

# Appendix IV – Raw data from Employer Survey

## 163 Returns

**Question 1** 164 – 25 Mini Survey (excludes all questions but 9) – 2 (no response) = 137 responses

Chief Executive Officer	Regional or local manager	Chairperson
67	35	2

### Other Positions

Admin Officer	2	Human Resources Manager	2
Art Life Program Co-ordinator	1	Manager	2
Business Unit Manager	1	Manager Policy and Development	1
Co-ordinator	2	Planning and Development	1
Deputy CEO	1	Policy and Research Coordinator	1
Director	2	Program Manager	3
Director of Day Service	1	Respite Coordinator	1
Director of Clinical Services	1	Senior Teams Member	2
Director of Nursing	1	Service Manager	1
Director of Services	1	SW Dept Manager	1
Disability Services Manager	1	Team Leader	2
General Manager	2	<b>TOTAL</b>	<b>33</b>

**Question 2** 164 – 25 Mini Survey (excludes all questions but 9) – 2 (no response) = 137 responses

Less than 12 months	1 – 2 years	2 – 5 years
4	1	14
5 – 10 years	10 – 20 years	20 – 30 years
20	35	29
30 – 40 years	More than 40 years	
10	24	

**Question 3** 164 – 25 Mini Survey (excludes all questions but 9) – 1 (didn't respond) = 138 responses

<b>Acc. outreach support</b>	<b>Advocacy</b>	<b>Aids &amp; Equipment</b>	<b>Beh. Intervention Services</b>
23	8	9	9
<b>Case Management</b>	<b>Congregate Care</b>	<b>Creating Inclusive Comm</b>	<b>Criminal Justice Service</b>
21	9	4	4
<b>Day Programs</b>	<b>Family Options</b>	<b>Flexible Care Packages</b>	<b>Futures for Young Adults</b>
65	8	21	58
<b>Intake, Access &amp; Response</b>	<b>In Home Acc.</b>	<b>Independent Living</b>	<b>Information Services</b>
2	25	15	19

<b>Transitional Acc. Support</b>	<b>Productivity Investment</b>	<b>Recreation</b>	<b>Shared Supported Acc.</b>
5	1	22	31
<b>Respite</b>	<b>Service Quality</b>	<b>Research &amp; Evaluation</b>	<b>Therapy</b>
43	1	0	9
<b>Home Support</b>			
20			

#### Other Services

Sport	Consultancy	Work Programs
Volunteer Coordination	Shared Family Care	Support for Cover Programs
Clinical Support	Community Inclusion Project	Chronic Illness Funding
Training & development innovation	Home First	Education in Sexual & Reproduction Health
Adult, Communication & Further Education	Counselling and Youth Support	Early Intervention Specialist
Children Services (ages 0 – 6)	Regional NW	Community Integration
Peak Agency (x2)	Early Childhood Intervention Services (x2)	Disability Continence Support (x 2)
MHF Funding ATSS	Many others funded by HACC, SCS and SRV	

#### Question 4 164 – 25 Mini Survey (excludes all questions but 9) – 2 (didn't respond) =137 responses

<b>Development Delay</b>	<b>Intellectual Disability</b>	<b>Learning Disability</b>	<b>Autism</b>
56	118	52	83
<b>Physical Disability</b>	<b>Acquired Brain Injury</b>	<b>Deaf/Blind</b>	<b>Vision Disability</b>
92	78	55	63
<b>Hearing Disability</b>	<b>Speech Disability</b>	<b>Neurological Disability</b>	
66	60	61	

#### Question 5 164 – 25 Mini Survey (excludes all questions but 9) – 1 (didn't respond) =137 responses

<b>1 only</b>	<b>2 only</b>	<b>3 - 5</b>	<b>5 - 10</b>	<b>10 – 20</b>	<b>21 – 30</b>	<b>More than 30</b>
42	17	37	22	10	1	8

