

TASMANIAN DISABILITY WORKFORCE STRATEGY AND ACTION PLAN

Version 2 May 2017

National Disability Services



Acknowledgements

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Australian Government

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**Tasmanian
Government**

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About National Disability Services

National Disability Services is the peak body for non-government disability services. Its purpose is to promote quality service provision and life opportunities for people with disability. NDS's Australia-wide membership includes more than 1050 non-government organisations. Which support people with all forms of disability. NDS provides information and networking opportunities to its members and policy advice to state, territory and federal governments.

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General Background

The National Disability Insurance Scheme (NDIS) is intended to help people who have a significant and permanent disability and need assistance with everyday activities. This includes people with intellectual, cognitive, neurological or sensory disability, a physical impairment or a psychiatric condition. Unlike funding arrangements under prior federal/state agreements which were largely block-funded, the NDIS is intended to provide more choice and control and deliver a lifelong, individualised funding approach to support. Individuals seeking access to the NDIS are assessed according to a common set of criteria. Those who are deemed eligible participate in an individualised planning process to identify the reasonable and necessary supports they need to achieve their goals. Participants will also receive an individualised package of funding to purchase the supports as identified in their plan.

NDIS participants may choose to either keep their current support arrangements once they move across to the NDIS, or change them, provided they are consistent with NDIS legislation.¹

Tasmania participated in the trial phase of the NDIS between July 2013 and 2016, which saw over 1000 people between the ages of 15 and 25 receive an approved plan.

In December 2016, a bilateral agreement between the State and Federal Government was finalised. This spelt out the roll-out schedule for the full implementation of the Scheme.

- 1 July 2016 - young people aged 12-14
- 1 January 2017 - adults aged 25-28
- 1 July 2017 - children aged 4-11
- 1 January 2018 - adults aged 29-34
- 1 July 2018 - children aged 0-3 and adults aged 35-49
- 1 January 2019 - all remaining adults aged 50-64

During 2015 and 2016, through the Disability Workforce Innovation Network project (funded by Department of Employment), NDS was charged with developing a regional workforce plan for the sector. The first version of this document was launched in February 2016, and identified a set of actions to ensure disability service providers had access to workforce development initiatives that would position them suitably for the changes that will come with the implementation of NDIS. Further, from a sector perspective, providers asked NDS to implement actions that would strengthen the supply of capable workers seeking to enter the sector.

During consultation it was considered important that in Tasmania, the plan covered the whole state. It built upon previous work undertaken by NDS through the Tasmanian Disability Industry Workforce Development and Skills Plan 2013 – 2018, sponsored by Skills Tasmania.

During March and April 2017, with funding from Skills Tasmania, the plan was updated to include more recent workforce data and to reflect the progress made in implementing the actions.

The revised WSAP includes new data about the disability workforce, which has not previously been available. This is taken from information collected nationally by NDS through the Workforce Wizard portal as well as results from NDS member surveys related to their readiness for the NDIS. To further enhance the information from in the previous version, additional data was sourced from National Disability Insurance Agency (NDIA);

1 Australian Institute of Health and Welfare (2015) Disability support services: Services provided under the National Disability Agreement 2013 – 2014. Retrieved from Australian Institute of Health and Welfare website <http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=60129551423>

Household, Income and Labour Dynamics Australia (HILDA); and VOCSTATS datasets to further build our knowledge of the Disability workforce nationally and within Tasmania specifically.

This, the second version of the plan, continues to guide NDS and disability sector stakeholders in identifying and implementing workforce planning and development activity during the transition to full implementation of NDIS.

Regional background

Tasmania has a distributed population with 60% of people living outside of the capital city. The State Government has developed a Population Growth Strategy, which aims to increase the population from 515 000 currently to 650 000 by 2050. The strategy recognises the contribution of the health care and social assistance sector, which makes up a larger percentage of the Gross State Product than in the rest of Australia. The anticipated growth in the disability sector as a result of the implementation of the NDIS may be seen as providing strong opportunities for employment.

The percentage of Tasmanian adults (20 to 64 years) who have completed Year 12 or a Certificate II qualification or above is the lowest in Australia. Tasmania also has relatively low rates of numeracy and literacy among adults, especially among women who had the lowest rate of any Australian state/territory for literacy and second lowest after Western Australia for numeracy in 2011-12.

Additionally, Tasmania has the highest rates of disability of any state or territory for people aged 64 years and under. The overall disability rate for Tasmanian men and women in this age group is 5-6 percentage points higher than the Australian population as a whole.²

Scope of plan

The plan is a living document that is updated regularly and made available on the NDS website for stakeholders. The data presented and actions devised were relevant at the time the plan was last updated (March 2017), however these will be amended to reflect the workforce changes taking place over the period of NDIS implementation. In terms of data presented, this second version of the plan has expanded on the first version as new and relevant data has been identified.

The workforce strategy and action plan addresses the disability sector throughout Tasmania, assuming a high level view but providing actions that can be applied by service providers at an organisational level. The term 'workforce' in this plan refers to all people who are involved in the business of providing services for people with disability. This extends to all positions within a disability service provider organisation including board members, management and support workers.

The plan addresses workforce issues raised by disability service providers, which are registered under the NDIS, and other key stakeholders. These issues have been considered in terms of workforce capability, utilisation and supply as well as by job family.

The plan does not attempt to address the workforce requirements of mainstream service systems such as emergency services, health and justice. However, through the consultation process NDS recognised there is work to be done to enhance the supports offered to children with disability during their schooling so they have the opportunity to leave school already on a path toward their independence goals. While NDS considers this

2 NDS (2014) National disability workforce strategy project: Tasmanian trial site profile and findings. Retrieved from National Disability Services website <http://www.nds.org.au/publications?s=TAS&c=23>

outside the scope of our current operations, we will seek to engage with appropriate parties to ensure that strengthening the education sector that supports young people with disability remains a priority.

Aims of the plan

The workforce strategy and action plan aims to support the sector to:

- Attract and retain workers to meet increasing demand for services for people with disability under the NDIS (supply)
- Apply organisational efficiencies in the management of workforces to operate sustainably under the NDIS (utilisation)
- Develop existing workforces to meet the needs of participants under the NDIS (capability)

Stakeholders & engagement

Consultation for the first version of this Plan commenced in 2015 with the mid-term review of the existing Tasmanian Disability Workforce Development and Skills Plan. The review process produced a report, which presented a range of issues stakeholders felt need to be addressed in this plan.

Between the end of August and early October 2015, NDS engaged extensively with a range of stakeholders through forums and individual meetings. See Appendix A for details.

Throughout 2016 and early 2017, NDS has continued to engage with stakeholders. This includes members, people with disability, other providers, and stakeholders more broadly. This engagement has happened through workshops and other project activities, provider visits, incidental meetings and organised forums.

Table 1

Formal engagement sessions with members and other stakeholders

Forum	Dates
Members' Forums	2016: February, April, June, August, October, December
Disability Industry Round Table	2016: February, May, August, November 2017: February
Disability Training Quality Network	2016: April, July, September
Disability Industry Finance Operations Round Table	2016: June, July, August, September, November 2017: February, May
Business innovation forum	2016: February
Industrial relations in an NDIS setting	2016: April
Executive Leaders' Summit: Supporting people with behaviours of concern	2016: July
Understanding abuse and staying safe forum	2016: August
Disability sector Political Forum	2017: March

To ensure the voice of people with intellectual disability is included in the implementation of the Plan, in 2016 NDS funded Speak Out Association to conduct a number of member forums. These provided valuable input into the details and implementation of actions associated with:

- An industry awards program
- Encouraging services to employ people with disability
- Encouraging broader community services to register to deliver NDIS services
- Developing training for broader community services to work with people with disability
- Values based recruitment training for services
- The supports that services provide to their staff, for example, induction, supervision, performance appraisal
- Developing an emerging leaders training program for leaders in services that overlaps with a peer leadership program

Disability services profile

There are currently two sources of funding for providing services for people with disability available in Tasmania, the NDIS and the National Disability Agreement (NDA)³, which encompasses DHHS funded services. Data collection is based on each of these separately.

