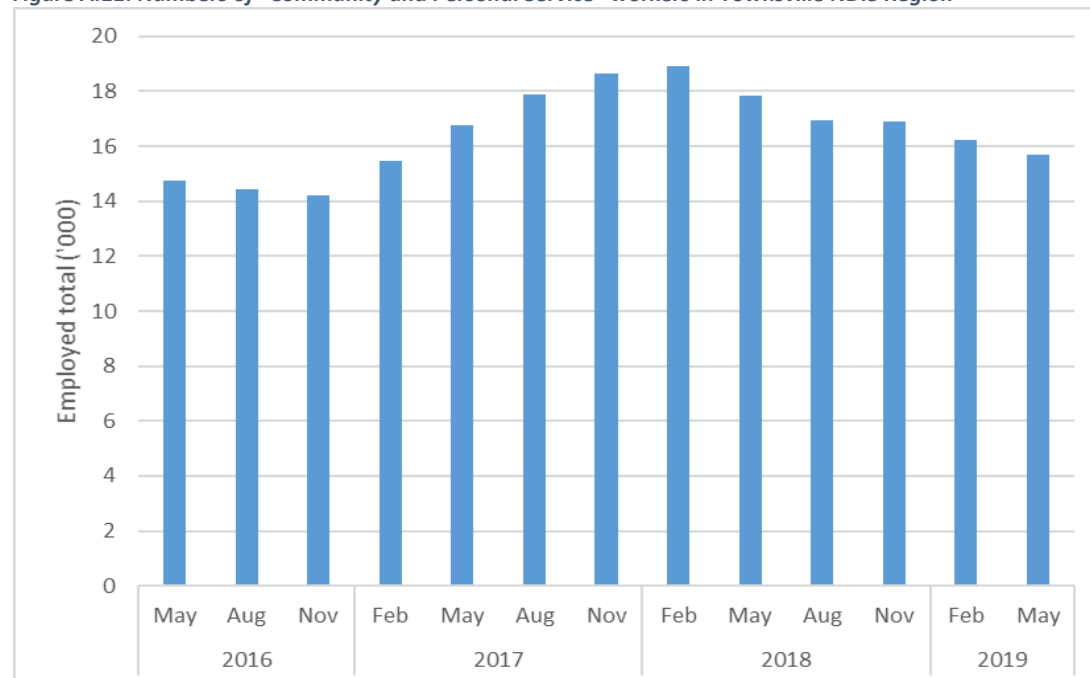
Figure A.10: Average number of job advertisements in NDIS-relevant occupations in Far North Queensland



Source: Department of Jobs and Small Business. (2019). IVI Regional Data - May 2010 onwards (Excel [Data set]). Retrieved from <http://lmip.gov.au/default.aspx?LMIP/GainInsights/VacancyReport>

There are indications that the supply of workers is increasing in response to these demand factors. The ABS quarterly labour force figures (Figure A.11) show that the number of community and personal services workers (which includes NDIS support workers along with other community services roles) has increased by approximately 500 workers since 2016.

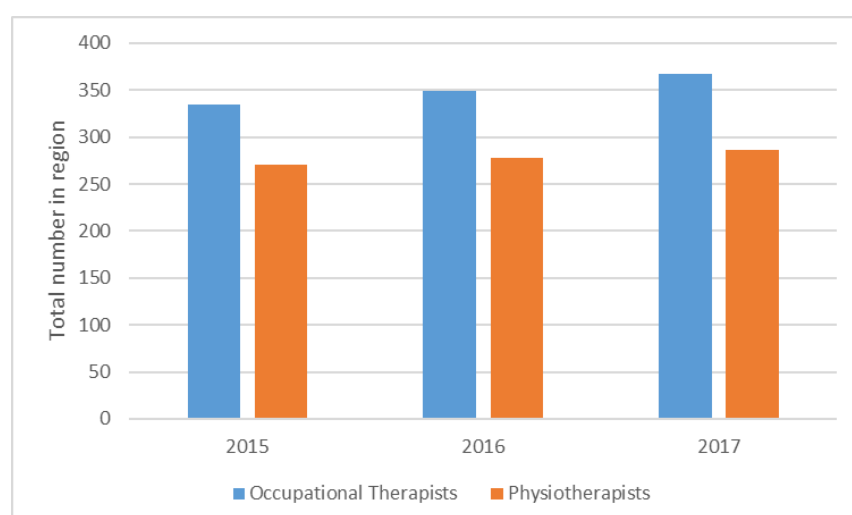
Figure A.11: Numbers of “Community and Personal Service” workers in Townsville NDIS Region



Source: Australian Bureau of Statistics 2018, *Labour Force, Australia, Detailed, Quarterly, Nov 2018, RQ2 - Employed persons by Labour market region (ASGS), Occupation major group (ANZSCO) and Sex, Annual averages of the preceding four quarters, Year to August 1999 onwards (Pivot Table)*, data cube: Excel spreadsheet, cat. no. 6291.0.55.003, viewed 18 July 2019, < <https://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/6291.0.55.003May%202019?OpenDocument>>

The number of occupational therapists and physiotherapists working in the Townsville NDIS region (key professional roles for the NDIS workforce) has also increased since 2016 according to the National Health Workforce Dataset (Figure A.12) although at a relatively slow rate. These datasets cannot tell us whether these workers are choosing to work in the NDIS workforce or in other fields where these workers are required (e.g., aged care, community services and health services).

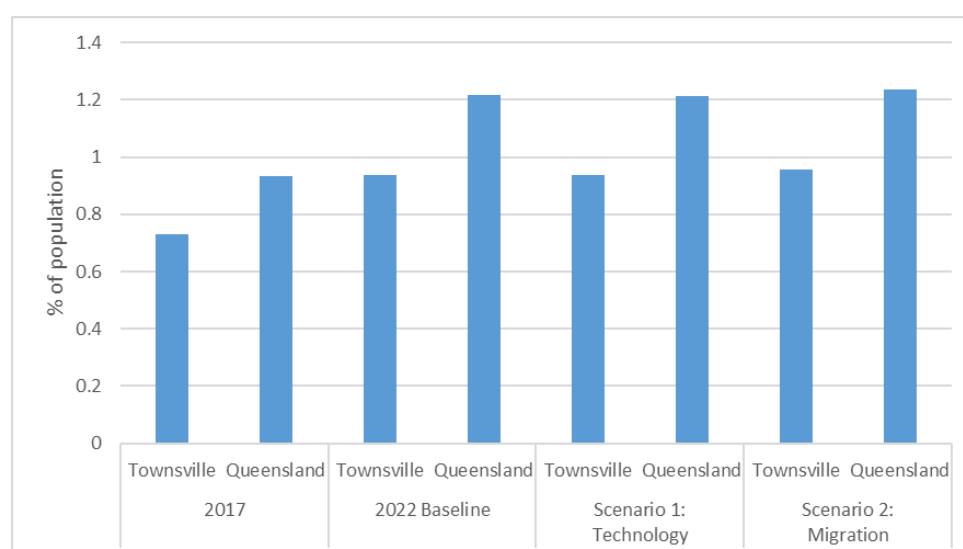
Figure A.12: Numbers of “Physiotherapists” and “Occupational Therapists” in Townsville NDIS Region



Source: Health Workforce Data. (2017). National Health Workforce Dataset [Dataset]. Retrieved from: <https://hwd.health.gov.au/datatool.html>

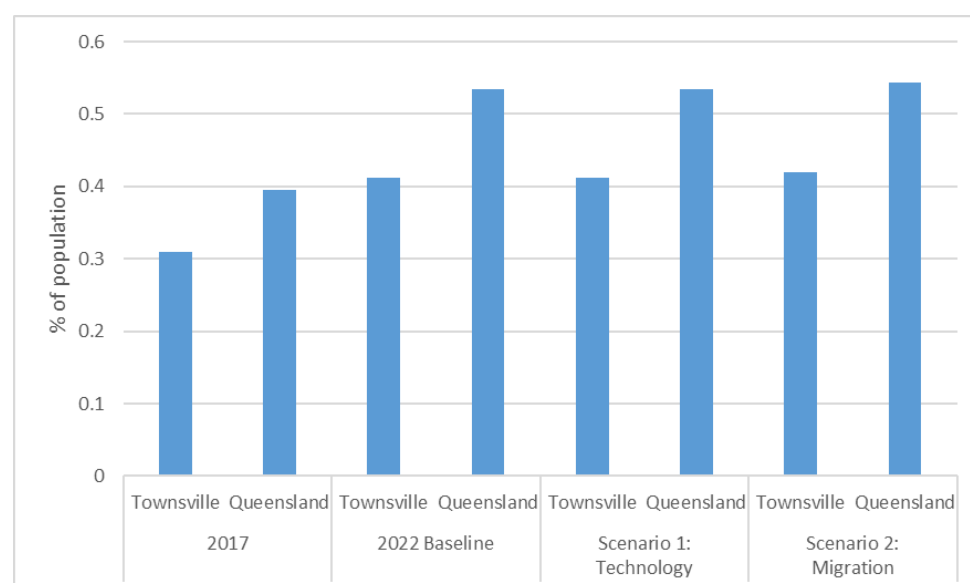
For additional insight into demand for NDIS workers we can look to employment projections provided by Jobs Queensland. These projections allow us to compare employment trends in Townsville NDIS region relative to employment trends across Queensland both for the ‘Other Social Assistance’ industry subgroup and for carers and aides more specifically (Figure A.13 and A.14). These employment projections are generated under a range of probable scenarios. Both in Townsville NDIS region and in Queensland there is expected to be growth in jobs within the “Other Social Assistance Services” industry subgroup. Furthermore, carers and aides are expected to account for almost half of the growth in this industry subgroup.

Figure A.13: Employment projections for the “Other Social Assistance Services” industry sector in Townsville NDIS Region



Source: Jobs Queensland. (2018). Anticipating Future Skills: Townsville [Data set]. Retrieved from <https://jobsqueensland.qld.gov.au/anticipating-future-skills/>

Figure A.14: Employment projections for “Carers and Aides” in the “Other Social Assistance Services” industry sector in Townsville NDIS Region



Source: Jobs Queensland. (2018). *Anticipating Future Skills: Townsville [Data set]*. Retrieved from <https://jobsqueensland.qld.gov.au/anticipating-future-skills/>

These different sources of data are consistent in suggesting that demand for allied health and direct support workers in Townsville NDIS region has almost doubled with the roll-out of the NDIS. It is necessary to look at other sources of data to determine whether the supply of workers is increasing in response to this demand.

We can gain some insight into this issue by exploring trends in Yellow Card applications. Yellow Card applications are required for anyone engaged by a non-government service provider at a place where disability services are provided to adults. The number of Yellow Card applications in the Townsville NDIS region grew from approximately 290 in the six months to June 2016 to around 710 applications in the six months to June 2018 (Figure A.15). While these applications include renewals for existing workers, they are the clearest indication of the significant number of new NDIS jobs in the region and suggest that as many as 1,000 additional people have been employed in the Townsville NDIS region since commencement of the NDIS in 2016.

Figure A.15: Number of paid worker applications and Yellow Card exemptions in Townsville NDIS Region



Source: Yellow Card data supplied by Queensland Department of Communities, Disability Services and Seniors.

Although none of these data sources is conclusive on its own, together they suggest that the supply of NDIS workers is increasing over time. However, the supply of professional workers appears to be slow relative to the increase in demand for professional workers.

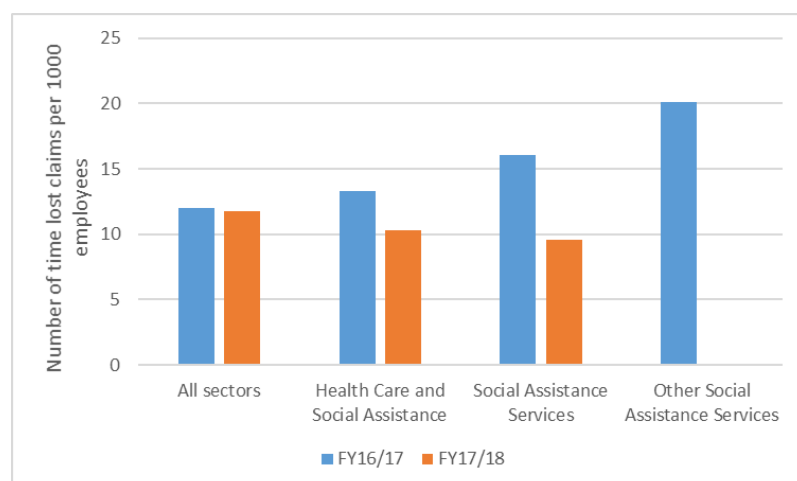
3.4 Impact of NDIS Transition

Stakeholders indicated that the introduction of the NDIS has been a “revolution” and a “transformation”. Focus group participants cite examples of individuals with disability whose lives have been transformed and confirm that the NDIS has opened opportunities for people with disability who have not previously received services. Similarly, an NDIS provider/employer suggests that the NDIS holds providers accountable to participants and holds great potential for participants. One aspect of this is evident from stakeholders who commented on the way in which self-managing participants are exercising choice and control in recruiting their own support workers who are often not registered NDIS providers.

The findings also highlight the need for providers to respond to a greater diversity of needs and demands for services within a very different market-driven model. Stakeholders suggest that changes in the model of funding has created a new “business world” and a more competitive environment, with providers now accountable more directly to participants since they are no longer guaranteed funding. In this way, as an employee notes, the shift to the NDIS has made providers more responsive to participants’ needs.

Workers compensation data provided by the Office of Industrial Relations Queensland shows that the rate of claims from workers in the ‘Other Social Assistance Services’ sector (where many NDIS workers would be located) is significantly higher than that reported in the health sector or across the Townsville NDIS region a whole (Figure A.16). These data provide one indication that workforce well-being may be relatively low in the sector.