#### Comments

Numbers	Comments
<b>1 Only</b>	Autism Victoria is a peak body and represents 12 agencies
	Provide in home support and one adult day centre
	Community Housing program provides support to 10 homes in the community
	Six additional sites provide commonwealth funded employment assistance
<b>3 - 5</b>	Excludes Commonwealth Funded Sites
	Most of our service is delivered on an outreach basis
	Mainly Disability
<b>5 - 10</b>	This does not count individual client's homes
<b>10 – 20</b>	Counting Independent living sites
<b>21 – 30</b>	Some of these are Commonwealth Funded Services
	Staff work in clients homes

**Question 6**

164 – 25 Mini Survey (excludes all questions but 9) – 1 (didn't respond) =137 responses

<b>Barwon-South Western</b>	<b>Eastern Metropolitan</b>	<b>Gippsland</b>	<b>Grampians</b>
27	33	27	29
<b>Hume</b>	<b>Loddon Mallee</b>	<b>Northern Metropolitan</b>	<b>Southern Metropolitan</b>
32	33	32	37
<b>Western Metropolitan</b>			
36			

**Question 7**

164 – 25 Mini Survey (excludes all questions but 9) – 16 (didn't respond) =123 responses

<b>CEO</b>	<b>Senior Manager</b>	<b>Other Managers/Supervisors</b>	<b>All Staff</b>
43	35	32	84

**Comments**

With part time staff depending on salary to whether they are offered a salary package
All staff, excluding casual staff
We outsource the administration and staff are able to package whatever suits them as long as it meets the ATO/EBT criteria.
Staff must earn \$15K gross to enter salary packaging
Grossed up to 25%
Grossed up to \$30K
Salaries Sacrifice for all staff including individual packages and vehicles for Senior Manager
Vehicles for Senior Managers
Private use of vehicle for CEO and Senior Manager. Payment of expenses for CEO, Senior Manager and Staff. Petrol card for all staff
Available after three months of employment - Petrol card for staff.
Payment to loans/mortgages/superannuation fees, reimbursement of credit cards, Vehicles for Senior Managers and other staff can salary sacrifice for vehicle as well.
Tax savings on: loan and mortgage repayments, private health insurance, life insurance, credit card payments, education/training expenses, council and water rates, car and home insurance, car registration, child care expenses, professional subscriptions, additional superannuation.
Credit Card payments, loans, superannuation, school fees, health insurance, entertainment & computers
Credit Card payments, mortgage/rent payments
Available to all permanent staff also part time staff who work sufficient hours
Salary packaging is offered to all and implemented according to individual needs/preferences
After 12 months, expense payment benefits/reimbursement as per award and superannuation.
Packaging started July 02
Superannuation only
Reimbursement of any expenses

**Question 8**

164 – 25 Mini Survey (excludes all questions but 9) – 20 (didn't respond) = 119 responses

The individual employee	The agency	Both
85	6	26

**Comment re 'Both'**

	Comments
<b>The Ind. Employee</b>	Fortnightly \$10 salary packaging fee for administration purposes
	Agency benefits only by ability to attract staff and compete with salaries offered and paid by Government Services, especially in Residential
	No administration fee is charged to the employee
	At no cost to the agency
	Use of vehicle is only benefit
	Workcover premium benefit is to Ashcare. 9% superannuation will be paid or pre-packaged amount
<b>The Agency</b>	Cash equivalent of package is set by reference to community and industry surveys. Agency then find most economic way to provide that level.
<b>Both</b>	50/50 split of tax saving
	Introduction will enable effective increase to staff – ongoing benefit to both
	Assists organisation to employ and retain staff who are only funded at award wage
	Creates saving on WorkCover for agency
	Staff pay 2.5% towards administration costs
	Benefit obtained through government legislation half is past onto the employer

**Question 9**

164 – 5 (Non respondents) = 159 responses

159 – 22 (supplied not EFT) = 137 answered correctly

Type of service provision	Total EFT	Full-time	Part-time	Casual staff	TOTAL SERVICE PROVISIONS (-TOTAL EFT)
Accommodation Outreach Support	117	50	82	54	186
Advocacy Services	7	6	4	2	12
Aids and Equipment	11	2	25	9	36
Behaviour Intervention Services	17	11	16	0	27
Case Management	102	545	59	207	321
Congregate Care	131	20	151	12	183
Creating Inclusive Communities	19	14	6	13	33
Criminal Justice Services	47	27	17	15	59
Day Programs	1135	636	617	341	1594
Family Options	13	21	13	0	34
Flexible Care Packages	42	39	31	12	82
Futures for Young Adults	311	175	148	62	385
Home Support	177	29	171	96	296
In Home Accommodation Support	168	16	319	96	431
Independent Living Training	44	28	39	8	75
Information Services	26	15	32	0	46
Intake, Access and Response	0	0	1	0	1
Productivity Investment Fund	2	0	3	0	3
Recreation	21	25	31	79	134