Due to the NDIS being rolled out by age cohort in Tasmania, most NDS member organisations are currently funded through both these sources.

Over the next 24 months there will be an increase in NDIS funded services and a decrease in NDA funded services.

NDIS data

As at the 28 February 2017, there were 590 organisations registered to provide NDIS services in Tasmania. As at December 2016, around one-quarter (26 per cent) of registered providers were sole traders.

Table 2

Number of providers registered for each service delivery group as at 28 February 2017.⁴

Therapeutic supports	181	Ex physiology/personal training	53
Personal mobility equipment	123	Custom prosthetics	52
Assist prod - personal care/safety	117	Accommodation/tenancy	51
Assistance - travel/transport	108	Innov community participation	46
Participate community	95	Assist access/maintain employ	45
Assistance - life stage, transition	86	Hearing equipment	44
Development-life skills	83	Specialised driver training	39
Assistive equip-recreation	81	Support coordination	36
Household tasks	77	Vision equipment	31
Assist personal activities	75	Community nursing care	27
Personal activities high	73	Plan management	27
Assistive prod-household task	69	Spec support employ	25
Home modification	67	Interpret/translate	21
Group/centre activities	66	Vehicle modifications	21
Behaviour support	57	Specialised hearing services	10
Comms & info equipment	57	Specialised disability accommodation	4
Early childhood supports	54	Assistance animals	1
Daily tasks/shared living	53	Hearing services	1

³ The NDA continues to fund people with disability until they transition to the NDIS.

⁴ NDIS website, March 2017

NDA data

Under the NDA there were 109 disability specialist organisations funded in Tasmania during 2014 – 2015 through both state and federal programs. Of these organisations, 8 were government organisations, 45 were income tax exempt and 56 were non-income tax exempt.⁵

Table 3

Number of outlets offering support services by service type.⁶ Note that one service may have several outlets.

Accommodation support		Respite	
In-home accommodation support	52	Flexible respite	26
Group homes	36	Centre-based respite/respite homes	10
Attendant care/personal care	7	Own home respite	3
Large residential/institution	3	Host family/peer support respite	1
Hostels	3	Other respite	—
Small residential/institution	1	Total respite	40
Alternative family placement	—	Advocacy, information and alternative communication	
Other accommodation support	—	Information/referral	11
Total accommodation support	102	Advocacy	6
Community support		Combined information/advocacy	5
Case management, local coordination and development	9	Alternative formats of communication	2
Regional resource and support teams	5	Mutual support/self-help groups	1
Other community support	4	Total advocacy, information and alternative communication	25
Therapy support for individuals	3	Other support	
Early childhood intervention	—	Peak bodies	3
Behaviour/specialist intervention	—	Training and development	1
Counselling (individual/family/group)	—	Research and evaluation	—
Total community support	21	Other support services	—
Community access		Total other support	4
Learning and life skills development	49		
Recreation/holiday programs	6		
Other community access	—		
Total community access	55		

⁵ AIHW Disability support services Appendix 2014-2015

⁶ ibid

Demand for services

The demands placed on the workforce reflect the demand for service from the NDIS. Data from the 2011 census indicates that there were 14,380 people in Tasmania between the ages of 0 and 64 who required assistance with core activities. NDIA information however predicts that 10,600 people will access the NDIS at full-scheme rollout.

It is assumed that the remaining 3,780 people, who identify as requiring assistance with core activities, will not meet the eligibility requirements to receive a package under the NDIS.

The table below estimates how this population will roll into the NDIS over time.⁷

Table 4

NDIA-estimated number of Tasmanian NDIS participants by year and region (cumulative)

Service region	30 June 2016	30 June 2017	30 June 2018	30 June 2019
Hobart	500	1,000	2,100	4,400
Launceston	100	300	700	1,300
North (excl. Launceston)	200	300	700	1,600
South (excl. Hobart)	100	100	300	800
North West	200	500	1,100	2,500
Total	1,100	2,200	4,900	10,600

As at 31 December 2016, there were 1,645 people with approved plans worth \$0.1 billion. The great majority of funding committed in participants' plans is to assist with the daily life at home, in the community, education and at work. This reflects the needs of the age group (16-25 year olds) accessing NDIS at this time.

Regional population data

Tasmania had a population of 514,700. It has a relatively older population, with a median age of 41.5 years compared with 37.3 years for Australia overall.

Tasmania also has a lower relative income, at \$40,749 a year compared with \$44,940 a year for Australia overall.

As a proportion of the total Tasmanian population aged 15 years and older, 51 per cent have a post school qualification. This is slightly lower than the national rate of 55.9 per cent.

4.5% of the population speaks a language other than English at home, much lower than the national rate of 18.2 per cent.

4.0% of the population identifies as Aboriginal or Torres Strait Islander compared with 2.6 per cent nationally.⁸

7 NDIA (2016) Market position statement Tasmania

8 ABS website, Regional Summaries, accessed March 2017

Regional labour force data

In 2017, the February seasonally adjusted unemployment rate in Tasmania was 5.8 per cent, up from 5.6 per cent in January. The participation rate in Tasmania was 59.5 per cent, lower than any other state in Australia.

The total number of people employed in Tasmania was 239,200, of which 63 per cent were employed full-time.

The number of employed females in Tasmania was 111,700. The female unemployment rate was 6.0 per cent and the participation rate was 55.0 per cent.

The number of employed males in Tasmania was 127,600. The male unemployment rate was 5.6 per cent and the participation rate was 64.1 per cent.⁹

Table 5

Employment by industry in Tasmania

Industry	% workforce
Health care and social assistance	12%
Retail trade	11%
Public administration and safety	9%
Education and training	9%
Manufacturing	9%
Construction	8%
Accommodation and food services	7%
Agriculture, forestry and fishing	5%
Professional, scientific and technical services	5%
Transport, postal and warehousing	4%
Wholesale trade	3%
Administrative and support services	3%
Financial and insurance services	2%
Electricity, gas, water and waste services	2%
Arts and recreation services	2%
Information media and telecommunications	2%
Mining	1%
Rental, hiring and real estate services	1%
Other services	4%

⁹ ABS Labour Force Survey, cat. no. 6202.0, seasonally adjusted figures

Disability workforce profile

The Australian Bureau of Statistics industry classification system splits the disability workforce into two classifications that includes several other organisations unrelated to disability.¹⁰ As a result, it is difficult to provide detailed, accurate information about the workforce in this sector. In July 2016, NDIA published Market Position Statement: Tasmania, which gave ranges of FTE numbers as follows.

Support workforce size – current and projected

The current workforce is estimated to be between 1,750 and 2,150 full-time equivalent positions.¹¹

Using data collected in September 2016¹², based on 947 disability support workers and their hours over 6 organisations, the headcount to FTE ratio is 1.7. That is, there are 1.7 people employed (positions) for every FTE. It is therefore estimated that the Tasmanian disability support workforce comprises between 3,000 and 3,700 individual workers.

The workforce is estimated to grow to between 3,200 and 3,900 full-time equivalent positions by 2019.¹³

Using the same method as above, assuming no significant change in the ratio, there will be between 5,400 and 6,600 individual support workers employed at full-scheme rollout in 2019.

