

The background is a complex, abstract composition of overlapping geometric shapes, primarily triangles and polygons. These shapes are filled with various patterns and colors, including solid colors like red, green, and orange, as well as patterns such as polka dots, stripes, and zig-zags. The shapes are outlined in black, creating a high-contrast, graphic style.

atdc
WORKFORCE
SURVEY
2016

atdc

Alcohol, Tobacco and other
Drugs Council Tasmania Inc.

Results from this survey, and anecdotal evidence from member engagement continue to highlight the dedication and commitment of the Tasmanian ATOD workforce. They are a workforce wanting to make a difference to those in need, and wider society; together working to reduce drug related harm. These results show that the ATOD workforce and organisations value continual improvement of their practice through demonstrated participation in professional development, however it also highlights some of the challenges that still exist.

There is a clear age trend in the sector, evident since surveying began in 2010 which shows Tasmania has an aging ATOD workforce. There are also financial challenges which restrict worker access to professional development activities. Increasing caseloads and worker stress have also been identified as areas of concern. Into the future, the ATDC together with organisations and policy makers need to ensure that strategies are in place to address these issues so Tasmania can maintain a viable and skilled ATOD workforce.

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2016 Workforce Survey

The 2016 Workforce Survey provides a clear picture of the individuals and organisations that form Tasmania's ATOD sector.

Results and analysis are fundamental to addressing the range of factors that impact on the ability of the workforce to function effectively, now and into the future, in responding to alcohol and other drug related problems in Tasmania.

The dynamic nature of the ATOD sector creates an added layer of complexity for the workforce to navigate. Any response to workforce development must be evidence based and multi-faceted, targeting strategies at government, community, organisational and individual levels to achieve real change.

About the survey

This survey is the fourth of ATDC's workforce surveys and aims to provide a clear picture about the ATOD workforce across Tasmania. The survey was originally designed by the ATDC with support from the Workforce Development Expert Advisory Group. The 2016 survey instrument remained largely consistent with 2014 to assist with comparability of results. Previous surveys were conducted in 2010, 2012 and 2014.

The survey included two sections – an organisational component completed by managers from each of the participating organisations; and a survey completed by the individual ATOD workers who work within organisations that provide ATOD services. Across the two surveys, data was collected on topics including: organisational staffing and profiles; demographics of the workers; worker profiles including qualifications, role descriptions and employment status; professional development; workplace practices; and recruitment and retention. Participation in the survey was voluntary with both surveys administered by an online survey program. Individual respondents were not identified in the survey, and results are an aggregate of these participants.

Interpreting the results

Survey scope

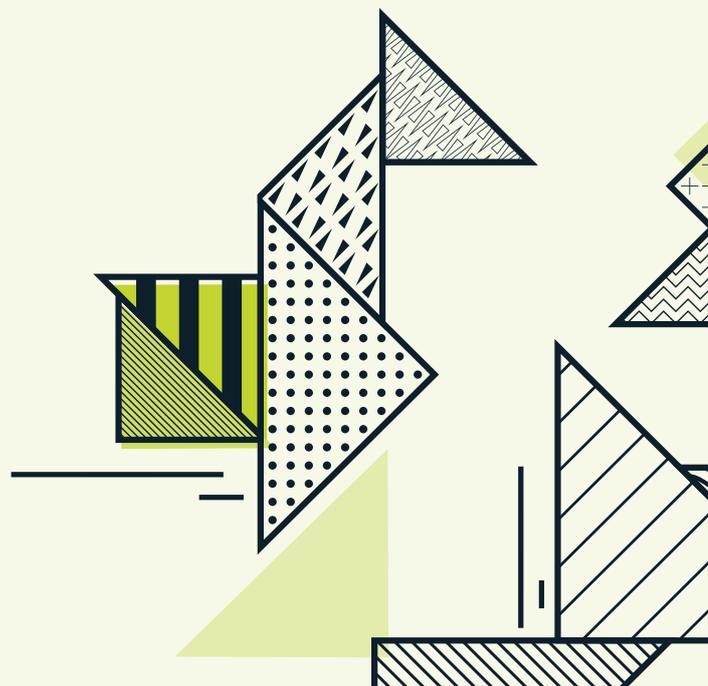
In the results, 'the ATOD sector' refers to CSOs and ATOD specific government organisations. It includes CSOs and government organisations that receive ATOD funding and organisations that do not receive funding specifically to provide ATOD services yet consider ATOD issues as one of many areas of concern for their service consumers. The survey does not include hospitals or general practitioners that work with ATOD affected consumers. Government organisations were included in this round of surveying to give a more holistic view of the Tasmanian ATOD workforce. Survey respondents were drawn from a mixture of managers, frontline staff and administrative staff.