Type of service provision	Total EFT	Full-time	Part-time	Casual staff	TOTAL SERVICE PROVISIONS (-TOTAL EFT)
Research and Evaluation	0	0	0	0	0
Respite	249	47.5	215	280	542
Service Quality	1	2	1	9	12
Shared Supported Accommodation	972	236	1100	254	1590
Therapy	204	76	193	41	310
Transitional Accommodation Support	6	4	15	0	19
Others	728	427.6	345.2	68	840.8
	4551 Total EFT	1958.25 F/T Staff	3632.8 P/T Staff	1656.5 Casual Staff	7247.55

**Question 10** 164 – 25 Mini Survey (excludes all questions but 9) – 12 (Trial Surveys) – 1 (non respondent) =126 responses

Senior executive	Manager	Direct Support Worker	Supervisor
76	240	4182	314
Professional	Para Professional	Administration	Tradesperson
533	74	246	24

#### Other Staff Include

Position	Number		
Casual Tutors	9	Assistant Manager	2
Cleaners	8	Disability Educator	1
Maintenance	2	Research and Development Officer	2
Transport	23	Chaperones	3
Human Resources Officer	3	Accountant	1
		<b>TOTAL</b>	<b>55</b>

TOTAL NUMBER OF STAFF RECORDED: 5744 Employees

**Question 11** 164 – 25 Mini Survey (excludes all questions but 9) – 12 (Trial Surveys) – 3 (non respondents) =124 responses

#### MALES

15 - 19	20 - 24	25 - 29	30 - 34	35 - 39	40 - 44	45 - 49	50 - 54
12	93.3	168	192	194	191	243	144
55 - 59	60 - 64	65+	TOTAL				
120	62	23	1442.30				

#### FEMALES

15 - 19	20 - 24	25 - 29	30 - 34	35 - 39	40 - 44	45 - 49	50 - 54
50	424	554	565	509	698	611	536
55 - 59	60 - 64	65+	TOTAL				
269	113	28	4357				

TOTAL NUMBER OF STAFF RECORDED: 5799.3 Employees

**Question 12**

164 – 25 Mini Survey (excludes all questions but 9) – 3 non-respondents) =136 responses

Relevant Industrial Instruments	Full-time staff numbers	Part-time staff numbers	Casual staff numbers	TOTAL NO. IN SERVICE
Residential and Support Services Award	254	1335	498	<b>2087</b>
ATSS MECA	485	396	298	<b>1179</b>
Attendant Care Award	12	148	232	<b>392</b>
Health Professionals Award	46	269	205	<b>520</b>
Health and Allied Agencies Award	43	105	53	<b>201</b>
SACS Award	158	212	139	<b>509</b>
Disability Services Award	20	35	17	<b>80</b>
Other	644	770	740	<b>2154</b>
<b>TOTAL NUMBER</b>	<b>1662</b>	<b>3270</b>	<b>2182</b>	

Other Industrial Instruments	
ATSS – Non MECA	AEU
CETS Award	Individual Award
PSV and HSUA	Psychologist Awards
Community Access Services Certificate	Merriwa Certified Agreement
Early Childhood/Nurses Award	PACCT
YSV NARS	LAWA Local Government Award
Government Residential Award	Clerical/Administration Award
Hospital Award	Enterprise Awards
YMCA Award	Victorian Independent Schools Teachers Award
Scope Individual Contracts	Early Childhood Teachers
Victorian Local Authority Award	RVIB Educational Services
Community Employment Training	Disability Services Award
PACCT	ParaQuad Certified Agreement