Figure A.16: Number of time lost claims per 1,000 employees² in Townsville NDIS Region



Source: The claims and wages data comes from the Office of Industrial Relations Queensland Scheme Analysis database (QSA) as at 30 June 2018, and the labour force figures used in our estimates come from the ABS Cat No 6291.0.55.003 [Australian Bureau of Statistics, Labour Force, Queensland (Ave May to Feb quarter)].

Qualitative findings add further evidence of the demand in the Townsville NDIS region for both direct support workers and allied health professionals, particularly occupational therapists and speech therapists. Stakeholders report the need for greater flexibility to accommodate the varying needs and wants of people with disabilities and an increased need to match support workers with the needs of individual NDIS participants.

Focus group participants highlight the challenges of balancing demand and supply of support workers, with one stakeholder noting it can be difficult to find support workers for NDIS participants with challenging behaviours. Providers/employers in one of the focus groups reported that they have employed 12-14 support workers in the last six months and are looking to recruit ten support workers at present to meet the current demand. They are planning to double their workforce by the end of the year, noting the difficulties of recruiting support workers in a saturated market. This provides evidence that the shortage of direct support workers may be constraining growth in the NDIS market.

Stakeholders in interviews and focus groups note a high turnover of support workers, which they attributed to factors such as the demanding nature of the work, the increasing casualisation of the workforce and relatively low pay levels. The impact of this high turnover of support workers is regarded by several stakeholders as creating pressures on labour supply in an environment where there is already a shortage of suitable support workers.

Stakeholders report a lack of availability of qualified allied health professionals to meet the needs of the region. This is particularly the case for occupational therapists and speech therapists, which is reported by stakeholders to have contributed to NDIS participants waiting between six and twelve months for an appointment. One LAC further highlights that this is particularly the case for children with disability awaiting specialist therapy services. One LAC also suggests that some allied health professionals have chosen to not register as NDIS providers and are instead providing services directly to self-managing and plan-managed NDIS participants. This suggests the requirements of NDIS provider registration is presenting a barrier to access by agency managed participants to allied health professionals.

Stakeholders participating in the interviews and focus groups noted that the transition to the NDIS has been significant with LACs and a sole provider suggesting that the introduction of the NDIS has been a “revolution” and a “transformation”. LAC focus group participants cite examples of individuals with disability whose lives have been transformed and confirm that the NDIS has opened opportunities for people with disability who have not previously received services. Similarly, an NDIS provider/employer suggests that the NDIS holds providers accountable to participants and holds great potential for participants. One aspect of this is evident from stakeholders who commented on the way in which self-managing participants are exercising choice and control in recruiting their own support workers who are often not registered NDIS providers.

The findings also highlight the need for providers to respond to a greater diversity of needs and demands for services within a very different market-driven model. Focus group participants also suggest that changes in the model of funding has created a new “business world” and a more competitive environment, with providers now accountable more directly to participants since they are no longer guaranteed funding. In this way, as an employee notes, the shift to the NDIS has made providers more responsive to participants’ needs. An NDIS provider/employer shares that while she has always worked in a person-centred way making the transition to the NDIS model relatively easy, some of the other providers have had trouble adapting to the market-driven approach. An employee who observes that while the organisation she works for has slowly adapted to the new system, there remains some misunderstanding about how the NDIS operates. Another employee describes the challenges she has experienced as a support worker, who under the new model of operation is required to work across several different clients, making it more difficult to form strong relationships with clients. This employee also reports that her organisation does not have the resources to provide enough support for workers.

These difficulties experienced by stakeholders during this transition phase are not surprising given the rapid increase in the number of people with disability entering the NDIS for the first time, the challenges noted to have been experienced by providers transitioning from a block-funded model of support to a market-driven approach and the need for people with disability to be supported in navigating a complex new system of operation in which they now have choice and control over the disability supports they receive (Productivity Commission, 2017).

3.5 Skills required

To understand what skills are needed within the workforce we analysed the skills that are sought after in ‘NDIS’ or ‘disability services’ job advertisements. By far the most significant attribute identified in these job advertisements refers to communication (e.g., the ability to communicate effectively with a variety of people with disability). Other skills identified in the Townsville NDIS region included first-aid, customer service, physiotherapy, psychology, disability care and ability to work independently (see Figure A.6).

Qualitative data shows a strong recurring theme amongst interviewees and focus group participants of the need for workers with an appropriate mix of generic and specific skills as well as personal values that are a good fit with the NDIS focus on empowering people with disabilities to make decisions about, and exercise control over their lives. The generic skills most often reported include people skills, being strengths-based, being able to provide

person-centred services, empathy, the ability to communicate effectively, ability to listen, being genuine and caring, honesty and transparency.

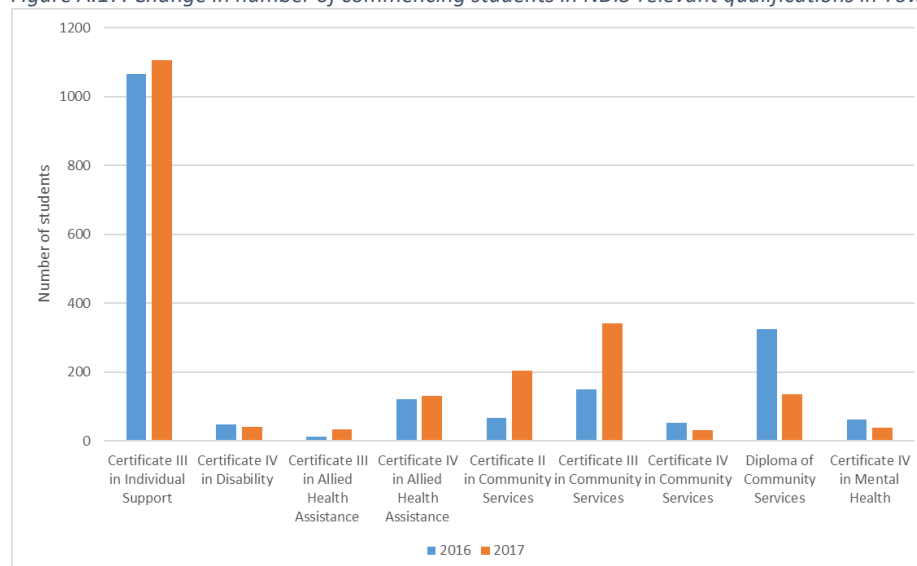
While stakeholders emphasise the importance of “soft skills” and a good fit with organisational and NDIS values, providers/employers also recognise the need for their staff to develop specialised skills for disability work as well as other skills specific to the needs of the person with disability. There was a strong recurring theme around the need to upskill workers in mental health with one employer also highlighting the need for workers to have an awareness of suicide and prevention. Another highlighted the need for direct support workers to have an understanding about working with people who have sensory processing challenges.

The new NDIS Quality and Safeguards Framework involves arrangements for planning, delivering and reporting restrictive practices for NDIS participants. One employer noted a knowledge gap among support workers around these new restrictive practices’ guidelines, as well as the need for workers with specific skills to develop and monitor restrictive practices. Another suggested that workers need to better understand the requirements when working with participants who are under guardianship.

3.6 Training

Information about supply of skills is less clear. The most relevant vocational qualification to NDIS work is the Certificate III in Individual Support, which is recognised as the entry level benchmark for disability as well as aged and community care. Vocational student commencements in this qualification in Townsville NDIS region have remained relatively stable in 2016 and 2017. Commencements in other relevant vocational qualifications are relatively small, except for Certificate II and Certificate III in Community Services, which are more generic industry qualifications that may support NDIS jobs (Figure A.17).

Figure A.17: Change in number of commencing students in NDIS-relevant qualifications in Townsville NDIS Region



Source: VOCSTATS <<http://www.ncver.edu.au/resources/vocstats.html>>, extracted on 06/06/19

While stakeholders emphasise the importance of recruiting staff based on their interpersonal skills and values, they acknowledge that for some workers a certificate

qualification, specifically a Certificate III in a relevant field, is required. However, there is strong consensus evident from the qualitative data that employers perceive there to be a gap in the training provided to support the staff recruited. As a sole-provider shares, *“...a lot of places are just hiring people, not necessarily with a Cert III at all, but hiring them based on their value base, but aren't providing them the training that they need to get up to speed with things that they should be doing”*. Similarly, an employer expresses disappointment that the sector is not being more responsive in training support workers through inductions and in-house training.

With respect to allied health professionals, one employer suggested that the sector is primarily attracting graduates straight from university who have limited if any experience working in this field. Moreover, this employer noted that many allied health professionals are setting up as private providers but lack the experience and mentoring they require to work with people with disability. Another employer commented that allied health graduates who complete their training in Townsville are leaving the region to take up positions in Brisbane.

The cost of training (both the provision of training itself and the loss of staff time in participating in training) is a recurring challenge expressed by providers/employers interviewed. This is consistent with other reports that suggest that the NDIS pricing model does not provide sufficient funding levels to ensure that workers get the training they need (Ryan & Stanford, 2018). This issue is further exacerbated in regional and remote locations due to the expenses associated with travel for staff to attend training or for training to be brought to the region.

4 POTENTIAL LOCAL SOLUTIONS AND FINDINGS FROM FORUMS

The findings from this first round of research undertaken in the Townsville NDIS region have identified both challenges and opportunities associated with the roll-out of the NDIS in the region. This section focuses on possible solutions to the identified challenges.

4.1 Meeting the increased demand

The findings show that the greatest demand in the region is for allied health professionals and for the variety of roles responsible for direct support, however there is also demand for other roles such as managers, clerical and administrative workers, and for workers providing supports outside the traditional disability sector – such as cleaning, home maintenance and sports and recreation. The following strategies may assist the sector to meet this demand:

4.2 Matching support workers to the needs and wants of NDIS participants

The need to match NDIS participants according to their needs and preferences points to the value in targeting recruitment efforts to a wider range of potential workers, including people with disability, younger people, men, Aboriginal and Torres Strait Islander peoples, people from culturally and linguistically diverse backgrounds and those identifying with the Lesbian, Gay, Bisexual, Transgender and Intersex communities.

4.2.1 Innovative recruitment strategies

Stakeholders attending the Townsville forum suggested more innovative strategies for promoting NDIS career opportunities to people from more diverse backgrounds is required.

Stakeholders highlighted the need to promote NDIS careers in a more positive way and to challenge stereotypes through more appropriate visual materials.

4.2.2 Addressing the shortage of allied health professionals

To offset the shortage of allied health professionals, it may be important for NDIS providers to consider new roles for allied health assistants and therapy assistants, as have been more widely utilised in aged care and hospital settings. An increase in the number of allied health and therapy assistants has the potential to reduce the time demands on allied health professionals and provide more hours of support to participants within their existing funding.

4.3 Addressing training needs

Stakeholders suggested a range of strategies that could address workforce training needs as discussed in the following sections.

4.3.1 Reducing training costs

The recurring theme from qualitative interview data is the cost of the provision of training beyond basic induction of workers. These costs relate to the training itself, the demands on workers' time and the cost of providing training in the region. The provision of more training opportunities online is one potential solution to reducing the cost associated with travel for workers in the region.

4.3.2 Promoting subsidised training opportunities

Greater promotion of subsidised training other incentives for NDIS related occupations provided by the Queensland Government and Commonwealth Government could also assist employers in better supporting their staff to obtain relevant skills and qualifications. Qualifications such as Certificate III in Individual Support (Disability) and Certificate III in Allied Health Assistants can be studied as a traineeship pathway. Employers may be eligible to access support and funding for their staff (see *Funding and Support for Skill Development in NDIS Related Occupations in Queensland* for further information).

4.3.3 Promoting traineeships

Consistent with the findings documented in the Building the NDIS workforce through traineeships report (2018) our findings suggest the potential for greater promotion of traineeships that provide greater flexibility to address the challenges reported by employers in supporting workers to undertake training. These solutions may include addressing the balance between on-the-job and off-the-job training, exploring different employment arrangements that address the needs of an increasingly casualised workforce and delivering more modules online.

4.3.4 Pooling resources

Another potential solution is to make better use of collaborative solutions whereby a group of regional providers pool their resources to bring specialist trainers to the region.

Stakeholders attending the forum suggested the need for short training skills sets modules such as managing challenging behaviour and teamwork.

4.3.5 Potential portable training scheme

Consideration could also be given to the establishment of a portable training scheme similar to that proposed by Ryan and Stanford (2018) in which workers accrue portable training entitlements based on the hours they have delivered NDIS supports, which are transferrable across providers and can be counted towards the achievement of ongoing qualifications.

5 CONCLUSION AND IMPLICATIONS FOR TOWNSVILLE NDIS REGION

The findings from this first phase of the research undertaken in Townsville NDIS region show significant jobs growth as a result of the NDIS. Demand for NDIS workers continues, and while a variety of back office and other roles are required, demand is greatest for NDIS support workers and allied health professionals. The findings also show increased need for a more diverse workforce to meet the needs and preferences of an increasingly diverse NDIS participant population. This creates opportunities for targeting people from more diverse cultural backgrounds, language, gender and abilities to address the workforce demands.

The skills needs identified through the primary research undertaken in the region suggest providers place greater importance on generic skills such as people skills, empathy, effective communication skills along with core skills for disability work and specific skills which vary according to the needs of NDIS participants. Most providers prefer workers to complete a minimum of a Certificate III in a relevant field, but this is secondary to their focus on the right fit with the values of the organisation, the person-centred focus of the NDIS and the employability skills required to work with people with disability.

Although the cost of training is seen to be a challenge for many providers, the research suggests some innovative solutions including the use of online training and pooling resources across provider organisations and other regions.

The training system provides considerable support for NDIS skilling and there may be opportunities to assist workers and employers to make use of these subsidies. The *Funding and Support for Skill Development in NDIS Related Occupations in Queensland* document should help this.

6 FURTHER RESEARCH AND STATE-WIDE REPORT

The findings from the research conducted in the Townsville NDIS region are incorporated into a State-wide report that provides a more detailed analysis at the state level drawing on existing data sources, survey responses and more nuanced understanding about regional differences informed by qualitative interviews and focus groups conducted in Townsville, Mackay, Ipswich, Toowoomba and Brisbane North and South. The State-wide analysis provides further insight into the implications for future policy decisions relating to labour and skills demands and training needs arising from the roll-out of the NDIS across Queensland.