The growth in the number of new positions available between 2016 and 2019 is therefore be estimated to be between 2,500 and 3,000.

It should be noted that this range does not account for natural workforce attrition during the time period, which is likely to increase the recruitment action needed by employers by a factor of around two.

The required increase in the workforce will not be evenly distributed across the state, as shown in Table 1 below. The South (excl. Hobart) region is expected to require the largest workforce increase, as the current estimated workforce is less than 40% of the estimated NDIS workforce. Launceston and Hobart are expected to require the smallest workforce increase, as the current estimated workforce is between 60% and 80% of the estimated NDIS workforce.¹⁴

10 NDS and Windsor and Associates (2014) Roadmap to a sustainable workforce: Improving the quality of disability workforce data. Unpublished.

11 NDIA (2016) Market position statement Tasmania

12 NDS (2016) 'Workforce Wizard quarterly report: Quarter 3, ending April 2015-2016', unpublished.

13 NDIA (2016) Market position statement Tasmania

14 ibid

Table 6

Estimated current and future disability workforce in Tasmania.¹⁵ The numbers of workers is based on a FTE to headcount ratio of 1.7.¹⁶

Region	Estimated number of current workers	Estimated future FTE range	Estimated future number of workers
Hobart	1,360 – 1,700	1,350 – 1,600	2,295 – 2,720
Launceston	425 – 510	400 – 500	680 – 850
North (excl. Launceston)	425 – 510	450 – 550	765 – 935
South (excl. Hobart)	85 – 170	250 – 300	425 – 510
North West	680 – 765	750 – 950	1,275 – 1,615
Total	2,975 – 3,655	3,200 – 3,900	5,440 – 6,630

Workforce characteristics

All data in this section has been collected through the use of Workforce Wizard. Workforce Wizard is an online tool developed by NDS to help disability organisations track workforce trends, and to provide aggregated workforce data for the sector. The first Australian Disability Workforce Bulletin will be published in May 2017. The data and analysis following, is taken from this Bulletin and is based on national data input by disability service providers.

Employment type

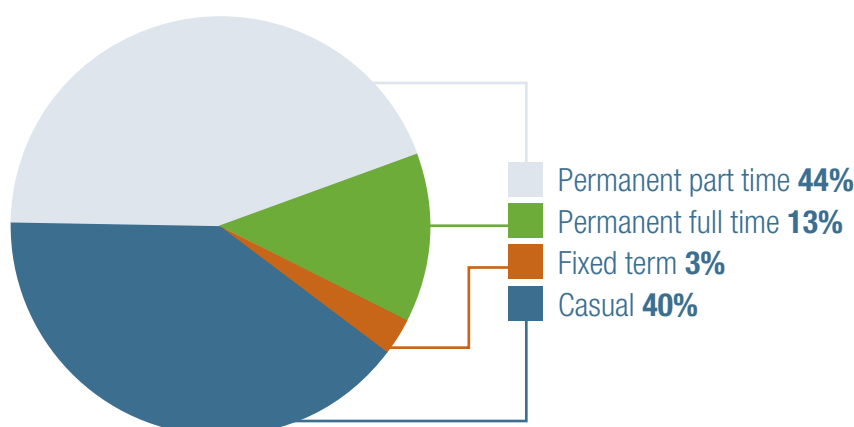
Organisations in Tasmania have a lower proportion of full-time workers in their workforce compared with results across the nation, and a higher dependency on part-time workers. The proportion of casuals however is on par with the national average, as are the turnover rates for casual and permanent staff.

The most common form of employment for disability support workers in the December 2016 quarter was part-time permanent employment (44 per cent of aggregate workers), closely followed by casual employment (40 per cent). Full-time staff made up only 13 per cent of the disability support workforce, and fixed-term employees were not a significant part of the disability support workforce at only 3 per cent.

Figure 1

National disability workforce characteristics, types of employment.

Types of employment Quarter ending Dec 2016



15 Ibid

16 NDS (2016) 'Workforce Wizard quarterly report: Quarter 3, ending April 2015-2016', unpublished.

Workforce utilisation

The following is based on national data from the September 2016 quarter, which was a more typical quarter unaffected by seasonal variability present in December 2016 data. Nationally, the average organisation employed their disability support workers for an average of 22.4 hours per week. This represents a headcount to FTE ratio of 1.99 staff per FTE¹⁷. This can be viewed as saying, on average, an organisation needed to employ 1.9 persons to fill one full-time position. Therefore, there is a converse relationship between the average number of hours worked per week and the number of staff it takes to fill a full-time position.

Workforce turnover

Workforce turnover is the rate at which staff have left the organisation compared with the number of staff at the organisation. High workforce turnover could reflect a disengaged workforce or pull factors from work in other sectors. High turnover increases costs for the organisation and can disrupt the continuity of care for people with disability.

The average organisational permanent turnover rate proves relatively stable over time, sitting around 4 per cent. Conversely, the average organisational casual turnover rate has been somewhat more variable since December 2015 and sits at double the permanent rate at 8.2 per cent in the December 2016 quarter.

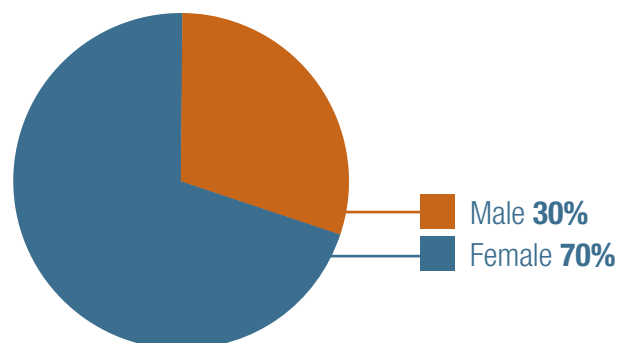
Age and gender distribution

The disability support workforce has a high proportion of female workers. Organisations have, on average, 70 per cent of their workforce being female compared with 30 per cent male.

Figure 2

National disability workforce characteristics – gender composition.

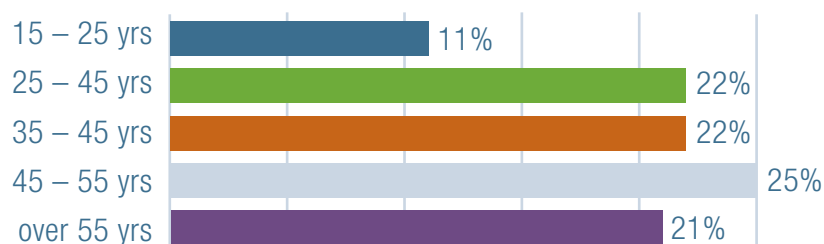
Gender composition Quarter ending Dec 2016



As seen below, the average organisation has 21% of its workforce aged 55 years and older.

Figure 3

National disability workforce characteristics – average organisational distribution of the workforce by age.



17 This figure is based on data from disability employers in all states so varies from the figure used in Table 6, which uses data from Tasmanian disability employers only.

Support workforce qualification levels

At present, there is no minimum qualification requirement for disability support workers. Anecdotally we know it is common for people to enter the workforce after studying Certificate III Disability, now Certificate III Individual Support (Disability). However, despite the significant numbers of people studying this qualification, it is not clear how high the density of workers with the qualification in the workforce is. The only data we have suggests that over half of the broader carer workforce has VET qualifications at Certificate III, IV, V or VI levels but this includes large numbers of childcare workers and educational aides, two groups likely to have high qualification rates (see Table 2 below). Moreover, this figure includes VET qualifications in any field – not necessarily disability or community services.