**Question 13**

164 – 25 Mini Survey (excludes all questions but 9) =139 responses

0 = not problematic, 1 = somewhat problematic, 2 = highly problematic

9 Non Respondents	Lack of qualified candidates		
130 Responded	0	1	2
	<b>23</b>	<b>62</b>	<b>45</b>
13 Non Respondents	Salaries not competitive with comparable positions in other NG agencies		
126 Responded	0	1	2
	63	33	30
13 Non Respondents	Salaries not competitive with comparable positions in other GOV agencies		
126 Responded	0	1	2
	36	29	61

12 Non Respondents	<b>Perceived imbalance of the demands of the job and salary offered</b>		
<b>127 Responded</b>	0	1	2
	24	52	51
15 Non Respondents	<b>Problematic recruitment and selection requirements or procedures</b>		
<b>124 Responded</b>	0	1	2
	90	31	3
24 Non Respondents	<b>Length of time for police checks</b>		
<b>115 Responded</b>	0	1	2
	63	34	18

**Question 14**

164 – 25 Mini Survey (excludes all questions but 9) =139 responses  
0 = not problematic, 1 = somewhat problematic, 2 = highly problematic

20 Non Respondents	<b>Low salaries</b>		
<b>119 Responded</b>	0	1	2
	31	41	47
21 Non Respondents	<b>Inadequate conditions such as leave, hours of work, etc</b>		
<b>118 Responded</b>	0	1	2
	67	40	11
17 Non Respondents	<b>Workload too high or too demanding</b>		
<b>122 Responded</b>	0	1	2
	38	60	24
24 Non Respondents	<b>Lack of opportunities for promotion and career development in the agency</b>		
<b>115 Responded</b>	0	1	2
	64	38	13
18 Non Respondents	<b>Insufficient opportunities for promotion and career development in the agency</b>		
<b>121 Responded</b>	0	1	2
	34	56	31
22 Non Respondents	<b>Poor Facilities</b>		
<b>117 Responded</b>	0	1	2
	79	31	7
22 Non Respondents	<b>Workers do not feel valued by the agency</b>		
<b>117 Responded</b>	0	1	2
	75	36	6
29 Non Respondents	<b>Competition from employers paying more highly for similar work</b>		
<b>110 Responded</b>	0	1	2
	41	30	39

<b>Other Problems</b>			
Left Area	0	Employing Relief Staff	2
Injury/illness	0	Unsatisfactory placement procedures placing staff at risk	2
Flexibility Family needs	1	Hours are broken shifts	2
Lack of professional ethics within the field	1	Time fractions for staff dictated by funding	2
Family Commitment	1	Lack of hrs to offer to workers	2
Change of career or lifestyle	1	Only P/T wk available	2
Lack of feelings of value by several community members	1	Salary packaging no longer beneficial	2

**Question 15**

164 – 25 Mini Survey (excludes all questions but 9) – 30 (non respondents) = 109 responses

<b>Left to take up a job in another non-government disability agency</b>			<b>TOTAL: 153 Staff</b>
Full Time	Part Time	Casual	
64	53	36	
<b>Left to take up a job in the government disability services area</b>			<b>TOTAL: 82 Staff</b>
Full Time	Part Time	Casual	
34	21	27	
<b>Left the disability field</b>			<b>TOTAL: 180 Staff</b>
Full Time	Part Time	Casual	
60	82	38	
<b>Not known</b>			<b>TOTAL: 117 Staff</b>
Full Time	Part Time	Casual	
32	29	56	
<b>TOTAL FULL TIME STAFF</b>	<b>TOTAL PART TIME STAFF</b>	<b>TOTAL CASUAL STAFF</b>	
190 Staff	185 Staff	157 Staff	

**Question 16**

164 – 25 Mini Survey (excludes all questions but 9) = 139 Respondents

		YES	NO
11 Non Respondents	128 Respondents		
Full-time staff positions are often filled by own part-timers casuals		68	59
9 Non Respondents	130 Respondents		
Part-time staff positions are often filled by own casuals		96	34
8 Non Respondents	131 Respondents		
Recruitment of appropriately trained and suitable staff is relatively easy to accomplish		24	107
9 Non Respondents	130 Respondents		
New staff are most often recruited from government Disability service providers		10	120