7 CASE STUDIES

7.1 Case Study 1: Townsville Employer

Case Study One is based on a focus group conducted with staff from a leading registered NDIS provider of mental health and disability support services in Queensland.

The organisation has over time streamlined its business model, achieving greater consistency across services with the aim of ensuring replicability and consistency of standards of care and best practice.

The organisation has also over time reduced their reliance on administration staff by using streamlined procedures and processes and minimising the previously top-heavy structure of the organisation. This approach has enabled the organisation to keep overheads low and enabled the distribution of staffing in a way that maximises billable hours that can in turn offset administration costs.

The organisation utilises the following strategies to meet the demand for NDIS services in the NDIS Townsville region.

Recruitment of workers is undertaken through a holistic, needs-based and client-centred approach. Positions are advertised via Seek and word of mouth, plus direct referrals. As a provider servicing the Townsville region and longer-term plans to extend to Cairns, the organisation targets recruitment of Aboriginal and Torres Strait Islander peoples to address the regional needs. Targeted recruitment strategies have involved advertising Aboriginal and Torres Strait Islander focused positions via SEEK. This strategy in recruiting for specified Identified positions is outlined by the organisation as highly successful compared to more generic job advertisements. The organisation also engages with local jobs expos for recruitment purposes and reports that this recruitment approach has also been highly successful.

Free online training is provided for their staff complemented by professional development opportunities where appropriate.

Subsidised employment and skills training opportunities are accessed enabling staff to develop skills and progress to higher level qualifications such as Cert IV in Mental Health. Although the organisation does not recruit on the basis of formal qualifications (noting the importance of fit with organisation values as of primary importance), employees are required to undertake an NDIS related Cert III qualification within six months of their appointment.

A 'buddy system' is utilised to help upskill new workers. The financial viability is managed by buddying new staff with a team of support workers who are providing services to a family or in group situations where NDIS services are provided.

The Business Manager suggested the benefits of providers attending industry alliance meetings once a quarter, where different providers within the region share information, discuss workforce needs, discuss training pathways and professional development (PD) opportunities and discuss strategies of best practice.

Key strategies:

- Streamlined process and procedures – strong business model
- Targeted recruitment for specified positions
- Consistency in onboarding and training to achieve high quality service delivery
- Accessing free online training opportunities and subsidised employment and training schemes to support staff to achieve accredited qualifications in NDIS related fields
- Utilising 'buddy' system for upskills new workers in group situations
- Collaboration with other providers in the region to find solutions for workforce needs of the region

7.2 Case Study 2: Townsville Sole Provider

This sole provider is one of the founders of a disability services organisation. She also has lived experience as a parent of children with disabilities.

This sole provider has focused much of her career on advocacy in creating visibility and understanding for the lives of those living with disabilities and later shifted towards to working with people with significant disabilities.

With the roll-out of the NDIS, this sole provider's focus moved to helping her clients get ready for the NDIA planning. She has focused her business model on providing a balance between NDIS participants with high needs and those with less needs to provide a balance in workload and income. She also points out that it is possible to build a for-profit model as a sole provider if the provider's values are strongly aligned to providing a person-centred, strengths-based approach.

This sole provider also believes that there are significant opportunities for individuals to establish niche sole trader enterprises addressing specific needs of people with disability – such as those with challenging behaviours who need more skilled expertise in positive behaviour management.

Another niche training area this sole provider identifies is in training allied health professionals such as Occupational Therapists in more effective use of technologies to enable people with disabilities to live independently.

This sole provider utilises technologies to provide a more cost-effective training model. She also records her face-to face sessions so that the training materials can be used by a number of organisations as a scalable solution.

Key strategies:

- Opportunities to grow the NDIS workforce through independent, sole providers.
- Small and sole provider organisations can be successful if they have a balance in delivering services to NDIS participants who have high support and lower support needs.
- There are niche opportunities for sole providers to focus their services addressing unmet needs of particular NDIS participants
- More effective use of technologies can help to leverage cost-effective training solutions to upskill NDIS workers.

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9 GLOSSARY

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

COAG: Council of Australia Government

Disability Capacity Building Supports: Support Coordination.

Disability Capital Supports: Home and Assistive Technology supports.

Disability Core Supports: Support activities such as assistance with daily living, transport, consumables and Socialisation and community.

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.

LAC: Local Area Coordinator

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

- NDIS Participants: Persons with a disability which is recognised under the NDIS and is eligible for support under the scheme.
- NDIS Providers: Organisations and sole traders which provide services that are subsidised supported under NDIS provisions.
- NDIS workforce: refers to the human capital which deliver or support the services provision of NDIS funded services.

Non-accredited training: Training which does not form part of a nationally recognised 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.

Subsidised Training: The Government will cover the full cost or part of the cost of the training for eligible qualifications.

Yellow card: Criminal history check for use by a disability services funded non-government service provider or a National Disability Insurance Scheme (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.



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NDIS WORKFORCE RESEARCH REPORT:
BRISBANE NORTH NDIS REGION REPORT 2019

This research was undertaken for and supported by Jobs Queensland as part of the NDIS Workforce Research Project. For further information on the NDIS Workforce Research project visit <https://jobsqueensland.qld.gov.au/projects/ndis-workforce/>

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1 EXECUTIVE SUMMARY

This report outlines the key NDIS workforce themes and issues identified in the Brisbane North NDIS region drawn from existing data sources and primary research data. Primary data was obtained from interviews and focus groups conducted in the Brisbane North NDIS region between August and October 2019. The key findings from the research are:

- Stakeholders for this region are generally positive about the impact of the **transition** to the NDIS, noting the increase in the number of approved hours people with disability can now access and the increase in the number of self-managed participants.
- However, these benefits have been accompanied by some challenges, including a **shortage** in direct support workers and Allied Health professionals that has led to extended wait times for services. The transition has also demanded new ways of operating by NDIS providers, has created issues with rostering of casual labour, and requires new skill sets in many roles including back office and direct support roles.
- Despite expectations that Brisbane would experience significant growth in **demand** for disability services (nearly 500 additional participants) with the introduction of the NDIS, the number of NDIS participants in Brisbane is yet to exceed pre-NDIS levels. Given that growth in the market has been slow in other regions, we anticipate that this growth will occur in Brisbane as well, presumably in the near future.
- Online **job advertisements** mentioning “NDIS” and “disability services” have been increasing over time, with the majority of these new roles being for professionals and community and personal service workers. Future employment projections suggest that demand for carers and aides and other workers in the “Other Social Assistance Services” sector will continue to grow in coming years.
- The largest number of workers employed in NDIS-relevant industry sectors in the Brisbane North region are female, aged over 40. This suggests there are opportunities to **diversify** the workforce to fill gaps.
- Yellow Card applications have increased by approximately two thirds, indicating a very significant increase in the **supply** of new workers. There nevertheless appear to be gaps in the labour market as indicated by some of the employers we interviewed who reported that demand still outweighs supply and that they are also finding some difficulty in retaining new workers. There is some evidence suggesting that the shortage of NDIS workers is itself providing a barrier to the growth of the NDIS market with providers noting delays from the time participants are approved for a plan and the delivery of services.
- There is growing interest in the potential for increasing the utilisation of delegated allied health assistants to help reduce the **demand** on a limited pool of allied health professionals, where allied health professionals create the plan and the allied health assistants deliver it.
- Job advertisements and employer interviews give us insight into the kinds of roles and **skills** that are sought after. An analysis of job advertisements identifies communication, first aid, customer service, quality standards and disability care as desirable skills. Employers who took part in interviews also mentioned the

importance of soft skills including the right values, employability skills, administration, in addition to technical skills. To meet these needs, they provide non-accredited in-house induction tailored to the needs of their customers.

- While **soft skills** are emphasised by stakeholders, there is also recognition of the important **technical skills** related to providing disability support such as manual handling, feeding and behaviour management as well as more specialised skills depending on the NDIS participants' disability.
- A range of innovative **recruitment** strategies have been adopted by employers as a means for diversifying the workforce, many of which focus on ways to disseminate information to attract new workers into the industry. These range from roadshows and expos to speed dating style interviews. Traineeships, including those offered in schools, are suggested as an effective strategy for recruiting and skilling the NDIS workforce.
- Stakeholders interviewed suggest that greater use could be made of people with **lived experience** of disability in training roles while also creating more work opportunities for people with disability. In particular, they saw potential for people with lived experience of disability to support the provision of in-house and accredited training.
- Although most employers expect workers to complete a relevant Certificate III (such as the Cert III in Individual Support or Community Services), this is not the primary basis on which they recruit. Stakeholders suggest formal **qualifications** require further refinement to better prepare graduates for the NDIS workforce and rely mostly on non-accredited training to fill these gaps.
- There are several skill sets for NDIS workers that the Queensland Government subsidises (see Funding and Support for Skill Development in NDIS Related Occupations in Queensland resource for further information). These include behaviour support skills, induction to disability, and medications assistance, however, there is little evidence that these training subsidies have been widely used in the region. NDIS employers should be supported to make use of the subsidies to grow and skill their workforces.
- Given the proportion of NDIS participants with autism and intellectual disabilities, which may necessitate support for a range of issues including emotional and managing challenging behaviours, there may be demand for more knowledge and skills of these disabilities. Stakeholders identify the importance of positive behaviour management support **training**, which can be delivered collaboratively on a regional basis.

2 INTRODUCTION

The NDIS commenced roll-out in Queensland in 2016 and is now operational in all Queensland regions. At the commencement of the roll-out in Queensland, the market for disability supports was estimated to grow from 48,000 people in 2016 to 91,000 in 2019 (NDIS, 2016). The State's workforce was also expected to expand by approximately 13,000 additional full-time equivalent jobs (Queensland Department of Education and Training,

2016). The most recent COAG Disability Reform Council, Quarterly Performance Report (2019) for the period 01 January 2019 – 30 September 2019 shows that in total, over 55,000 participants have now been supported by the NDIS in Queensland, with 33% receiving support for the first time. The related market of active services providers has also continued to grow with 4,197 registered service providers (of which 1,437 were individual/sole trader operated businesses and 2,760 were companies or organisations) as at 30 September 2019.

Jobs Queensland, in partnership with WorkAbility Queensland, has commissioned research to investigate employer, employee and sole provider experience in NDIS roll-out sites across Queensland over the period to 2021, when the jobs growth potential of the NDIS is expected to be realised. The research assesses and responds to the skills demand and supply issues resulting from the NDIS rollout across Queensland and involves multi-year, multi-site, quantitative and qualitative research undertaken in the following NDIS regions: Townsville; Mackay; Brisbane North and South; Toowoomba; and Ipswich as well as analysis of annual State-wide trends. The research will investigate current training and skills development for the sector to help inform Jobs Queensland's advice to government and will also be used to inform other stakeholders on the best ways to meet the jobs growth and skills needs for NDIS.

This report presents the key findings from research undertaken in the Brisbane North NDIS region including analysis of existing data sources, qualitative analysis and potential solutions emerging from the findings.

3 FINDINGS AND DISCUSSION

These findings draw on existing data sources and primary research involving surveys, and qualitative interviews and focus groups undertaken with NDIS employers, employees, sole providers and a self-managed participant as well as discussions captured at a regional forum conducted on 13 November 2019 with 32 key stakeholders in the Brisbane North region. The project was designed to capture more up-to-date and detailed quantitative data from NDIS employers, employees and sole providers in the region and greater depth and insights gained from qualitative data.

Despite intensive recruitment efforts, we were not able to obtain sufficient survey data from employees, employers or sole providers to report quantitative findings at the regional level.

There were 21 stakeholders who participated in either interviews or focus groups relevant to the Brisbane North region. Of these, the stakeholders who participated in interviews included six employers (of whom three provided services across multiple regions including Brisbane South and state-wide); one employee (who provided services in other regions); five sole providers (all of whom provided services across multiple regions and one who also identified as a self-managed participant). There were also three focus groups conducted in the region including one involving five employers, and two focus groups involving employees and sole providers. An additional focus group was also conducted with eight stakeholders from a not-for-profit organisation that represents the interests of community organisations including NDIS providers across Queensland.

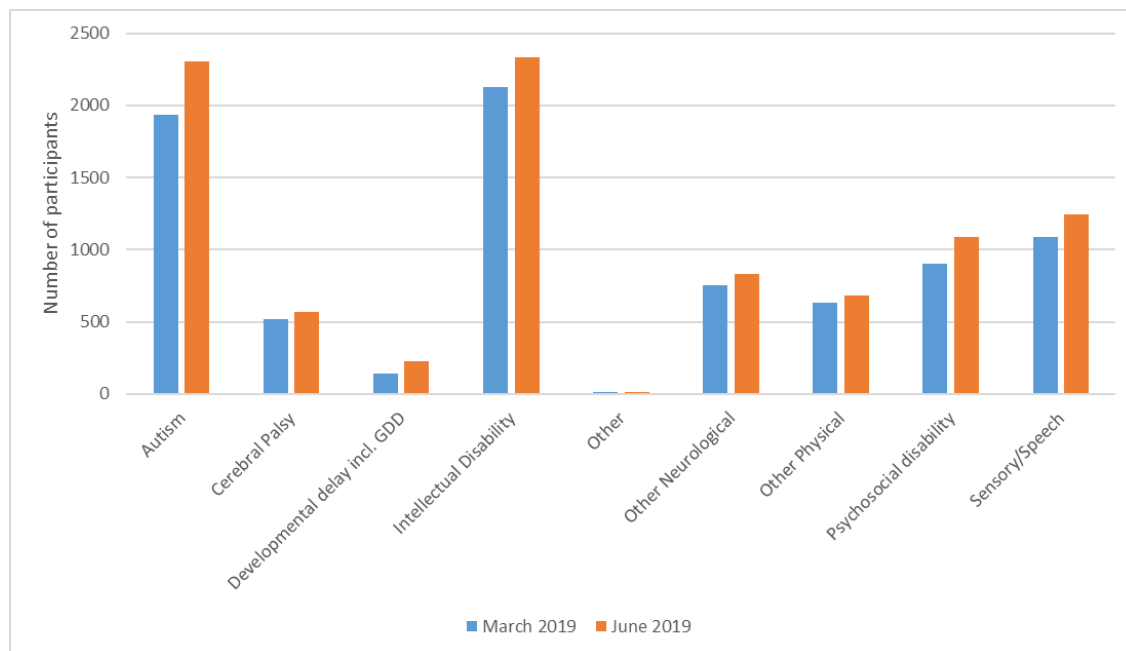
The open-ended responses from the survey respondents together with the findings from interviews and focus group data, as well as discussions arising from the forum conducted in Brisbane North have been used throughout this report to provide depth to the existing data sources.