In Tasmania, during 2014 and 2015:

- Almost 1,200 people enrolled in Certificate III Disability. In the same time period, some 348 people completed the same qualifications.
- Almost 1,050 people enrolled in Certificate IV Disability qualifications. In the same period, 169 people completed the same qualifications.
- Over 200 people enrolled in Diploma Disability qualifications. In the same period, 48 people completed the same qualifications.

While there is not a direct relationship between the number of people enrolled and the number of qualification completed in any given year, a general tendency can be seen.

- About 30 percent of people enrolled in Certificate III Disability completed their course, which is about the average for all certificate III courses for the same period nationally (about 29 percent).
- About 16 percent of people enrolled in Certificate IV Disability qualifications completed their course, which is below the average for all certificate IV courses for the same period nationally (about 33 percent).
- About 23 percent of people enrolled in Diploma Disability qualifications completed their course, which is below the average for all certificate courses for the same period nationally (about 28 percent).

The use of traineeships has been reasonably common for qualifications related to care work, though data from NCVET shows a decline over 2015 to 2016. The following table shows the number of workers in Tasmania engaged in this form of employment for the ANZSCO category of Aged or Disabled Carer [423111]. Note, these figures include support workers in both aged and disability services.

Table 7

Number of active apprentices and trainees during four quarters to Sept 2016.¹⁸

ANZSCO category and type of worker		Oct - Dec 2015	Jan - Mar 2016	Apr - Jun 2016	Jul - Sep 2016
423111 Aged or Disabled Carers	Existing workers	72	51	46	24
	Not-existing workers	111	89	66	33
	TOTAL	183	140	112	57

¹⁸ NCVET, VOCSTATS, Retrieved April 2017

National data from the 2014 Household, Income and Labour Dynamics Australia (HILDA) Survey for the broader category of Carers and Aides [42] indicates some 39 per cent of workers hold, as their highest qualification, a Certificate III or IV qualification in any field.

Table 8

Qualification density, Carers and Aides, Australia, 2014.¹⁹

Qualification level	Carers	Workers in other fields	Total
Postgrad - masters or doctorate	2	8	8
Grad diploma, grad certificate	1	7	6
Bachelor or honours	15	18	18
Adv diploma, diploma	14	10	10
Cert III or IV	39	21	22
Year 12	18	18	18
Year 11 and below	9	17	17
Undetermined	0	0	0
Total	100	100	100
n	477	8,927	9,404

It should be noted that the category Carers and Aides includes: child carers, education aides, dental assistants, nursing support as well as aged and disabled carers, personal care workers and special care workers who will include disability support workers. The higher percentage of Cert III or IV qualifications in this occupation (compared with those in other occupations) could be attributed to mandatory qualifications at this level in a number of the sub-occupations. Also note, the qualification is not necessarily relevant to the occupation the worker is currently performing.

¹⁹ HILDA 2014.0, extracted by Ian Watson July 2016 for NDS

Allied health

The growth of the allied health workforce is difficult to estimate as there is little data specific to the disability sector. The following information has been sourced from data from the last two censuses and adjusted to reflect an estimated percentage of the number of people likely to be working in the disability sector.

Following are the estimated variations in allied health workforce size based on growth over a five year period 2006 – 2011.²⁰

2006	369
2011	442
Variation	+20%
2016 predicted	530
2021 predicted	636

The above indicates a trend toward growth in the allied health professional roles, which is in keeping with observations of demand as services recruit to meet the needs of their NDIS funded clients. Assuming the rate of growth continues at the same rate, the workforce will need to grow by approximately 160 allied health professionals.

It should be noted this estimate is based on past growth and cannot account for the market demands that may result from NDIS. Further, these numbers are extrapolated from census data that is inherently indefinite.

Service provider self-assessment of NDIS readiness in terms of people and capability

Since 2014, once a year NDS members have been invited to complete the organisational readiness toolkit and report back with their findings, which were then benchmarked against other services nationally. In 2016, 14 services in Tasmania responded to this request and their data is summarised below. The table indicates the percentage of services that consider themselves NDIS ready against the indicated focus areas.

From the data, it is evident that services will have an appetite to engage in strengthening HR strategy and workforce planning.

Table 9

NDIS readiness in terms of people and capability 2016

Focus area	Providers in Tasmania	Providers outside Tasmania
Staff leadership	79%	67%
Staffing and recruitment	79%	61%
Employee performance planning and support	71%	67%
Learning and Development	64%	64%
HR systems, policy and procedures	57%	57%
HR strategy and workforce planning	29%	37%

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²⁰ NDS and Windsor and Associates. (2014). Roadmap to a sustainable workforce: Improving the quality of disability workforce data. Unpublished.

Other data about workforce from service providers

Between September and December 2016, CEOs and senior management of disability organisations were invited to participate in research for the Disability Services Market Report. This report consolidated the previous Business Confidence Survey with a research project being conducted in conjunction with Curtin University's Not-For-Profit Initiative. In total, 37 organisations from Tasmania responded.

Table 10

Staffing levels for disability direct support workers and allied health by end of financial year

Workforce metric	Providers in Tasmania		Providers outside Tasmania	
	Increased	Decreased	Increased	Decreased
Your total staff head count	66%	3%	67%	8%
Full time permanent workers	31%	0%	31%	14%
Part time permanent workers	46%	0%	51%	8%
Full time fixed term workers	41%	6%	28%	15%
Part time fixed term workers	59%	6%	43%	10%
Full time casual workers	27%	20%	43%	14%
Part time casual workers	54%	14%	65%	8%

Table 11

Service provider feedback indicating retention difficulty

Retention difficulty	Providers in Tasmania	Providers outside Tasmania
Disability Support Workers	47%	33%
Managers and supervisors of disability support workers	13%	22%
Marketing / business development	23%	11%
Finance / Accounting	27%	9%
Information Technology	0%	9%
HR / Workforce development	8%	10%

Table 12

Service provider feedback indicating recruitment difficulty

n.a. denotes that there were not enough respondents in Tasmania to report on this result

Recruitment difficulty	Providers in Tasmania	Providers outside Tasmania
Disability Support Workers	53%	49%
Managers and supervisors of disability support workers	25%	44%
Marketing / business development	31%	23%
Finance / Accounting	33%	17%
Information Technology	n.a.	n.a.
HR / Workforce development	25%	26%
Finance / Accounting	33%	17%
Information Technology	n.a.	n.a.
HR / Workforce development	25%	26%

The plan's actions by priority area

Priority area 1 SUPPLY

Desired Outcome / Goal

Encourage innovative and efficient use of the workforce.

Strategies

- 1.1 Support the sector to build a sustainable and diverse workforce
 - 1.2 Support the sector to build an allied health workforce with disability expertise
 - 1.3 Increase the ability of mainstream community services to support people with disability
 - 1.4 Support remote and regional communities to strengthen and grow their disability workforces
-

Strategy 1.1 Support the sector to build a sustainable and diverse workforce

Desired Outcome / Goal

Tasmania's large disability workforce embodies diversity in terms of age, gender and cultural background to meet the needs of the NDIS roll out.