**Question 17**

164 – 25 Mini Survey (excludes all questions but 9) – 4 = 135 Respondents

	YES	NO
Do you current have unfilled vacancies in your agency/organisation	51	84

**Question 18**

164 – 25 Mini Survey (excludes all questions but 9) = 139 Respondents

(85 Non Respondents = 54 Responded)	Comments
In process of being filled 40	Difficult to fill because of broken and small number of hours
	Specifically related to those positions funded by DHS Disability funding grant
	Have advertised awaiting closing date for applications
	Waiting on police checks
	Recent vacancy - one staff member left. One new position created.
	Advertising
	Seven positions available
	House supervisor available
(86 Non Respondents = 55 Responded)	Comments
Insufficient funding to fill position 7	Two positions available
	Therapists positions mainly
(86 Non Respondents = 55 Responded)	Comments
Have advertised but cannot locate appropriately trained person 20	In addition to this, approximately 25% of permanent residential support worker positions are filled with casual or agency staff
	Difficult to get people to apply at all
	Regional City - hard to get Allied Health Professionals
	Three positions available
	House supervisor and support workers available
This is a big problem	
(86 Non Respondents = 55 Responded)	Comments
Have advertised but cannot locate appropriately suitable person(s) 16	Problems which lead to the use of agency staff or casual labour. Personal suitability or experience which is lacking
	Advertised twice. Only one applicant the first time. Six next time but no suitable candidate
	In case management, this often happens
	Applicants not close enough geographically to clients
	Obtained increased funding due to successful tenders, preparation for more support services required
	Support workers
	Depends on availability of applicants, client's selection, etc

(85 Non Respondents = 54 Responded)		Comments
Other Reasons	10	Have advertised but no suitable applicants, as we can offer training provided certain criteria are fulfilled. Not getting responses for jobs re location, number staff for high support clients, retention of staff due to stress.
		Have advertised with no response at all
		Organisation in process of restructure due to change in funding source and ageing of clients – positions are temporarily kept vacant.
		Ongoing funding is only agreed to on a month to month basis. Therefore positions are insecure and casual. Difficult to recruit people with skills and keep them for any length of time (the funding has been like this for 10 months)
		Inadequate pay to attract staff with required competence
		Recruitment from fields which are highly paid elsewhere
		Small programs, may have only one 4 hour job per week available, positions may be in a remote area
		Difficulty attracting staff to rural areas especially allied health fields
		Only recently advertised
		Difficulty in maintaining capacity in organisation to train and supervise staff. This is a problem of unit costing formula and inadequate margin to fund managed services.

**Question 19**

164 – 25 Mini Survey (excludes all questions but 9) – 95 (Non - respondents)  
= 44 Respondents

Type of service provision	Full-time vacancies	Part-time vacancies	Casual vacancies	TOTAL NUMBER
Community & Home-Based Support	8	70	36	100
Community Participation	3	5	13	21
Congregate Care	0	1	0	0
Corporate Services/Management	4	4	0	8
Flexible Support Packages	0	0.8	0	0.8
Information & Advocacy Services	0	1	0	1
Intake Assessment	0	0	0	0
Planning & Coordination	1	4	0	5
Primary Support	0	14	0	14
Quality & Accreditation	0	0	0	0
Shared Supported Accommodation	18	49	22	89
Specialist Services	6.5	9	1	16.5
Strengthening Communities	0	0	0	0
Training Development & Innovation	1	1	0	2
<b>TOTAL</b>	<b>83.5</b>	<b>158.8</b>	<b>72</b>	

**Question 20****164 – 25 Mini Survey (excludes all questions but 9) = 139 Respondents**

	Full Time	Part Time	Casual	TOTAL HOURS
	25 Non respondents = 114 Responded	23 Non respondents = 116 Responded	22 Non respondents = 117 Responded	
Number of hours in total provided to each group	20336.8	28188.8	7810.4	56336