3.1 Demand for NDIS Services

The growth in the number of NDIS participants in the Brisbane NDIS region has occurred more slowly than was originally anticipated in the Queensland Market Position Statement (NDIS, 2016). The data released by the NDIS reveals that at 30 June 2019, there were 9,296 active NDIS participants in the Brisbane region (these figures do not differentiate between Brisbane North and Brisbane South). While the data shows an increasing trend over time (numbers of participants increased between March and June 2019) it is worth noting that in the 2016 Queensland Market Position Statement (NDIS, 2016, Table 4, p. 21) the current number of NDIS participants in Brisbane was estimated at 10,500. Whereas Brisbane was projected to have 15,300 active NDIS participants by 30 June 2019, it appears that current numbers of participants are below pre-NDIS levels. We are not aware of any reason why the number of NDIS participants would have decreased over time and it is possible that the difference reflects the methodology being used to generate these data rather than the reality. However, it is safe to say that Brisbane has not experienced the expected growth in participants that was projected to occur with the introduction of the NDIS. It is, however, likely that there will be further growth over time given the roll-out of the NDIS in the Brisbane region is still in progress.

Figure 1 shows the disability groups that these participants identify with and how numbers of participants have been changing in recent months. They show that numbers of participants are still increasing. We can also see that the largest groups of participants are those who identify as having an intellectual disability or autism.

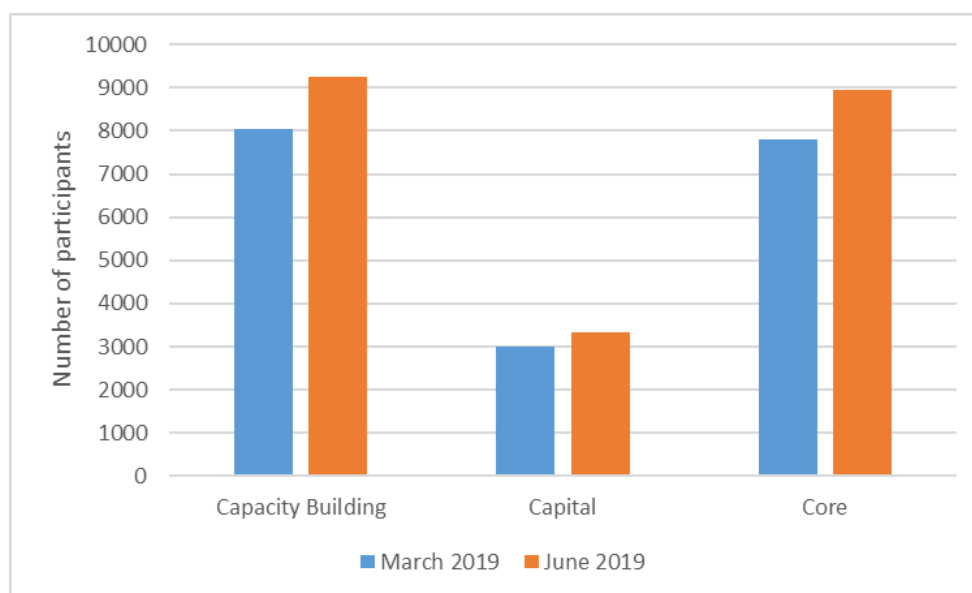
Figure 1: Number of participants in each disability group in Brisbane region



Source: NDIS. (2019). Participant numbers and plan budgets data [Data set]. Retrieved from <https://www.ndis.gov.au/about-us/data-and-insights/data/participant-numbers-and-plan-budgets-data>

NDIS participant data enables us to consider what types of support are in greatest demand across the region. We can examine this question both in terms of how many participants are registered to receive each type of support (Figure 2) and in terms of how much expenditure has been committed for each type of support (Figure 3).

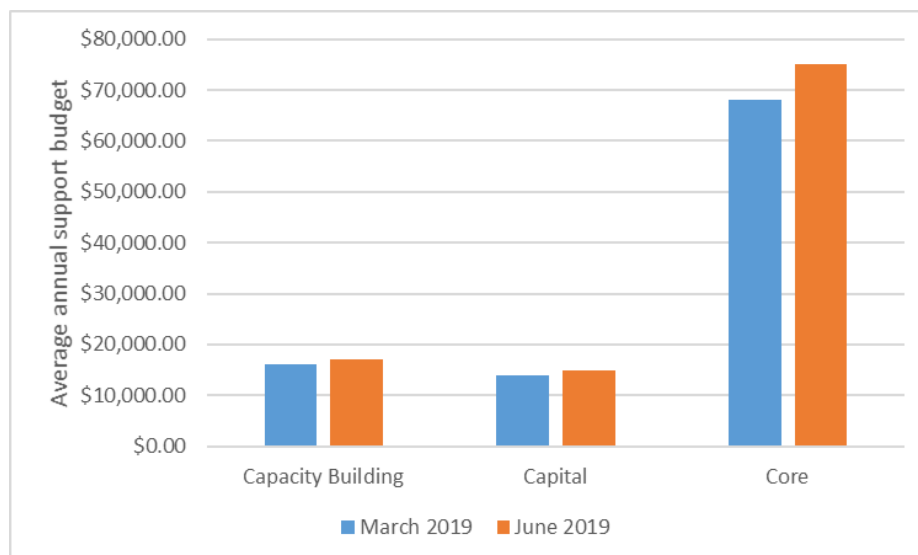
Figure 2: Number of participants receiving each type of support in Brisbane region



Source: NDIS. (2019). Participant numbers and plan budgets data [Data set]. Retrieved from <https://www.ndis.gov.au/about-us/data-and-insights/data/participant-numbers-and-plan-budgets-data>

The majority of the expenditure is directed towards providing core supports. As Figure 3 shows, the average annual support budget for all supports are increasing over time, with the most significant increase being for core supports. These data suggest that there will be ongoing demand for support workers and allied health professionals who can provide assistance with daily living, transport, support for social and community participation and help in getting and keeping a job.

Figure 3: Expenditure by type of support in Brisbane region

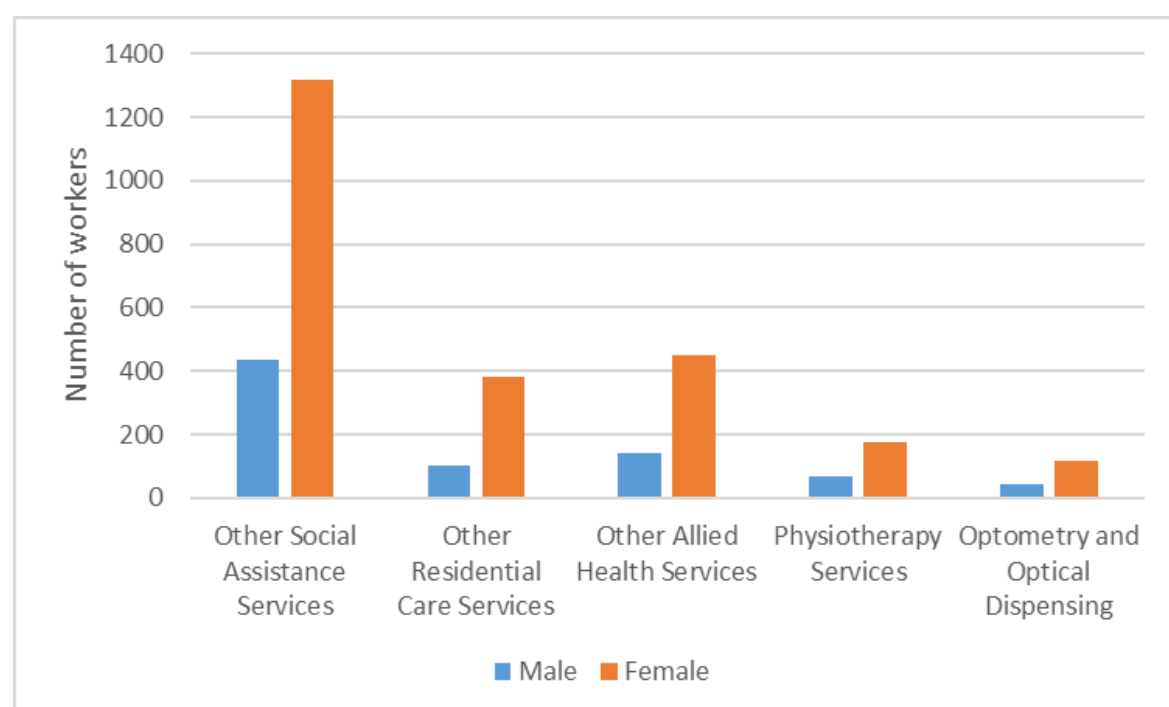


Source: NDIS. (2019). Participant numbers and plan budgets data [Data set]. Retrieved from <https://www.ndis.gov.au/about-us/data-and-insights/data/participant-numbers-and-plan-budgets-data>

3.2 Pre-NDIS Workforce characteristics

The 2016 ABS Census data shows that the largest number of workers employed in NDIS-relevant industry sectors in the Brisbane North region were female (see Figure 4) in the age groups 50-59 years for social assistance services and 40-49 years for residential care services and allied health services. This is consistent with the findings reported in the National Disability Services, Australian Disability Workforce Report (2018), which show that the female-to-male ratio in the disability support workforce is 7:3 (which is similar across all states) and the disability workforce in Queensland is older than the Australian workforce as a whole, with 49% of the disability workforce aged 45 years or over.

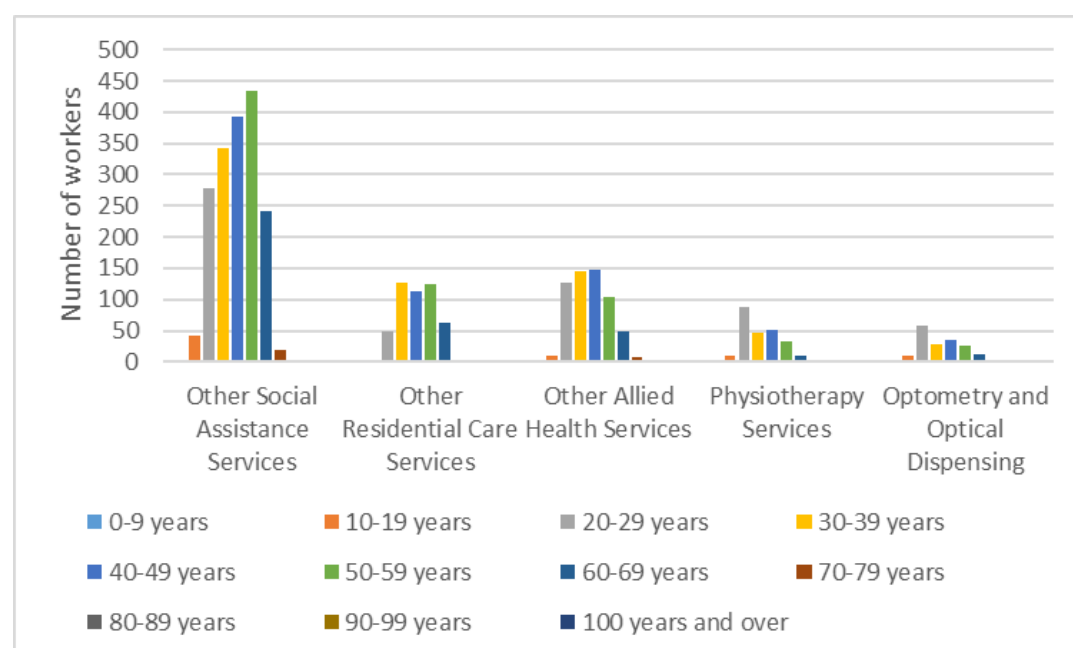
Figure 4: Gender profile of workers employed in NDIS-relevant industry sectors in Brisbane North NDIS Region



Source: Australian Bureau of Statistics 2016, *Census of Population and Housing (2016)*, TableBuilder. Findings based on use of ABS TableBuilder data.

It should be noted, however, that the largest number of workers employed in physiotherapy services and optometry and optical dispensing was in the age group 20-29 years (Figure 5). This finding suggests allied health professionals are entering the NDIS workforce shortly after graduating with higher education qualifications.

Figure 5: Age profile of workers employed in NDIS-relevant industry sectors in Brisbane North NDIS Region

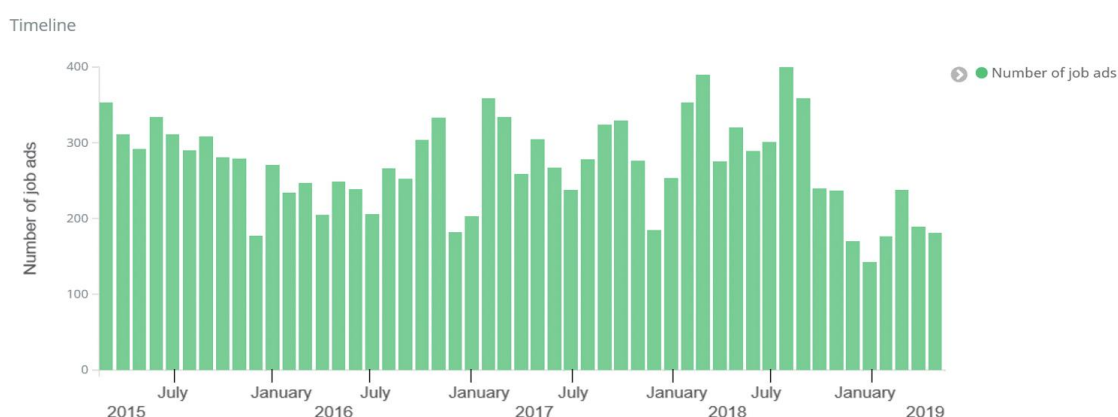


Source: Australian Bureau of Statistics 2016, *Census of Population and Housing (2016)*, TableBuilder. Findings based on use of ABS TableBuilder data.