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
On track	1.1.A	Develop a state-wide communication and marketing plan. The strategy will include actions to attract people to the sector, especially allied health and support workers.	1 May-17	31 Jul-17	DHHS SDF	TasTAFE	The Plan is produced within three months of being funded
On track	1.1.B	Implement Carecareers national roll out strategy in Tasmania.	Ongoing	30 Nov-17	DSS	Service providers Employment services	Attendance at a number of career expos and targeted engagement with employment support services across the state to promote the disability industry to a range of labour market candidates including carers, people with disability, newly arrived migrants, university students, teacher support officers and career changers.
On track	1.1.C	Implement ProjectAble national roll out strategy in Tasmania.	Ongoing	30 Nov-17	DSS	DoE and schools	
Unfunded	1.1.D	Establish an industry awards program including Workplace Ambassadors.				HESTA SpeakOut	Annual awards are held each year and services report benefit
On track	1.1.E	Promote opportunities for work experience placements for school students in a breadth of roles across the sector.	1 May-17	30 Jun-18	DHHS SDF	DoE and schools Service providers	At least 15 students per year across the state complete work experience with disability services

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
On track	1.1.F	Promote opportunities to increase and strengthen the use of traineeships for school leavers.	1 May-17	30 Jun-18	DHHS SDF	DoE and schools Service providers	There is demonstrable growth in the number of school leavers entering into traineeships in the sector each year
On track	1.1.G	Compile information for service providers to explain the services available when employing people with disability and connect service providers with DESs.	1 May-17	31 Jul-17	DHHS SDF	DESs Ticket to Work NDCO Service providers	Employers report they have increased the representation of people with disability in their workforce.
Unfunded	1.1.H	Support the running of the Gearing Up Expo.				NDIA NDCO SpeakOut	Gearing Up is run in 2018 or 2019.

Strategy 1.2 Support the sector to build an allied health workforce with disability expertise

Desired Outcome / Goal

Overcome the current and projected shortage of allied health workers as the NDIS rolls out.

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
Applied for funding	1.2.A	<p>Work with stakeholders to develop and implement a comprehensive disability sector allied health strategy that may include the following potential solutions:</p> <ul style="list-style-type: none"> • University of Tasmania offers component(s) of disability-relevant allied health courses in Tasmania, partnering with other universities for full qualifications • Government-provided bursaries and travel support are provided for early career allied health professionals working in Tasmania to ensure access to continuing professional development opportunities • Develop a shared clinical placement and professional support program where Tasmanian therapy services work together to attract and supervise student placements from mainland universities, and develop joint retention initiatives such as professional buddy systems and study hubs • Support networking to enable shared employment of regionally located therapists between disability services, and between disability and other services, where insufficient hours are available in one organisation or sector • In regional areas, develop models to connect therapists new to a region with local community supports and social networks <p>Make documented models of remote service provision using technology in innovative ways available to service providers and LACs.</p>			DHHS RFP	<p>Uni of Tas OT Australia and other peaks Specialist services Service providers</p>	<p>The strategy is produced within six months of being funded</p> <p>This plan is updated with actions from the strategy on completion</p>

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
On track	1.2.B	Work with allied health peaks and associations to facilitate the promotion of their professions as careers of choice. The approach taken will be detailed in the state-wide communication and marketing plan.	1 May-17	30 Jun-18	DHHS SDF	OT Australia Other peaks and assoc DoE and schools	There is a measurable increase in the number of Tasmanians studying OT and SP. Baseline data needs to be collected to inform this measure.

Strategy 1.3 Increase the ability of mainstream community services to support people with disability

Desired Outcome / Goal

Expand the number of workforces available to provide services to people with disability.

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
Applied for funding	1.3.A	Work with broader community services and private providers to promote opportunities available for them to register with NDIS to deliver services.			DHHS RFP	NDIA TasCOSS MHCT RTOs	The organisations registered to deliver under the NDIS reflects diversity.
On track	1.3.B	Identify/develop and broker a skillset training program for broader community services workforces to learn about working with people with disability.	1-Jun-17		Training brokerage and FFS		Training is offered around the state and subsequently, attendees report they have applied learnings to their workplace.

Strategy 1.4 Support remote and regional communities to strengthen and grow their disability workforces

Desired Outcome / Goal

People with disability living in remote and regional communities can access high quality support and therapy services.

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
On track	1.4.A	Map service delivery and models of delivery in regional, rural and remote communities	1-May-17	31-Jul-17	DHHS SDF	NDIA DHHS LGAs RDA Service providers	A document is produced within three months of being funded and informs Strategy 1.4.B
Unfunded	1.4.B	A. Liaise with communities on the east and west coasts to develop and implement a plan of action to strengthen the disability workforce in each region.				NDIA DHHS LGAs RDA Service providers MHCT RTOs TasCOSS LINC Skills Tas DSOs	A Local Action Plan (LAP) is produced for each community engaged within six months of being funded. Community stakeholders report they have been actively involved and support the LAP, the plan is updated with appropriate actions.

Priority area 2 UTILISATION

Desired Outcome / Goal

Encourage innovative and efficient use of the workforce

Strategies

- 2.1 Strengthen the ability to lead and innovate in an NDIS market
 - 2.2 Support greater uptake of IT solutions in business operations
 - 2.3 Support the increased use of allied health assistants within the sector
 - 2.4 Support the sector to consolidate employment and minimise fragmentation of the workforce
 - 2.5 Implement strategies to support an ageing workforce
 - 2.6 Establish a research group to document and promote evidence-based practice
-

Strategy 2.1 Strengthen leaders' ability to innovate in an NDIS market

Desired Outcome / Goal

Senior leaders in the sector are exposed to innovative business models and become more skilled in the process of innovating

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
On track	2.1.A	Establish an leadership innovation network for senior managers. Format may take the form of bi-monthly meetings with a focus on a specific topic to provide opportunities to share ideas and experiences. Seeks to balance financial imperatives with service quality - including promotion of positive behaviour support framework. All are same - Actions 2.1.A, 3.1.B and 3.3.F Links with Action 2.2.A	1-May-17	30-Jun-18	DHHS SDF	Service providers	Members report engagement was beneficial and they have applied learnings to their workplace.
Ongoing	2.1.B	Facilitate connections between Tasmanian services and those from other trial sites as well as with organisations that can provide specialist advice.	Ongoing	30-Jun-18	NA	Service providers	Opportunistic linking of services is exploited where appropriate.
Completed		Run a business innovation forum showcasing innovative solutions to working in an environment of individualised funding. Include a focus on the process of innovating.	Ongoing	31-Dec-16	DOI	Quartz Consulting Service providers	Forum run 12 Feb 2016. 45 attendees representing 28 services from all around the State.

Strategy 2.2 Support greater uptake of IT solutions in business operations

Desired Outcome / Goal

Enable efficiencies to be adopted by services through the use technology based solutions

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
Unfunded	2.2.A	Facilitate the establishment of experimental projects with interested services to trial low-cost, innovative IT solutions to support reporting and supervision efficiencies. Document the results and share broadly with other services. Explore opportunity for an “exciter” workshop to stimulate interest and sharing between service providers. Link to 2.1.A		31 Jul-18		ICT Tasmania Service providers ACST	At least five services participate and report benefit. At least three solutions are written up and disseminated to other services.
Applied for funding	2.2.B	Work with services to trial models of allied health service delivery using technology to support hub-and-spoke outreach with allied health assistants and/or support workers. Links with Action 1.2.A.		31 Jul-18	DHHS RFP		At least three services participate and report benefit. Findings are written up and shared with other services.
Unfunded	2.2.C	Develop a train-the-trainer program guide for services to train workers internally in the use of IT systems.					Services report benefit from using the guide.
Completed		Roll out Improve-IT-4-NDIS project		30 Jun-16			https://improveit.org/improveit4ndis

Strategy 2.3 Support the increased use of allied health assistants within the sector

Desired Outcome / Goal

People with disability have access to allied health services across the state within reasonable wait times.