**Question 21****164 – 25 Mini Survey (excludes all questions but 9) = 139 Respondents**

Areas of difficulty in accessing training
Program Management and Leadership
Problems getting appropriate presenters
Ventilator care and tracheostomy care
Dual disabilities
Basic and coherent training progress for new staff
Oral Disability need to be more practical hands on training
Basic counselling skills
Computer Training
Legislative requirements, changes especially OHS in regards to disability
All training
Specialised coaching, training
Program Coordinator training on Respite Recreation
Incident Reporting
Duty of Care
Basic Communication Skills
Direct services support
In the last year training options for staff have greatly improved.
Insufficient numbers to make local training viable
Interpreters
First Aid - group
Program Planning
Budgeting for NOL - Accounting staff (eg Team leaders, Managers)
Out of hours training sessions
Language barrier can be a problem
Case Management
Manual Handling
Cost is a big concern
Good practice health record writing
Public relations, positive organisational behaviour
Workload Management for Case Managers
PART Training
Dementia

Perceived reasons for difficulty
There needs to be at least 3 sessions of each training to allow all staff to attend
Not many services for dual disabilities
Money to pay for suitability qualified trainers is our problem
More theory based or programs based not practical
Locating 'pitching' at the right level
Cost of training and replacement of staff
Back fill and the need to also train casual staff
Not enough mentors
Not seen as enough by field or important enough
Relatively new approach to service provision
Agencies not prepared to cover costs due to restrictions on their budget
Need a service for after hours training
Courses are difficult to find
Accreditation
Have to go to numerous sources for information
Cost of facilitator
Difficult to access in rural areas - unless organisation has 20+ participants
Cost of Course and limited course availability
Cost of driving lessons very high
Lack of support
Lack funding
HACC Training Project Funds are limited
Often courses available are only targeted to trainers or representatives not providing an overview of the framework.
Fragmented need to access different provides, some programs not meeting national competency standards
Because there are no set units or class designed for Cert IV Disability – this makes training difficult
Facilitators not willing to travel, expensive to travel to areas with less attendance. Cheaper in larger populated areas as more attend.
People perceive a difficulty because of the demise of the Staff Training Development Unit.
HACC is just being assessed by disability clients (psych) and lack of suitable workforce is an issue
Unable to get physiotherapists who have specific expertise in both training and severe and multiple disabilities
Small agency has difficulty in having a single new staff member access training. Necessary for one service for new night staff members.
Staff work weekends, it is not possible to access training during weekends, often availability of training impinges on their other employment
Cost and mostly, inadequate resources in the community from specialist services often hospital based

Areas of difficulty in accessing training	Perceived reasons for difficulty
ATSS has always been able to find correct course/training options, but cost or time required away from service (more than 3 allocated days) makes courses prohibitive.	Unit and the ineffective establishment of DSTSS. It has been of benefit to our organisation to have control over training budgets and ability to choose/design suitable training.
Overall training is accessible sometimes, the cost is very high which makes it difficult. Regional Training is not often available so cost is increased by transport and accommodation etc.	Lack of qualified and experienced trainers in this area. University courses not always suitable for staff working full time. Distance Education at University of Melbourne not always favoured by staff. Courses cancelled due to low numbers.
Having insufficient staff training program planning days allocated under current funding arrangements. If the service would do 'all staff' training - 3 days per year inadequate	Agency allied health trainers do not cover further than a 15km area from agency site. Hence one-on-one training is difficult and expensive to fund. Other agencies individual with clients i.e. RDNS refuse to take responsibility for training staff.
Challenging behaviour (x3)	
Specific Disability Training	
Overall disability training for HomeCare Staff	
Cost of backfill	
Prohibitive cost of most conferences	
Community Development training becoming easier to find	
Art and Craft course to show specific activities for Aged and Disabled Clients	
Rectal valium, enema and suppository training and/or peg (gastrostomy) feeding training	
No real difficulty. Knowledge of the field and access to good independent providers of training has been of assistance to us.	
For our clients who are on apprenticeships	
Regional agencies find it hard to get trainers in specialist disability areas to come to out to region (4 hrs from Melbourne) due to cost and availability	
Professional Assault and Response Training	
Driving - 12 seater bus. Advanced driving courses for staff	
No real difficulty in finding professionals to deliver identified training needs	

**Question 22** 164 – 25 Mini Survey (excludes all questions but 9) – 23 Non Respondents = 116 Respondents

Approximately what amounts does this equal	\$2152,566.00
What was your total expenditure in 2001 on training and development	\$2945,359.00