3.3 Demand for NDIS Workers

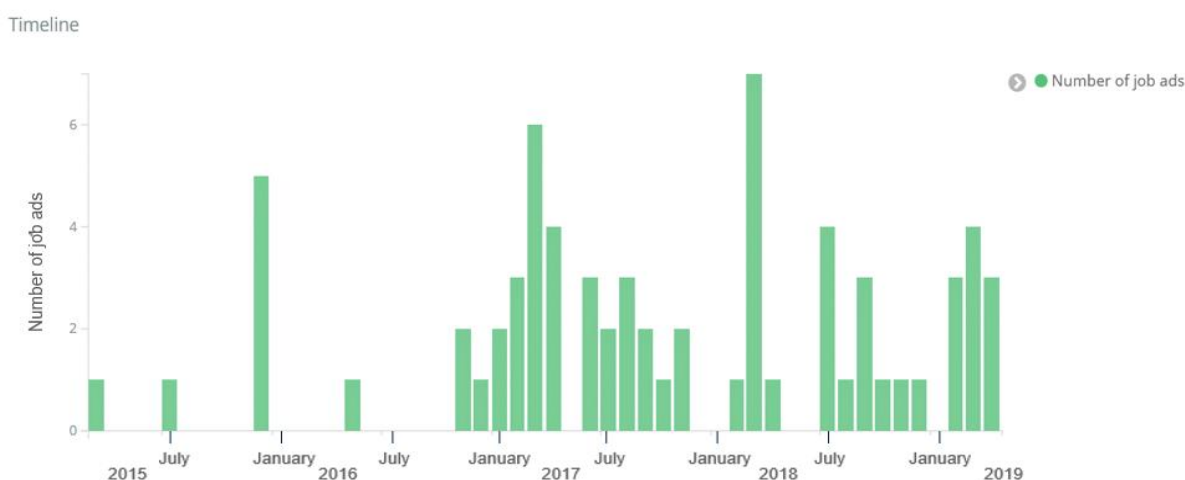
Analysis of job advertisements provides insight into the trends in workforce demand for NDIS related positions in the Brisbane North NDIS region (we note that the breakdown of job ads for Brisbane North was based on the ABS statistical areas (SA4) and does not align perfectly with the Brisbane North NDIS region). Although there appears to have been a decline in job advertisements for the Brisbane North NDIS region overall since July 2015, there has been an *increase* in job ads mentioning ‘disability services’ and ‘NDIS’ since January 2017 (compare Figure 6 and Figure 7). The overall low number of job advertisements for the Brisbane North NDIS region is noteworthy though and suggest that the full range of relevant job ads may not have been identified using these search terms.

Figure 6: Monthly count of all job ads for Brisbane North Region (SA4 level only)



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. skills.csiro.au. CSIRO's Data61 acknowledges the kind contribution of Adzuna Australia's datasets to this research.

Figure 7: Monthly count of “disability services” or “NDIS” job ads in Brisbane North Region (SA4 level only)



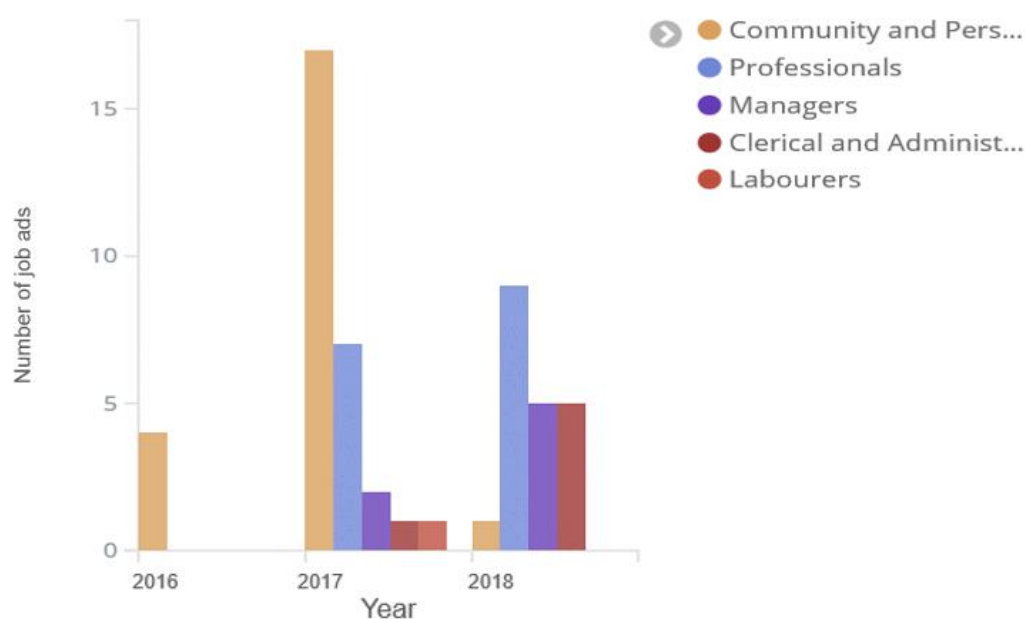
Source: Mason, C., Chen, C., Wan, S., Trinh, K., Duenser, A., Sparks, R., Walker, G., Zhao, Y., Burns, S., Reeson, A., Jin B., Naughtin, C. (2019). Data61 Australian Skills Dashboard. CSIRO. skills.csiro.au. CSIRO's Data61 acknowledges the kind contribution of Adzuna Australia's datasets to this research.

A mix of roles are being advertised but most of the advertised jobs are for community and personal service workers and professionals (Figure 8).

Figure 9 shows what skills were mentioned in these job ads. Communication, first aid, customer service, quality standards and disability care were mentioned frequently. The word “history” also came up frequently but was generally being used to describe an attribute of the organisation (ie. “our organisation has a history of quality client service”) rather than a skill needed by employees.

Figure 8: Types of occupations mentioned in "NDIS" and "disability services" job ads in Brisbane North

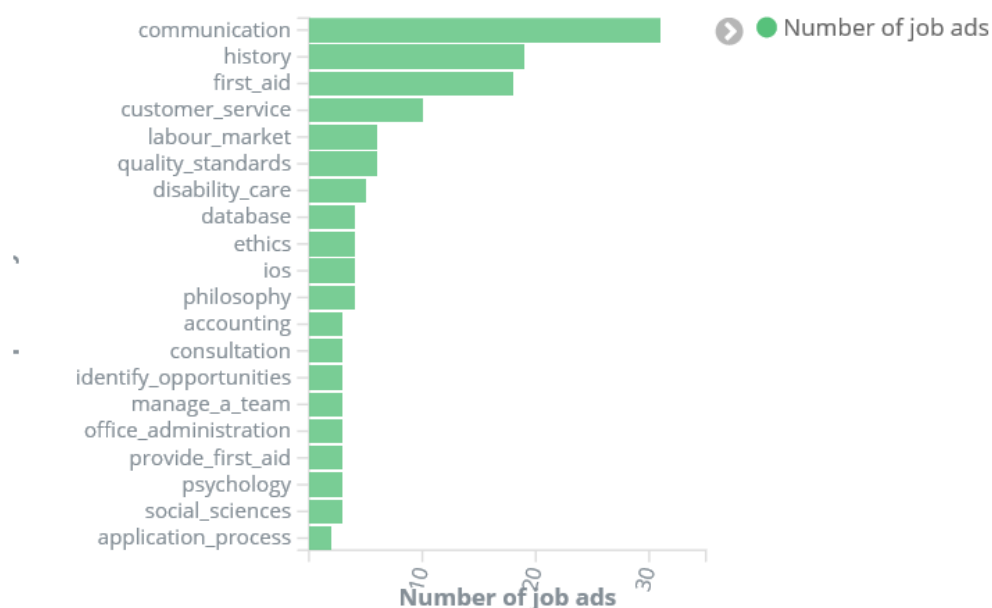
Demand for workers (by occupation type)



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. skills.csiro.au. CSIRO's Data61 acknowledges the kind contribution of Adzuna Australia's datasets to this research.

Figure 9: Types of attributes mentioned in "NDIS" and "disability services" job ads in Brisbane North

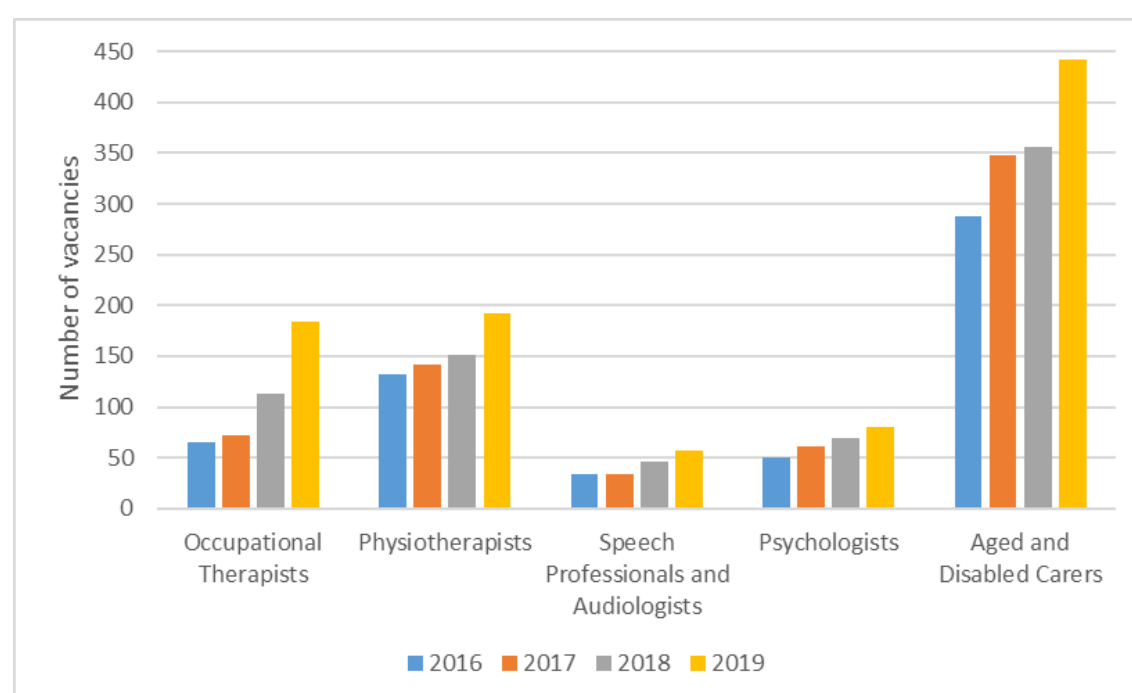
Demand for skills



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. skills.csiro.au. CSIRO's Data61 acknowledges the kind contribution of Adzuna Australia's datasets to this research.

Another source of job advertisement data comes from the Internet Vacancy Index (IVI) managed by the Department of Employment, Skills, Small and Family Business. This dataset captures online job advertisements from three of the main job boards in Australia and provides more detailed occupational breakdowns (although they cannot be linked to specific search terms or NDIS regions). This dataset reveals that there has been a sharp increase in job advertisements for aged and disabled carers, occupational therapists and physiotherapists between 2018 and 2019 in Queensland (during the time period of the NDIS rollout) (see Figure 10). Although it is not possible to tell how many of these job advertisements were from NDIS employers, it suggests that Brisbane North will experience an increase in demand for these roles as the size of the NDIS market continues to grow.

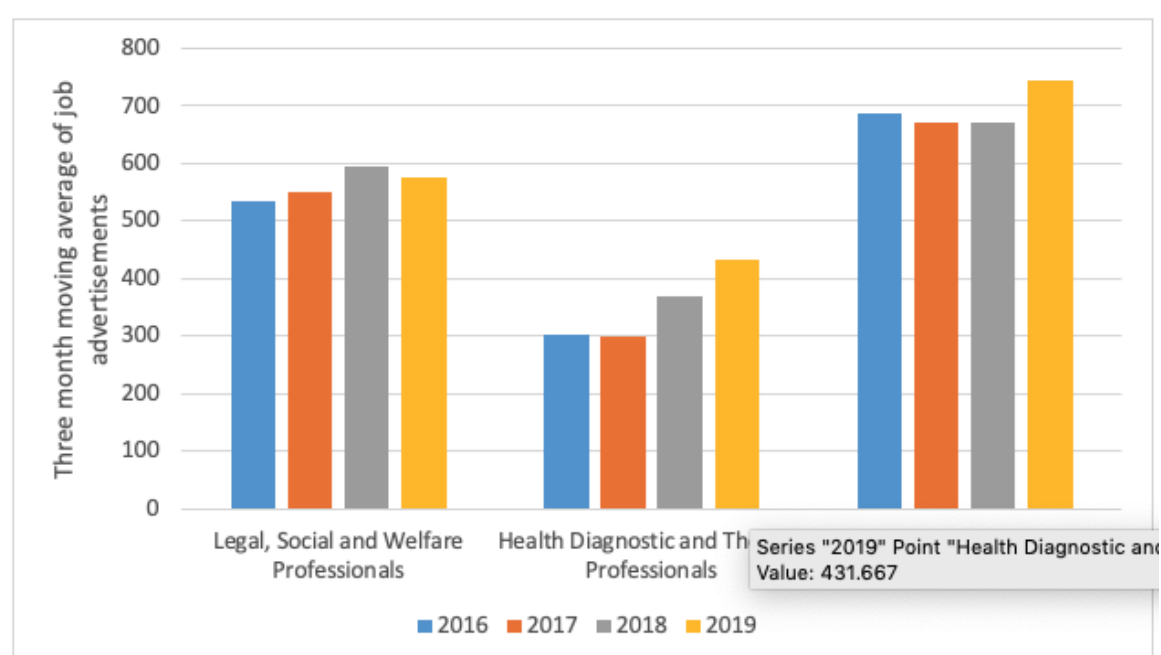
Figure 10: Number of job advertisements in NDIS relevant occupations in Queensland



Source: Department of Jobs and Small Business. (2019). IVI Detailed Occupation Data – March 2006 onwards (Excel [Data set]). Retrieved from <http://lmip.gov.au/default.aspx?LMIP/GainInsights/VacancyReport>

The Internet Vacancy Index also provides statistics on job advertisements for the Brisbane metropolitan region. These regional statistics provide a similar picture to the State-level statistics in that they suggest that job advertisements for health diagnostic and therapy professionals and carers and aides have increased in recent years (Figure 11).