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
Applied for funding	2.3.A	<p>Research and examine models of practice to support the increased use of allied health assistants within the disability sector. Activity may include identification and/or development of:</p> <ul style="list-style-type: none"> • A supervision and delegation framework • A high quality training model with contextualisation in disability partnering with specialised RTOs from other states <p>Links with Actions 1.1.A, 1.1.B, 1.1.E, 1.1.F, 1.2.A and 2.2.C.</p>			DHHS RFT	<p>NDS Tasmania DHHS OT Australia Service providers RTOs Specialist services Consumers</p>	A measurable increase in the allied health assistant workforce is identified. Services report this as beneficial to service provision.

Strategy 2.4 Support the sector to consolidate employment and minimise fragmentation of the workforce

Desired Outcome / Goal

The support worker workforce is strengthened in regional areas to meet demand under the NDIS. Support workers are offered consolidated employment opportunities.

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
Applied for funding	2.4.A	<p>Establish a sector-owned shared recruitment service with seed funding to service regional areas of Tasmania.</p>			Skills Tas WfDev 2017	<p>Service providers ICT Tasmania</p>	<p>A sector-owned shared recruitment service is researched and established providing services to at least six services in Tasmania. Services and employees report satisfaction with the service. Project establishes a viable business.</p>

Strategy 2.5 Assist employers to support an ageing workforce

Desired Outcome / Goal

Employers provide a targeted program to support the older members of their workforce.

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
On track	2.5.A	Provide information to disability services to understand effective ways to support older employees. Activity may include: <ul style="list-style-type: none"> • Research and dissemination of information • Conducting webinars • Focus topic at RoundTable meetings Links with Action 3.2.A Links with Action 3.3.B	1 Jan-17	31 Dec-17	Skills Tas WfDev 2016	Service providers	Services report that employees over 50 years of age record high levels of engagement with their workplace.

Strategy 2.6 Establish a research group to document and promote evidence-based practice

Desired Outcome / Goal

The practices employed in the delivery of services for people with disability are evidence-based and innovations to strengthen practice seek to contribute to this body of knowledge.

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
On track	2.6.A	Establish a practice-based research group meeting quarterly to: <ul style="list-style-type: none"> • Share and discuss new and existing research • Create and document safe-to-fail research trials • Encourage research to be undertaken in Tasmania • Include a focus on using positive behaviour supports 	1 May-17	30 Jun-18	DHHS SDF	Service providers RTOs University of Tas ASID	A group comprising services and researchers is established and members report benefit for their workplace from participation in activity. At least three small research trials are established and documented. Findings are disseminated across the sector. Services involved report practice is strengthened as a result of participation.

Priority area 3 CAPABILITY

Desired Outcome / Goal

Development of the skills and knowledge of service providers to support the NDIS.

Strategies

- 3.1 Strengthen board and senior leadership capability
 - 3.2 Strengthen human resource management practices
 - 3.3 Strengthen management and leadership capability
 - 3.4 Strengthen support services capability
 - 3.5 Support the training sector to provide high quality training in disability work
 - 3.6 Support development of the peer advocacy workforce
-

Strategy 3.1 Strengthen board and senior leadership capability

Desired Outcome / Goal

Senior managers and board members are knowledgeable and skilled in the governing of a NFP organisation delivering services for people with disability.

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
On track	3.1.A	Based on 'leading the way' and 'organisational readiness toolkit', develop resource for board members to check organisational progress toward NDIS readiness in terms of service quality and financial preparedness - deliver via series of workshops. Produce checklists for domains from tool, and links to existing resources that may include information about working with people with disability, the history of the sector, positive behaviour support frameworks, and information about governance timelines and responsibilities.	1 Jul-16	30 Jun-17	PIR	Service providers	Present to at least 20 providers across the State and they report benefit from the engagement. Produce a resource to be shared electronically and in hard copy with board members of services operating in the NDIS market.
On track	3.1.B	Establish an leadership innovation network for senior managers. Format may take the form of bi-monthly meetings with a focus on a specific topic to provide opportunities to share ideas and experiences. Seeks to balance financial imperatives with service quality - including promotion of positive behaviour support framework. All are same - Actions 2.1.A, 3.1.B and 3.3.F Links with Action 2.2.A	1 May-17	30 Jun-18	DHHS SDF	Service providers	Members report engagement was beneficial and they have applied learnings to their workplace.
Underway	3.1.C	Communicate value of organisational metrics tracking tools and engage senior leaders in participating: Business Confidence Survey, Provider toolkit, Employee Engagement Tool	Ongoing	30 Jun-17			

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
Completed		Conduct workshops based on the organisational readiness toolkit.	1 Jan-16	30 Jun-16	PIR	Service providers MHCT	Presented to 12 providers across the State who reported benefit from the engagement.
Completed		Provide face-to-face individual consultations for services to engage with a consultant.	1 Jan-16	30 Jun-16	PIR	Service providers MHCT	Worked with 8 providers across the State and they reported benefit from the engagement.

Strategy 3.2 Strengthen human resource management practices

Desired Outcome / Goal

The sector is recognised as an industry of choice on the basis of strong people and culture management

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
On track	3.2.A	Continue coordination of the Disability Industry Roundtable with a focus on leadership and HRM practice. Supported by an electronic newsletter between meetings. All same actions - 3.2.A and 3.3.A	Ongoing	30 Jun-17	DHHS Skills Tas WD 2016	Service providers Employment services RTOs	Members report benefit in terms of strengthening HRM and leadership skills and knowledge
On track	3.2.B	Offer a training program on values based recruitment involving participants, workers and management. Activities may include: Research and dissemination of information; training sessions; focus topic for RoundTable; access to consultants; supply of templates, sample policies and procedures.	1 Jan-17	31 Dec-17	Skills Tas WD 2016	Service providers	Participants report they have implemented a VBR process and are satisfied with the program.

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
On track	3.2.C	Offer a program to service providers enabling them to implement policies and procedures for inductions, structured supervision and mentoring, performance appraisal and performance management. Activity may include: research and dissemination of information; training sessions (webinars); focus topic at RoundTable meetings links with Action 3.2.A; access to consultants; supply of templates and sample policies and procedures.	1 Jan-17	31 Dec-17	Skills Tas WD 2016	Service providers	Participants report they have strengthened their procedures as a result of engagement in this program
On track	3.2.D	Provide information to services to support implementation of wellbeing program. Activity may include: research and dissemination of information (including Work Ability); connection with an Employee Assistance Program; training sessions (webinars); focus topics at RoundTable meetings.	1 Jan-17	31 Dec-17	Skills Tas WD 2016	Service providers	Services report increases in their workforce's wellbeing and engagement using measures such as the Work Ability Index.
On track	3.2.E	Provide information to services to support the creation of traineeships for young people entering the sector. Consider working with GTOs to provide full-time opportunities across multiple services if necessary.	1 Jan-17 1 May-17	31 Dec-17 30 Jun-18	Skills Tas WD 2016 DHHS SDF	AASNs and GTOs RTOs Service providers	A measurable growth in people under 25 taking up and completing full-time traineeships in the sector.
On track	3.2.F	Promote the uptake of the Skills Tasmania Employer of Choice program.	Ongoing			Skills Tasmania Providers	A measurable growth in the number of services recognised as EoCs.
Completed		Broker accredited training in workforce planning that sees the output as a workforce plan for the service.	1 Jan-16	31 Dec-16	PIR	Service providers Response training	Eight services completed a workforce plan as part of the training program.

Strategy 3.3 Strengthen management and leadership capability

Desired Outcome / Goal

Services are able to measure improvements in their leadership capability in terms of employee engagement.