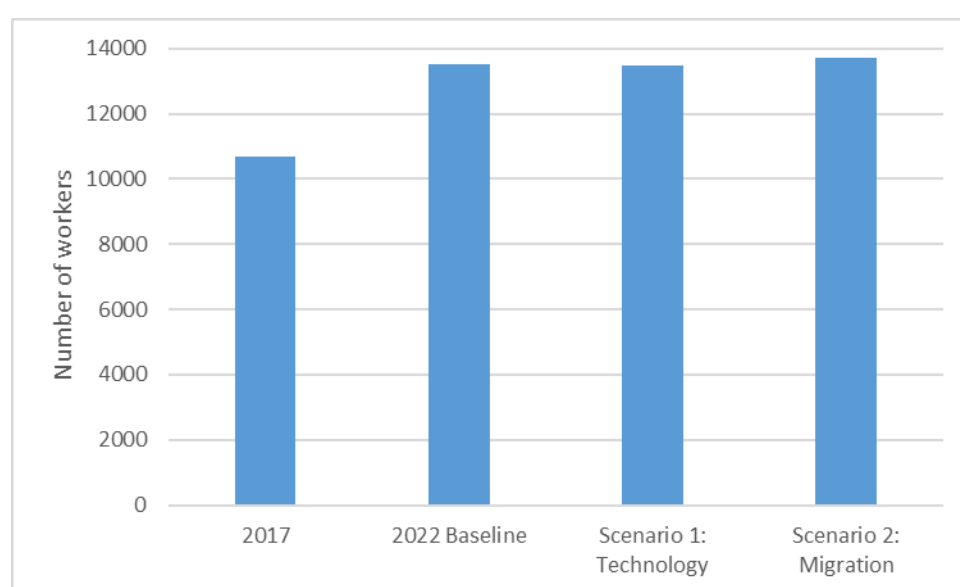
Figure 11: Number of NDIS relevant job advertisements over time in Brisbane



Source: Department of Jobs and Small Business. (2019). IVI Detailed Occupation Data – March 2006 onwards (Excel [Data set]). Retrieved from <http://lmip.gov.au/default.aspx?LMIP/GainInsights/VacancyReport>

For a longer-term view of demand for NDIS workers we drew upon the employment projections provided by Jobs Queensland. These projections, which have been generated for a range of plausible scenarios, draw upon population and economic data (in addition to labour market figures) to model future growth in the workforce up to 2022. Employment projections for the “Other Social Assistance Services” industry class (which includes in addition to disabilities assistance, other social support services such as aged care and marriage guidance) are shown in Figure 12. In 2017 there were 10,703 workers employed in this industry class in Brisbane and by 2022 there are expected to be more than 13,000 workers, representing more than 20% growth (much higher than the 7% rate of growth projected for Brisbane’s labour market overall).

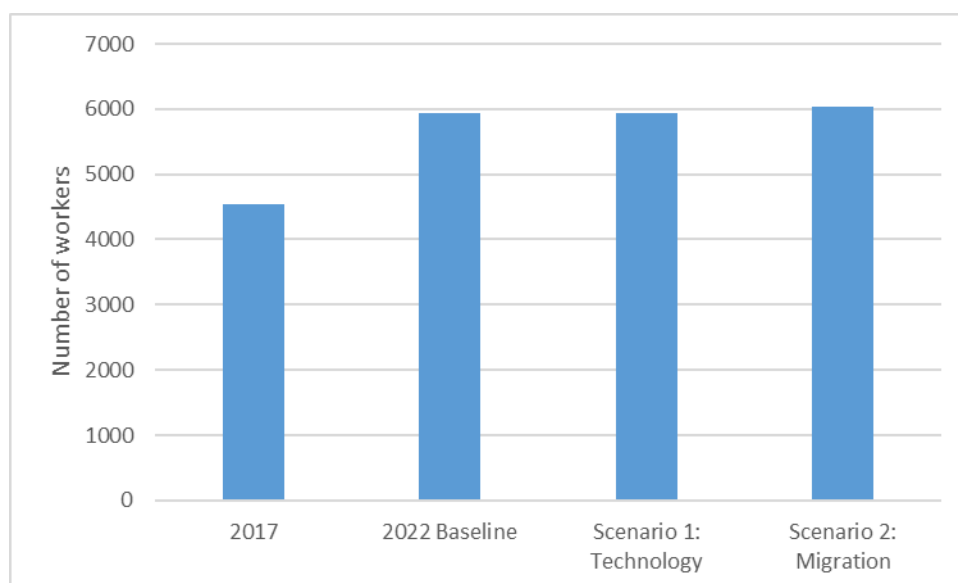
Figure 12: Employment projections for the “Other Social Assistance Services” industry sector in Brisbane Region



Source: Jobs Queensland. (2019). *Anticipating Future Skills: Regional (ALL) Data Tool [Data set]*. Retrieved from <https://jobsqueensland.qld.gov.au/anticipating-future-skills/afs-regions/>

Carers and Aides represent the largest occupation within this sector and demand for these workers is even higher (see Figure 13). According to the projections, Brisbane will require 31% more carers and aides for the “Other Social Assistance Services” industry class in 2022 compared to 2017. Demand for new carers and aides, which is already high, will continue to increase in the coming years.

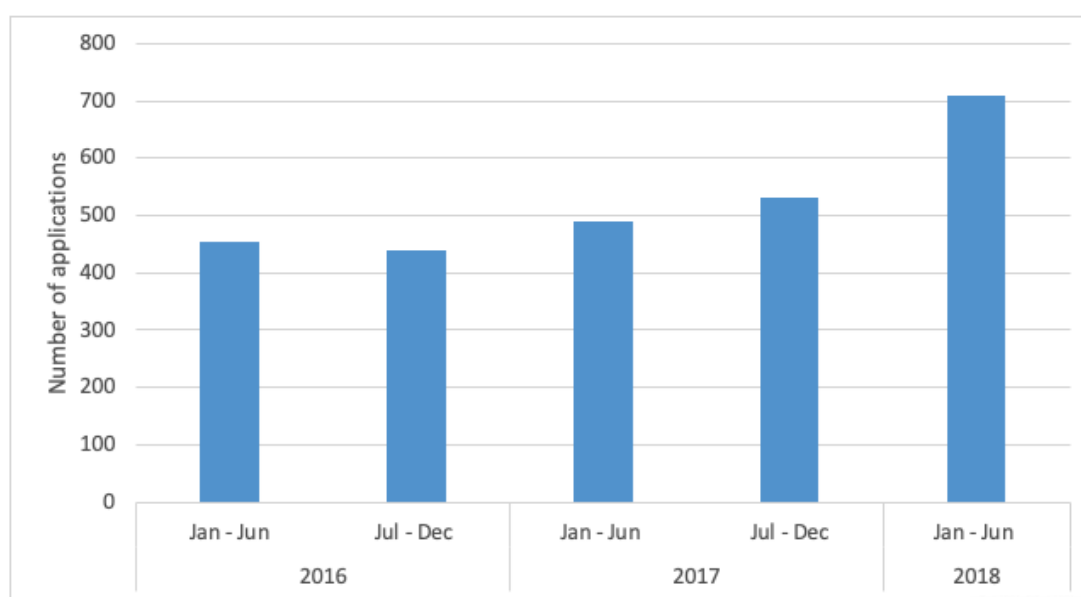
Figure 13: Employment projections for “Carers and Aides” in the “Other Social Assistance Services” industry sector in Brisbane Region



Source: Jobs Queensland. (2019). *Anticipating Future Skills: Regional (ALL) Data Tool [Data set]*. Retrieved from <https://jobsqueensland.qld.gov.au/anticipating-future-skills/afs-regions/>

It is therefore important to know whether there has been an increase in the supply of new NDIS workers in response to the increase in demand from employers. To answer this question, we investigated trends in Yellow Card applications. Yellow Card applications are required for anyone engaged by a non-government service provider at a place where disability services are provided to adults. As shown in Figure 14, the number of Yellow Card applications in the Brisbane North NDIS region grew from 455 (in January to June 2016) to 709 (in January to June 2018 (see Figure 14). While these applications include renewals for existing workers, they are the clearest indication of the significant number of new NDIS workers in the region, since they reveal that the number of applications has increased by more than fifty per cent. It should be noted that the Yellow Card data are only up to date with the period *prior* to the Brisbane North NDIS rollout (which commenced in July 2018). However, this growth in applications is consistent with patterns seen in other NDIS regions where the scheme rolled out earlier (and where Yellow Card applications have increased dramatically).

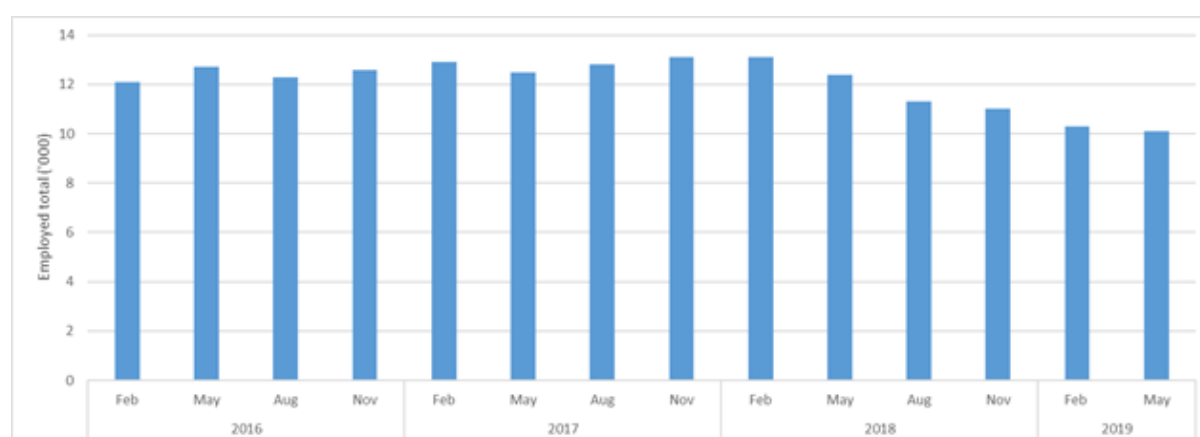
Figure 14: Number of paid worker applications and Yellow Card exemptions in Brisbane North Region



Source: Yellow Card data supplied by Queensland Department of Communities, Disability Services and Seniors.

Another source of insight into the changing supply of workers comes from the quarterly labour force statistics published by the ABS. These show how the composition of the labour force has been changing over time. Change in workforce size will reflect both demand- and supply-side forces, since growth in the workforce requires both increased demand from employers and increased supply of workers). From this data it is possible to examine how the supply of workers in a key occupational category (community and personal service workers – which includes support workers along with aged care and other community services workers) has been changing over time as the NDIS is rolled out (see Figure 15). These data show a less clear trend but they do suggest that in recent times, fewer community and personal service workers are now employed in the Brisbane North NDIS region. It is important to note that the reduction in numbers of existing workers could reflect changes occurring in other sectors where community and personal service workers are employed.

Figure 15: Numbers of “Community and Personal Service” workers in Brisbane North NDIS Region



Source: Australian Bureau of Statistics 2018, *Labour Force, Australia, Detailed, Quarterly, Nov 2018, RQ2 - Employed persons by Labour market region (ASGS), Occupation major group (ANZSCO) and Sex, Annual averages of the preceding four quarters, Year to August 1999 onwards (Pivot Table)*, data cube: Excel spreadsheet, cat. no. 6291.0.55.003, viewed 18 July 2019, <https://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/6291.0.55.003May%202019?OpenDocument>

There appears to be a discrepancy in the quantitative data, which indicates the market has not grown, job growth is limited and the supply of new workers is increasing substantially. Yet qualitative findings suggest there is a shortage of workers. Brisbane North is a relatively immature market so the data may look different in the future. Yellow card data is not available at the same stage of the rollout for comparison with the trends in other regions.

One possible explanation for this discrepancy is that Yellow Cards are being obtained by individuals in anticipation of working in the industry, but applicants are not progressing to the workforce or not staying in the workforce for very long.

The qualitative data supports the latter position where employers are finding it hard to retain new workers. An interviewed employer servicing Brisbane, Toowoomba and Ipswich considers their turnover rate of 25% is not high for the sector. They find that workers either “...get frustrated we don’t give them enough shifts” or after “we’ve done all that work with them and they go, “I don’t like this work. I’m leaving” [and] They don’t turnover and go and work in another sector. They leave the industry altogether.” (Brisbane/Toowoomba/Ipswich employer). Another employer interviewed stated while they had traditionally had high retention, with the changes in the industry “One of the things that we have noticed is that there is definitely a decline in motivated people.” (Brisbane North employer).

There also appear to be gaps in the labour market because some of the employers that we interviewed reported that demand exceeds supply, with one employer interviewed stating that while their turnover was “...pretty good” at 25% as compared to others in the sector, the issue was that “I’m still having to find 500 people. I know I’ve got to find a person-and-a-half today, tomorrow, on the weekend, every single day, including Christmas and all the other days, just to break even” (Brisbane/Ipswich employer). This employer agrees that one of the reasons for the labour shortage is the inability to guarantee stability in hours and shifts. Another employer interviewed also agrees that “There are some that want to have a crack at it, but it just wears them down”, particularly when there are confronting

behavioural issues such as participants who inflict violence (Brisbane/Toowoomba/Ipswich employer).

Another possible reason for the discrepancy is that there is a hidden workforce that is difficult to track. We have been unable to quantify the number of sole traders who are not registered with the NDIS but may have obtained Yellow Cards and are supplying services to self-managed participants. A Sole Provider interviewed, while commenting on the increase in the number of NDIS participants becoming self-managed, suggested this may relate to an increase in the number of young families coming into the NDIS *"...with more confidence to self-manage"* (Sole Provider).

Qualitative findings from interviews, forums and focus groups, in contrast to quantitative findings, suggest in many cases there has been a significant increase in the demand for NDIS support workers in the Brisbane region arising from the NDIS and an increase in the number of support hours approved under the NDIS. As one employer interviewed explained, *"So, a lot of the people that we support now have a lot more funding to be able to be supported one-on-one. We've seen a lot of people sit from eight hours a week to 40 hours a week. So, that's been a huge jump"* (Employer). This has led to a labour supply shortfall as reflected in another employer's comment, *"They've got a plan and they want us to support them, like, tomorrow. But we can't do that. We don't have the workforce. There's that delay in when people come on board or get their plan to when they actually can receive supports"* (Employer). Moreover, providers noted the increased competition for workers arising from self-managed participants who are hiring workers directly (regardless of whether they are registered providers with the NDIS or not) resulting in a smaller pool of workers to recruit from. Some NDIS participants are even paying them higher rates than registered providers.

Qualitative feedback also highlights providers' concerns about the availability of allied health professionals. One employer interviewed suggested they are *"...unable to recruit suitable allied health staff"* (Brisbane North employer). A forum attendee further stated that *"...intellectual disability's a whole new realm and it's a really, really challenging place and we're really struggling to get allied health support in that behavioural support restrictive practice space"* (Brisbane North Forum Attendee). Attendees at the forum also suggested that allied health professionals were limiting the number of clients they would accept with autism and other types of intellectual disabilities to avoid potentially suffering burnout. A sole provider also noted a turnover in occupational therapists was creating shortages, stating *"...there's a high turnover of OTs and whatnot doing these assessments as well...how do you ever get anything?"*, citing a case where the process to have a bathroom modification assessed took two years (Brisbane North/Brisbane South/Ipswich Sole Provider).

Similarly, a key stakeholder focus group participant highlighted the importance of providing training opportunities in allied health, noting *"...it's a safe way for them to enter in the pathways to become an allied health assistant, do vocational education...then it's a stepping stone to possibly venture out and become an allied health professional"* (Focus Group Stakeholder). However, as another forum group participant suggested: *"The biggest barrier to allied health assistants is the willingness of allied health - well, their understanding and then willingness of allied health professionals to work with a paraprofessional. It's not been required. There's not been a real driver for it, and...many people aren't used to delegating their practice outside of a hospital or an aged care setting"* (Focus Group Stakeholder) and further

“...we still have the issue of having enough of the allied health professionals to provide the supervision”.

As an interviewee in a focus group conducted with a non-profit organisation that represents employers within the region suggested, *“So, there's a bit of a driver now that there's so much work.... And then, the other driver of course is that there's a therapy assistant price in the [NDIS] schedule. So, organisations can access a higher level of fee if they've got a trained therapy assistant doing some of the work. So, I think those two things are coming together to make it more possible”* (Focus Group Stakeholder).

The increasing casualisation of the workforce has also created some challenges for providers and added stress on the availability of support workers given many support workers take multiple shifts with other providers. As a Brisbane employer explained, *“...if you have a staff person ring in sick that – you need to fill that gap...unless they've got adequate notice, they will pick up a shift somewhere else”* (Employer).

3.4 Impact of NDIS transition

The transition to the NDIS is perceived by stakeholders to have been positive overall, though not without challenges. As noted in preceding sections of this report, the NDIS has increased the hours of support and type of supports for some NDIS participants as they are now able to pursue goals such as *“...finding employment, finding paid work”* (Brisbane Employer), *“learning to drive a car”* (Sole Provider) and pursue personal interests. An employer also noted the increase in the number of younger children, particularly those with autism, receiving early intervention services, enabling them *“....to move forward in their life”* (Employer).

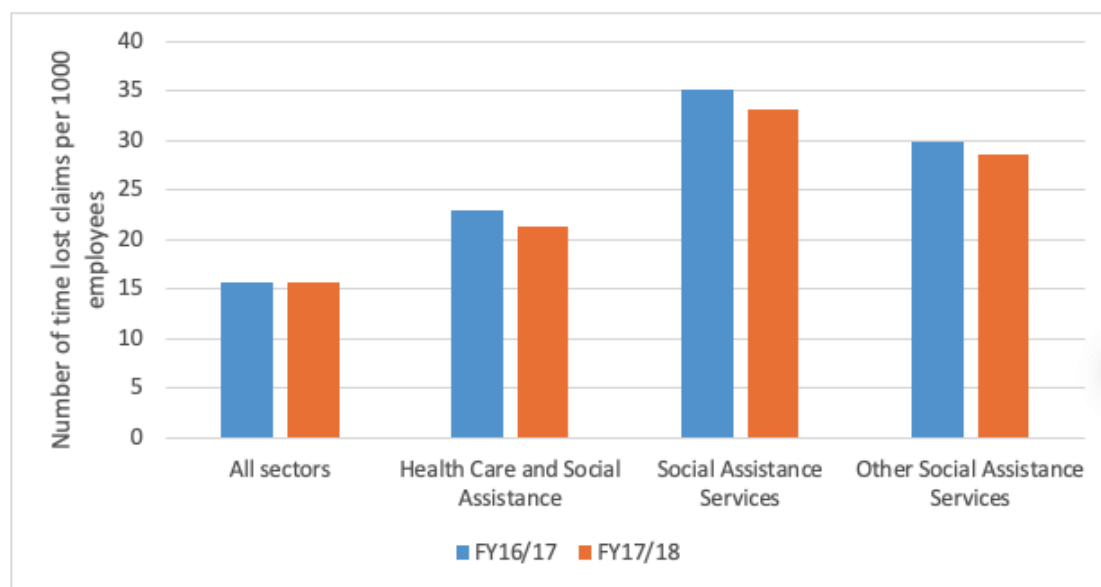
Stakeholders also noted an increase in the number of NDIS participants managing their own NDIS plans, which is positive, but is also creating some challenges for providers as one employer noted, *“We've lost some teams [due to the increase in self-managed participants] like Mums that were plan-managed in the beginning and now they've become self-managed because they've got their head around it”* (Employer).

While the introduction of the NDIS was regarded by one Sole Provider as a major contributor to the growth of her business, the introduction of the requirements of the Quality Safeguards Framework appears to have added to the stresses experienced by Sole Providers wishing to become registered. One Sole Provider, for example, commented that delays in processing his application for registration was inhibiting business growth. Another Sole Provider reflected *“I often hear comments around people saying, 'It's too hard to become a registered provider, or a registered person that offers a service’”* (Sole Provider).

There is limited existing quantitative data from which to understand the prevalence of workforce issues arising with the introduction of the NDIS. However, a high rate of workers compensation claims can be indicative of low resilience or poor working conditions within the workforce. The Office of Industrial Relations Queensland provides data on Workers Compensation claims, and, on request, data broken down by industry sector and region. This makes it possible to investigate whether the number of claims is high given the number of workers in that industry sector or industry subgroup. While these data cannot be broken

down separately for the two Brisbane NDIS regions, it is apparent that the rate of time lost claims is relatively high for both the “Social Assistance and Services” industry group and the “Other Social Assistance Services” WorkCover Industry Classification (WIC). There is some evidence that the relatively high rate of time lost claims has lessened in the 2017-2018 financial year (Figure 16).

Figure 16: Number of time lost claims per 1,000 employees¹ in Brisbane NDIS Region



Source: The claims and wages data comes from the Office of Industrial Relations Queensland Scheme Analysis database (QSA) as at 30 June 2018, and the labour force figures used in our estimates come from the ABS Cat No 6291.0.55.003 [Australian Bureau of Statistics, Labour Force, Queensland (Ave May to Feb quarter)].

¹ Claims and wages are calculated based on the policy address. Where this address pertains to the head office of the organisation, both the claims and wages will be assigned to the head office even if the relevant workers compensation incident occurred in a regional office.

3.5 Skills required

When recruiting, providers in the Brisbane North NDIS region prioritise soft skills such as having the right value base. As an employer explained, *“I always look for attitude, more than anything. So, if someone’s coming in for a job interview, if they’ve got the right – the value base – you can see that they have this really good attitude – that they’re really willing to learn and everything”* (Employer). Another employer emphasised capabilities such as knowing how to support the economic and social participation of people in the community and having the right attitudes and respect for people with disabilities. Similarly, another employer shared *“...it’s got to be underpinned by acknowledgement of person-centred philosophy and principles of practice. So, if they start with that, if they’re going into someone’s home or going into support someone, it’s really understanding the person. So, we really feel that that’s a core capability”* (Employer). When recruiting, stakeholders prioritise these soft skills over formal qualifications as reflected in an employer’s comment that *“...there’s no real [formal] skillset that – you know, I’m not going to flick someone off because they don’t have a Diploma of Community Services, or whatever”* (Employer).

While soft skills are emphasised by stakeholders, there is also recognition of the important technical skills related to providing disability support including manual handling, knowing how to position and turn, PEG feeding, positive behaviour management support, medications as well as more specialised skills depending on the NDIS participant including restrictive practices, administering insulin for an NDIS participant who is diabetic or sign language if working with an NDIS participant who is deaf.

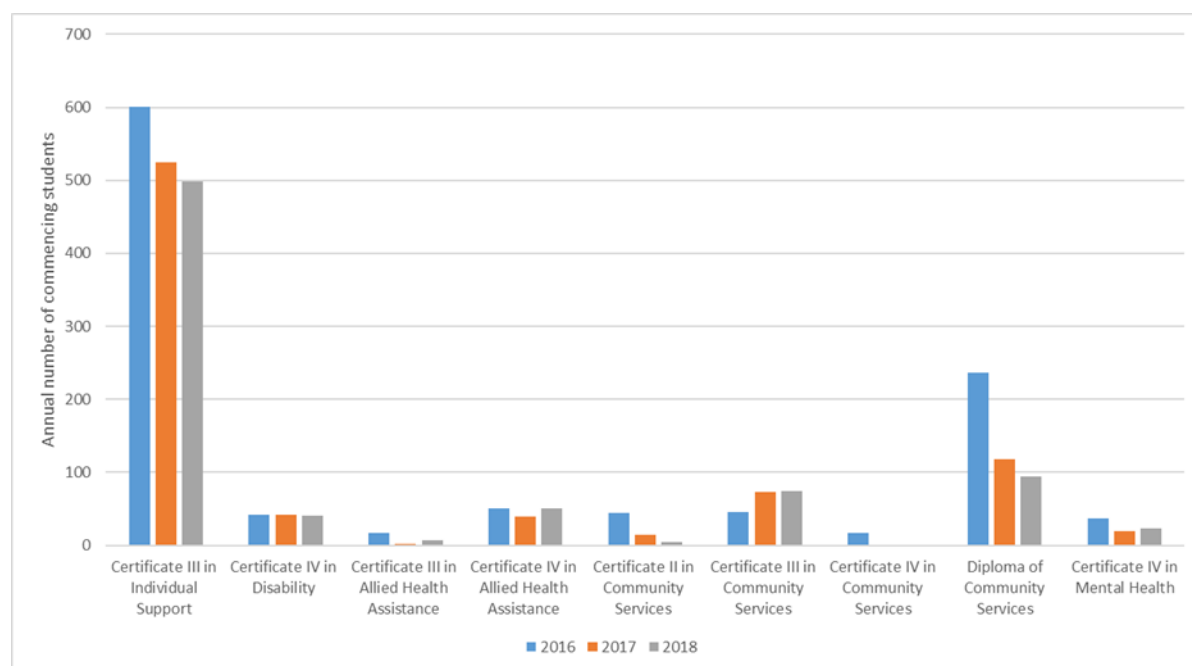
Stakeholders also noted an increase in the administration skills required by providers such as managing service agreements, invoicing, debt collection, service bookings and rejections as well as the need for digital literacy.

3.6 Training

Training enrolments can provide some insight into the supply of NDIS workers. NCVER data was used to explore how commencements in NDIS-relevant VET qualifications have been changing over time (although we note that they are not up to date with the period of the NDIS rollout in Brisbane North). These figures include data for superseded qualifications (where applicable) to allow more accurate comparisons over time.

Figure 177 shows that despite the increase in new workers, there has been a decrease in enrolments for some courses (e.g., Certificate III in Individual Support, Certificate II in Community Services and Diploma of Community Services), which is only slightly offset by the increase in enrolments in Certificate III in Community Services. These data are cause for concern assuming that employers seek NDIS workers with accredited training although it is worth noting that enrolments in accredited VET training have been falling nationally, not just in the realm of human services.

Figure 17: Change in number of commencing students in NDIS relevant qualifications in Brisbane North NDIS Region



Source: VOCSTATS <<http://www.ncver.edu.au/resources/vocstats.html>>, extracted on 06/06/19

However, qualitative data suggests that while employers do expect workers to complete a relevant Certificate III, this is not the primary basis on which they recruit. As noted in preceding sections of this report, employers emphasise soft skills in recruitment and training tends to be on the job and individualised to the needs of the NDIS participants. Stakeholders suggested that the two most relevant Certificate III qualifications (Individual Support and Community Services) need updating to meet the needs of the NDIS workforce. One employer suggested the Certificate III qualifications need *“...less theory, with more person-centred approaches and soft skills being taught and inclusion of videos of people sharing stories – ‘real stuff’”* (Employer). An employee also suggested that higher education qualifications also need to better prepare allied health graduates for working in the NDIS sector, asserting, *“We need to look at the university qualifications especially like the allied health university qualifications and we need to include an inclusive unit so then they actually work with people with a disability, understand those requirements”* (Employee).