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
On track	3.3.A	Continue coordination of the Disability Industry Roundtable with a focus on leadership and HRM practice. Supported by an electronic newsletter between meetings. All same actions - 3.2.A and 3.3.A	Ongoing	30 Jun-17	DHHS	Service providers Employment services RTOs	Members report benefit in terms of strengthening HRM and leadership skills and knowledge
On track	3.3.B	Provide information to services to support implementation of a staff engagement program. Activity may include: linking to the NDS employee engagement tool, research and dissemination of information; training sessions (webinars); focus topics at RoundTable meetings.	1 Jan-17	31 Dec-17	Skills Tas WD 2016	Service providers	Services have a good understanding of the level of their employees' engagement.
On track	3.3.C	Develop and broker a leadership training program at Certificate IV level for existing leaders comprising skillsets. Topics may include: mentoring work teams, upward communication, structured supervision and encouraging innovation.	1 Jul-16	Ongoing	Skills Fund	Service providers RTOs	At least four skillset training programs are developed and attended by at least 10 services that report benefit has been gained.

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
On track	3.3.D	Develop and broker a 12 month emerging leaders program for existing support workers working toward a Certificate IV outcome. The program should be practice-based and engage people in a social collaborative learning space. Competencies should be drawn from foundation skills (literacy, numeracy, digital literacy and oral communication); leadership and management; and disability qualifications. The program will have strong links with the peer leadership program. Links with Action 3.6.A	1 Jan-17	31 Dec-17	Skills Fund	Avidity training Social impact measurement Providers	Each year, a group of at least 15 support workers commence the program and at least 10 complete the program and report they have learned new skills they can apply.
On track	3.3.E	Develop and broker a skillset training program on leading a diverse workforce. Activity may include: Research and dissemination of information; Training sessions (face-to-face and webinars); Focus topics at RoundTable meetings links with Action 3.2.A.	1 May-17	30 Jun-18	DHHS SDF	Providers	At least 20 services in three locations participate in the training and report benefit from their attendance.
On track	3.3.F	Establish an leadership innovation network for senior managers. Format may take the form of bi-monthly meetings with a focus on a specific topic to provide opportunities to share ideas and experiences. Seeks to balance financial imperatives with service quality - including promotion of positive behaviour support framework. All are same - Actions 2.1.A, 3.1.B and 3.3.F Links with Action 2.2.A	1 May-17	30 Jun-18	DHHS SDF	Service provid-ers	Members report engagement was beneficial and they have applied learnings to their workplace.
Not funded	3.3.G	Identify higher education offerings to support career development pathways into higher levels of management				Uni Tas	A pathway is identified and shared with the sector.

Strategy 3.4 Strengthen support services capability

Desired Outcome / Goal

People with disability have the opportunity to choose their supports from a breadth of high quality services

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
On track	3.4.A	Promote training in administration of medication to ensure all support workers are qualified to do the work they are tasked with. Including: <ul style="list-style-type: none"> • Establish and disseminate a training calendar with training opportunities • Promote the use of training resource 'Get ready to assist clients with medications' • Evaluate need/viability for NDS to broker medication training 	Ongo-ing	Ongoing	26TEN	RTOs Service providers	Employers report that all staff are qualified to perform their duties.
Applied for funding	3.4.B	Continue workplace literacy project. Activities include: <ul style="list-style-type: none"> • Develop a train-the-trainer program to enable training by existing staff during team meetings • Support employers to develop a workforce literacy development plan (and seek funding where necessary) 	Ongo-ing	31 May-17	26TEN	Service providers	Services involved in the project report demonstrable benefit from the project. Employees involved in the project report they are able to apply learnings in carrying out their duties.
On track	3.4.C	Coordinate delivery of Plain English workshops for service providers	Ongo-ing	Ongoing	26TEN	26TEN Service providers	30 people around the State engage in the workshops and report benefit from attending.
Applied for funding	3.4.D	Broker a skillset training program to train frontline supervisors to mentor team members' literacy skills development - BSBSS00062 - Workplace Supervisor Language, Literacy and Numeracy Skill Set			Skills Fund tbc	Service providers RTOs	

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
Underway	3.4.E	Extend offering of accredited and non-accredited short course training (using brokerage arrangements where appropriate) to include (but not necessarily limited to): case management, head trauma, epilepsy, autism, working with young people with disability, working with older people with disability, specific to individual participant needs, working with behaviour management plans (including documentation requirements), allied health assistant skill sets.	Ongoing	Ongoing	Skills Fund TBC	Service providers RTOs Specialist services	A training calendar is established to provide opportunities for employees around the state to participate in a range of short courses. Attendees report they have applied learnings in their workplace.
Underway	3.4.F	Broker training to strengthen skills in supporting people with mental health conditions. Activity will include: <ul style="list-style-type: none"> • Mental Health First Aid training for support workers 	Ongoing	Ongoing		MHCT Service providers RTOs	Services and support workers report a strengthened capability to support people with disability who have mental health conditions.

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
On track	3.4.G	<p>Implement an Action Learning Network project to prepare the workforce for person-centred service delivery. Activities include:</p> <ul style="list-style-type: none"> • establish a network of services to act as demonstration projects • use intentional group learning strategies to build provider capacity to implement service quality improvement projects/trials • promote the use of high performance work practices in emerging models • build providers skills in using, and knowledge of, social impact measurements • build providers skills in co-design methods • develop a framework/process chart to implement service quality improvement projects/trials • share the framework, case studies and learnings across the sector through an evaluation of the network and resources publically available on NDS website <p>Links with Actions 2.1.A, 3.1.B and 3.3.F (innovative leaders network)</p> <p>Links with Action 2.6.A (research group)</p> <p>Links with Action 3.4.H (positive behaviour support framework)</p> <p>Links with Action 3.4.I (chronic disease management)</p>	1 May-17	30 Jun-18	DHHS SDF	Providers Evaluators	<p>Five to seven services participate in the network and continue the change process after the end of the program.</p> <p>The resources, tools, case studies and learnings are shared across the sector.</p>

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
Various	3.4.H	<p>Strengthening organisational capability to support people with behaviours of concern through implementation of a positive behaviour support framework. Activities will include:</p> <ul style="list-style-type: none"> • Enable training for teams within services, through brokerage if required, ensuring evidence-based practice Include topics on: plan writing, understanding disability, interpreting, implementing and monitoring plans. • Enable information session on the quality and safeguarding framework and use of restrictive practices • Develop a process chart of a good practice planning process (could emerge from 3.4.G) • Training for RTO trainers and assessors to ensure inclusion in delivery of Certificate III Individual Support (Disability). Links to Action 3.5.A. <p>Links with Action 2.6.A (research group) Links with Action 3.4.G (action learning network)</p>	Ongoing	Ongoing	DHHS SDF		The senior practitioner (or equivalent) is able to demonstrate a decrease in the number of incidents involving participants identified as having behaviours of concern over the duration of the project.

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
Unfunded	3.4.1	<p>Implement a pilot project to strengthen the disability workforce to support people with intellectual disability to make lifestyle choices to manage and prevent chronic disease.</p> <p>Activities may include:</p> <ul style="list-style-type: none"> • Engagement forums with support worker workforce • A peer-led training program for people with ID and their support workers • At home toolkit with menu cards, activity suggestions and planning templates. 					<p>The project demonstrates a reduction in lifestyle risk factors for people with ID involved. Services and support workers involved in the project report a strengthened capability to encourage the people they support to choose a healthy lifestyle.</p> <p>Interested services have at least one training team that can deliver in-house training. The project is considered repeatable with appropriate funding.</p>
Completed		Executive Leaders Summit: Supporting people with behaviours of concern		1 Jul-16		DHHS Speak Out	41 people attended the forum where presentations were made by Keith McVilly, Sharon Paley and providers shared good practice examples.
Completed		Research paper written and learning resources developed to enhance skills in workforce to encourage people with intellectual disability to make lifestyle choices for health and wellbeing.		1 Jul-16	PHT Skills Tas WfDev 2015	Speak Out	Two learning booklets were produced along with a research paper reviewing approaches to working in this space.

Strategy 3.5 Support the training sector to provide high quality training in disability work

Desired Outcome / Goal

Accredited training is highly valued by service providers and is seen as a key way to strengthen the disability workforce

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
On track	3.5.A	Establish a Training Quality Network that meets quarterly. Activities include: <ul style="list-style-type: none"> • Validation and moderation • Information sharing • Resource evaluation and development • Peer validation of assessor competence 	Ongoing	30 Jun-17	DHHS	Providers RTOs Advocacy orgs	Network members value the role of the TQN in the work they do. Services recognise accredited training as important to workforce development efforts state-wide.
On track	3.5.B	Encourage trainers in disability to attend practice-based research group. Links to Action 2.6.A	1 May-17	30 Jun-18	DHHS SDF	RTOs	
Unfunded	3.5.C	Encourage RTOs to ensure foundation skills training is adequately integrated into vocational training. This can include, but is not limited to: training for VET practitioners, discussion at TQN meetings, sharing of relevant resources. Links with 3.5.A	Ongoing	Ongoing			Services report that recent graduates have the foundation skills required to carry out their role.
Unfunded	3.5.D	Training for RTO trainers and assessors of Certificate III Individual Support (Disability) in positive behaviour supports, behaviour support plan writing and implementation, quality and safeguarding framework.	Ongoing	Ongoing		Anglicare Speak Out	
Completed		Teaching and learning resource development project.	Ongoing	30 May-17	Skills Tas WfDev 2015	SpeakOut	7 titles produced and launched in May 2017.

Strategy 3.6 Support the development of the peer advocacy workforce

Desired Outcome / Goal

The advocacy workforce is strengthened with more people with disability trained in leadership.

Progress	#	Actions	Start date	End date	Funding source	Other key stakeholders	Performance Indicators
Needs focus	3.6.A	Work collaboratively with the advocacy organisations to develop a peer leadership program that has strong connections with the emerging leaders program. Links with Actions 3.3.D	Ongoing	30 Jun-17		Providers RTOs Advocacy orgs	A combined leadership program is developed. Each year, a group of at least 15 people with disability commence the program and at least 10 complete the program and report they have learned new skills they can apply as an advocate.

Appendix A

Stakeholder engagement informing the WSAP

Early engagement to inform the first version of the Tasmanian Disability Workforce Strategy and Action Plan.

Between the end of August and early October 2015, NDS engaged extensively with a range of stakeholders through forums and individual meetings. Separate forums were conducted for each of the following groups while organisations not able to attend were consulted individually.

- Service providers and government stakeholders – full day workshop in Campbell Town
- Education and training providers – full day workshop in Campbell Town
- Employment service providers including JobActives, DESs and AACNs – two hour sessions in Hobart and Launceston
- Providers of allied health services and government stakeholders – full day workshop in Campbell Town

Other organisations were consulted individually. This was an opportunity extended to organisations invited to all forums as well as targeted organisations such as other community sector peak bodies.

The following organisations contributed to the development of this plan by participating in these forums during 2015.

Individual consultations

Aged Care Services Tasmania
Blue Line Employment
Early Childhood Australia
Eskleigh Homes
Guide Dogs Tasmania
HACSU
Mental Health Council
Occupational Therapy Australia
Primary Health Tasmania
Regional Development Australia
Speak Out Advocacy
Star Cosmos
TasCOSS
DHHS
TasTAFE
State Enterprise Training
Veranto

Allied health forum

Australian Association of Social Workers
Baptcare
Child Protection Services
Disability and Community Services
Independent Living Centre
National Disability Insurance Agency
Northwest Coast Family & Child Health
North West Residential Support Services
Primary Health Tasmania
St Giles
The ORS group
Youth Justice South
Employment services forum
APM Employment Services
Blueline Employment Services
LINC
ORS Group

Education and training forum

Association for Children with Disability
Campbell Page
Department of Education, Tasmania
Devonfield Training Services
MEGT
TasTAFE
University of Tasmania
Work and Training

Service provider and government stakeholders forum

Able Australia
Advocacy Tasmania
APM
Blueline Employment Services
Coastal Residential Services
Department of Health and Human Services, Tasmania
Department of Social Services
Devonfield Enterprises Inc.
Epilepsy Tasmania
Eskleigh Foundation
Family Based Care Association North West
Health Recruitment Plus
Hobart City Mission
Langford Support Services
Liviende Inc.
Montague Community Living
MS Society Tasmania
National Disability Insurance Agency
Nexus Inc
Oak Tasmania
Office of Hon Jacque Petrusma MP
Possability
Richmond Fellowship Tasmania
Self Help Workplace
Skills Tasmania, Dept of State Growth
The Parkside Foundation

Appendix B

Using the WSAP: A summary for disability service providers

What's in it for me?

The actions in the Plan can help your organisation prepare for the NDIS.

It will assist you to:

- Implement your workforce plan
- Measure the effectiveness of your workforce development and planning action
- Contribute to development of the sector

What can we do to support the Plan's success?

- Engage in training and other workforce development activities
- Engage with data collection activities
- Actively engage in the networks and action groups
- Contribute feedback to NDS submissions
- Take work experience and work placement students
- Look at traineeships differently
- Be prepared to innovate and share your successes and failures

What's in the Plan?

Networks and Action Groups

- Disability Industry Round Table
- Leaders Innovation Network
- Training Quality Network
- Practice-based Research Group
- Low-cost IT Innovation Hub

Projects

- Action Learning Network project
- Attracting new workers to the sector and strengthening the allied health workforce
- Exploring Higher Education opportunities to support sector capability
- Leadership buddy program – connecting with senior managers in other states
- Growing the role of allied health assistants
- Shared recruitment service
- Supporting an ageing workforce
- Strengthening staff engagement
- Induction toolkit for board members
- Reducing lifestyle risk factors to manage and prevent chronic illness

Learning and development programs

The following information will be available in a regular training calendar bringing together events from across the sector.

Topic	Who is it for?	Tell me about it
Emerging leaders	Support workers, key workers, team leaders	This certificate IV program will run over 12 months to prepare employees for a leadership role.
Employing values based recruitment	HR personnel	Workshops and a resource kit to learn how to successfully implement a recruitment on the basis of client, employee and organisational values
Leadership skills	Managers, key workers and team leaders	Skillset training includes: mentoring, communication, structured supervision, performance management, enabling innovation, etc.
Mental Health First Aid	Anyone	A program to learn how to provide initial support to people who are developing or experiencing mental illness.
Peer advocate leadership program	People with intellectual disability	This 12 month program will strengthen the leadership skills of peer advocates
Short courses	Anyone	Shorter programs on specific topics such as: supporting young people; supporting older people; understanding autism, epilepsy, head trauma; writing in plain English; writing behaviour management plans, allied health assistant skillsets, case management, etc.
Supporting people with behaviours of concern	Case managers, key workers, operations managers, support workers, team leaders	Training in evidence-based practice; documentation requirements; and quality and safeguarding framework and the use of restrictive interventions.
Train the trainer	Anyone	A non-accredited program to strengthen training skills of staff to conduct in-house training on the use of IT. Approximately 2 days.
Workplace literacy	Anyone	Training resources are available to use in your workplace to strengthen reading, writing, numeracy and oral communication.

NDS National
Disability
Services