While in-house training is prioritised by stakeholders, the qualitative findings suggest that the lack of funding for the provision of in-house training opportunities for NDIS employees is a significant issue in the sector, with providers indicating in interviews that they struggle to cover the expense of training for specialist skillsets. As one provider reflected, *“I think one of the more difficult things for us is, NDIS won’t fund training. The difficulty is, if you have a person that you’ve taken onboard with NDIS funding – 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 other person”* (Employer).

The benefits of training being provided by people with lived experience of disability was also evident from stakeholder interviews along with the need for highly specialised training for particular NDIS participants with high support needs. One large employer suggests, *“The lived experience on the ground is far better as you clearly know coming from those people who live it”* (Employer Brisbane North/South, Ipswich, Toowoomba)

4 POTENTIAL LOCAL SOLUTIONS AND FINDINGS FROM FORUMS

The findings from this first round of research undertaken in the Brisbane North NDIS region have identified both challenges and opportunities associated with the roll-out of the NDIS in the region. This section focuses on possible solutions to the identified challenges.

4.1 Meeting the increased demand

The findings show that there will be ongoing demand for allied health professionals and support workers who can provide assistance with daily living, transport, support for social and community participation and help in getting and keeping a job. There is also demand for other roles such as managers, clerical and administrative workers. The following strategies may assist the sector to meet this demand.

4.1.1 Strategic recruitment to match participant needs

The need to match NDIS participants according to their needs and preferences points to the value in more considered workforce planning and recruiting more strategically. As one stakeholder advised, “... [we] *mapped our allied health staff in terms of the skills they currently have and what they would need if we take on additional clients*” (Employer). Another stakeholder suggested recruiting staff who are all-rounders and who can perform multiple roles including administration while also working with different groups of participants depending on their needs and interests is an effective strategy for meeting the needs of specific participants, while also providing sufficient hours for support workers.

4.1.2 Innovative recruitment strategies

Stakeholders attending the Brisbane North forum suggested more innovative strategies for promoting NDIS career opportunities to people from more diverse backgrounds is required. Strategies suggested range from jobs roadshows, working with employment agencies, working with schools, training organisations, universities, councils or Chambers of Commerce to talk about the opportunities that are available. One innovative solution emerging from forum discussions was to use speed dating style interviews that have been a feature of WorkAbility Queensland’s Jobs Roadshows, noting “*The speed dating goes really well, 40 people came in, 7 employers, a good proportion of the 40 will get a job out of it. Is a good way of capturing people who are new to the industry*” (Forum Participant).

To offset labour shortages, stakeholders discussed the creation of a national website for provider partnerships and job seekers that provides details of all providers, job opportunities, training, career information – in one place. One employer suggested, “... *when there’s complex challenging behaviours and also these participants that are – so the brain injuries like the really complex brain injury people, I think we need incentivising*” (Employer).

A Brisbane North forum attendee advised that they were experiencing high turnover in the first 12 months while trying to shift understanding about the realities of the support worker role. A successful retention strategy the employed was “...*to play through some of those scenarios, what would you do in - Which is actually being really quite open and honest about what that’s like is what we’ve found and if you crackdown on that really early on with the process*” (Brisbane North forum attendee). One Brisbane North employer highlighted the added importance of initiatives aimed at improving staff retention, noting “*You need to be of a certain calibre to work as a support worker, in my opinion, and there needs to be alongside the remuneration, there is training, there is rewards and recognition programs, there is all sorts of things. But the majority of people come back to us and say that they love working for us because they feel valued*” (Brisbane North employer).

4.1.3 Addressing the shortage of allied health professionals

One of the themes emerging from the qualitative data is the potential role that delegated allied health assistants can play in reducing the [time?] demands on allied health professionals. An employer further suggested that the use of allied health assistants “... *does keep our costs down from a therapy point of view. So, if a clinician does the program then*

the allied health assistant delivers it over the week” (Employer). Another statewide employer is making use of the initiative from the government to allow provisional psychologists to provide a service, stating, “That has actually helped not only ourselves as a company but the people at the other end can get service within one week to 14 days” when “...most psychologists are 12 months to two years before they can see any new clients” (Brisbane North/Brisbane South/Ipswich/Toowoomba/Mackay/Townsville Employer)

4.2 Training solutions

Several key strategies emerged from the qualitative interviews and focus groups that have the potential to address the identified need for practical and affordable training support for NDIS workers. These strategies are outlined in the following sub-sections.

4.2.1 Reducing training costs

An employee of a large NDIS provider suggests that they can only provide mandatory training, such as in areas unique to a participant like epilepsy training and manual handling, and self-fund this because *“We’ve got scale”* (Brisbane North Employee). For others, the use of the capacity building support budget within participants’ NDIS plans to train support staff in specialist skills was identified as one way in which providers can upskill workers who need to provide particular services to meet the needs of individual NDIS participants.

As one employer explained, this *“...now sits within funding for the person that you support.”* This is discussed further in Case Study 1 below. Stakeholders suggested that peer learning through buddying up with an experienced employee and mentoring are invaluable in-house training strategies. However, not all participants have capacity building funding that can be used in this way, as reflected in an employer’s comment that *“...there’s no funding for buddy shifts, which is really difficult for a staff person who’s starting”* (Employer). Case Study 1 below outlines some creative strategies to address the funding shortfall for training.

4.2.2 Promoting traineeships

Stakeholders also suggested that traineeships may assist in addressing recruitment and training challenges. An employer noted that *“... having opportunities for placement in other centres could increase the amount of traineeships offered because if we know that there are other parts of the sector who are looking for employees and you might have Aboriginal or Torres Strait Islander clients that you think are going to need Aboriginal or Torres Strait Islander support staff, then...a way that we could collaborate is for us to take carriage of the training”* (Employer).

4.2.3 Using training facilitators with lived experience

The value of training that is facilitated by people with lived experience of disability has been a common theme emerging from the qualitative data, and the provision of training services to the NDIS sector provides an important employment opportunity for people with disability. As a Sole Provider who operates in the Brisbane and Ipswich region identified *“professional development [has] been a bit of a growth industry in itself”* (Sole Provider).

5 CONCLUSION AND IMPLICATIONS FOR BRISBANE NORTH NDIS REGION

The findings from this first phase of the research in Brisbane North NDIS region show that the projected increase in the number of NDIS participants in the region has been much slower than predicted in the Queensland Market Statement (NDIS, 2016). This suggests that the Brisbane North NDIS region is likely to experience significant further growth in the immediate future.

Regional stakeholders are generally positive about the transition to the NDIS, noting the increase in the number of hours people with disabilities have been approved for support and the increase in the number of self-managed participants. However, these benefits have been accompanied by some challenges, including a shortage of direct support workers.

Uptake of accredited training does not appear to be keeping pace with the growth in new workers. While relevant certificate qualifications are valued in the sector, recruiters place greater importance on the soft skills such as values, understanding of working with people with disabilities and supporting their social and economic participation. Providers also emphasise the importance of technical skills, which vary according to the specific needs of NDIS participants.

Although the cost of training is seen to be a challenge for many providers, the research shows some innovative solutions including peer training, collaboration and traineeships.

There appears to be a lack of awareness by some employers and NDIS workers in this region of the training opportunities and resources already available to support the training needs for the sector. Greater promotion of subsidised training options (see *Funding and Support for Skill Development in NDIS Related Occupations in Queensland* resource for further information) may help upskill the NDIS workforce to address identified skills gaps.

6 FURTHER RESEARCH AND STATE-WIDE REPORT

The findings from the research conducted in the Brisbane North NDIS region are incorporated into a State-wide report that provides a more detailed analysis at the State level drawing on existing data sources, survey responses and more nuanced understanding about regional differences informed by qualitative interviews and focus groups conducted in Townsville, Mackay, Ipswich, Toowoomba and Brisbane North and South. The State-wide analysis provides further insight into the implications for future policy decisions relating to labour and skills demands and training needs arising from the roll-out of the NDIS across Queensland.

7 CASE STUDIES

7.1 Brisbane North Case Study 1

With the rise in demand of one-on-one support under the NDIS model, it is increasingly important to ensure the right match between worker and NDIS Participant. One Brisbane

North employer noted the vital role of implementing a values and skills based matching model when planning their workforce. They employ two strategies to achieve this aim. Firstly, they employ new workers with the required values and skills that match the specific needs of new participants, by checking resumes then conducting telephone conversations to probe these attributes a little deeper before inviting individuals to interview. Secondly, they assess existing staff and provide specific training to fill the gaps to meet the participant's needs. Some examples of specific skills might be sign language for the deaf, non-English language skills for migrants, administering insulin for diabetics, PEG feeding, and manual handling for the mobility impaired.

The provider notes that formerly, experience in support work was a core requirement, but now, a values match between the support worker and the customer is more important, *"Traditionally, you would employ someone who has support worker experience, who has been in the role before. We found, over the years, that's not, necessarily, the case; we found that people who have the same value base work really well in a team environment to support people who live with disabilities, and they have similar interests as the people they support"*. The provider sees this as particularly relevant if they have transferable life skills to help participants gain independence.

The provider suggests that the values match is not always about looking for similarity, but also for complementary circumstances that can strengthen connections, sharing *"I'll give an example of a young man who...had been in foster care for a long time"*. He was assigned to a group of workers *"who were very compassionate, they all came from a church background and understood exactly where this young man was coming from."*

The need for training has been noted to be a significant issue that has arisen under the NDIS after the shift away from block funding. With the withdrawal of funding for training, the employer notes that creative strategies are required. One way they manage this is to sit new workers in on group activities with more experienced workers, which is organised as part of their participants' social and community participation. Specialist training for support workers can also be accessed as part of the capacity building component of some NDIS plans. The provider states: *"So, it now sits within funding for the person that you support. So, they have it in their capacity-building. So, they will have an allocated amount that will cover training for staff members to be able to be trained in the PEG feeding, [etc]"*.

The provider gives the following example: *"So, I have one lady that does hydrotherapy. So, she brought on new staff members who she can show what to do, and everything like that, to a certain degree. But, to be more specific, she would organise her hydro-therapist to come and train the new staff. And, that all comes out of her funding."*

7.1.1 Key strategies

The provider identifies four key strategies in relation to recruitment and training:

- Recruiting based on skills and values that are the right fit for individual participants
- Supporting specific training for existing workers to equip them with the required skills for individual participants

- Utilising the efficiencies of group activities as a training ground
- The use of capacity-building funding to provide training of workers who support individual NDIS participant's specialised needs.

7.2 Brisbane North Case Study 2

One Allied Health provider of NDIS-registered services in Brisbane North identifies their point of difference in being able to meet the demand for NDIS services provision. This strategy is identified as the use of appropriately trained and supported Allied Health Assistants. The organisations ethos of collaboration over competition enables their openness to sharing experiences and insights with industry and other external stakeholders alike so that others may achieve similar success.

The provider delivers a range of allied health services with the support of Delegated Practice Allied Health Assistants which allows for Allied Health Professionals to expand upon their service capacity. The premise of this model is that an Allied Health Professional will develop a treatment plan and then model and delegate certain aspects of the treatment to an appropriately trained Allied Health Assistant. In subsequent sessions, the treatment plan is then delivered by the Allied Health Assistant and a review of therapy or additional resources can be triggered at any time if the need arises.

The primary benefit of this strategy is an increase in cost-efficiency given the cost of Delegate Practice Allied Health Assistant services is significantly less than that of an Allied Health Professional. This efficiency ensures that participants' plans last longer and enables employers to be able to meet the ever-growing demand for NDIS services, particularly in the Allied Health professions. The provider notes that true delegated practice can only exist in the instance where the supervising professional is confident that the assistant can fulfil the prescribed guidelines of the current 2019/20 NDIS Pricing Guide's 'Level 2 – Therapy Assistant'.

7.2.1 Key strategies

The provider identifies three key pathways with which an employer of Allied Health services can engage and train an Allied Health Assistant.

- Firstly, VET registered training providers offer a Certificate III Allied Health Assistance, teaching the core skills needed in the discipline to provide delegated practice.
- Secondly, school-based traineeships are suggested as a relatively under-utilised strategy whereby the practical component of a Certificate III in Allied Health Assistance can be undertaken under the supervision of an Allied Health Professional using a Delegated Practice model.

- Finally, students of a relevant Allied Health degree (Bachelor or above) are eligible to practice as an Allied Health Assistant whilst undergoing their studies.

These identified pathways suggest a new opportunity to equip potential future professionals in the sector with a deeper understanding of disability alongside their approved study pathway.

In summary, innovation is key to success for many providers and collaboration and idea sharing such as that modelled by this provider is conducive to the highest all-round utility in the sector.

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9 GLOSSARY

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

Disability Capacity Building Supports: Support Coordination.

Disability Capital Supports: Home and Assistive Technology supports.

Disability Core Supports: Support activities such as assistance with daily living, transport, consumables and Socialisation and community.

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.

LAC: Local Area Coordinator

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

- **NDIS Participants:** Persons with a disability which is recognised under the NDIS and is eligible for support under the scheme.
- **NDIS Providers:** Organisations and sole traders which provide services that are subsidised or supported under NDIS provisions.
- **NDIS Workforce:** refers to the human capital which deliver or support the services provision of NDIS funded services.

Non-accredited Training: Training which does not form part of a nationally recognised 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.

Subsidised Training: The Government will cover the full cost or part of the cost of the training for eligible qualifications.

Yellow Card: Criminal history check for use by a disability services funded non-government service provider or a National Disability Insurance Scheme (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.



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