Response rate

The ATDC endeavoured to collect responses from the whole sector. Multiple workers from every organisation completed the survey for individuals. On this basis, results are representative of the ATOD sector.

Missing data

Cases of sporadic missing data means that numbers involved in each analysis will vary. Not all questions were relevant to all individuals and a small number of people only completed certain sections of the survey.



Participating Organisations

- Advocacy Tasmania Inc.
- Alcohol and Drug Services (Department of Health and Human Services)
- Alcohol, Tobacco & other Drugs Council Tas Inc.
- Anglicare Tasmania Inc.
- Bethlehem House Tasmania Inc.
- Cancer Council Tasmania
- Colony 47 Inc.
- Drug Education Network Inc.
- Hobart Women's Shelter
- Holyoake Tasmania
- Launceston City Mission
- OZHELP Foundation
- Pathways Tasmania Inc.
- Quit Services Tasmania
- Tasmanian Aboriginal Centre Inc.
- Tasmanian Council on AIDS, Hepatitis & Related Diseases
- The Link Youth Health Service
- The Salvation Army
- Wyndarra Centre
- Youth, Family and Community Connections Inc.

Glossary of terms

ATOD workers/ATOD workforce/all staff – refers to all survey respondents including specialist workers (ATOD funded) and generalist workers from the health, welfare, education, law enforcement and related sectors, for whom ATOD work was one part of their job.

ATOD organisations – refers to all government and non-government organisations that participated in the survey.

Acronyms

ATDC - Alcohol Tobacco and other Drugs Council

ATOD - alcohol, tobacco and other drugs

CSOs – community sector organisations

About the ATDC

The Alcohol, Tobacco & other Drugs Council Tas Inc. (ATDC) is the peak body representing the interests of community sector organisations (CSOs) that provide services to people with substance use issues in Tasmania. The ATDC is a membership-based, independent, not-for-profit and incorporated organisation which is the key body advocating for adequate systemic support and funding for the delivery of evidence-based alcohol, tobacco and other drug (ATOD) initiatives.

Acknowledgements

The ATDC would like to thank all the survey respondents.

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Tasmanian ATOD Sector Staff

Demographics

- 111 individuals answered the survey.
- 75 females and 30 males – 6 did not wish to answer.
- 23 female managers and 8 male managers.
- There were more females in the workforce with 68% of all individuals, and 71% of managers, being female.

Figure 1: Ages of workers 2012-2016

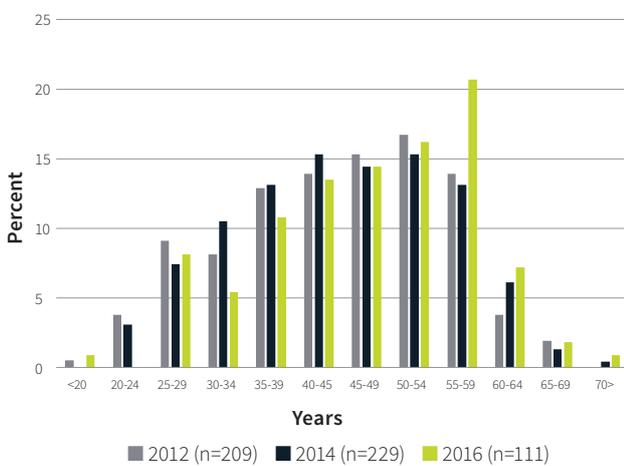
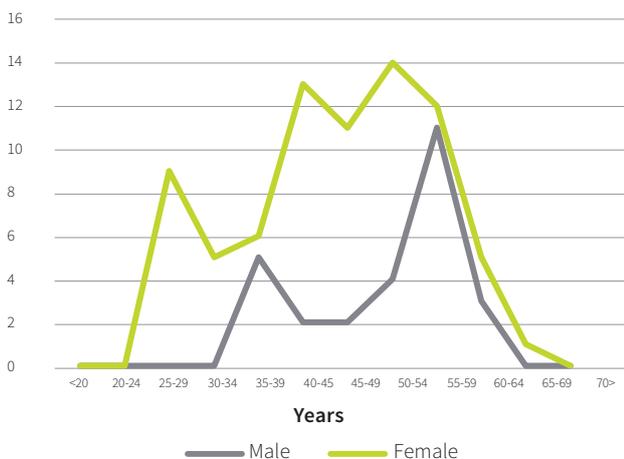


Figure note: all individual worker survey respondents.
Figure note: all survey respondents, 111 responses.

Figure 2: Age by Gender 2016



- The age profile of the ATOD workforce remained stable between 2012 and 2014. A trend towards higher aged workers, particularly in the 55 – 59 year age group (21%) was noted in 2016.
- Almost half of the ATOD workforce (47%) was aged 50 and over in 2016, compared to 36 percent in both 2014 and 2012.
- 5 percent of the ATOD workforce identified as having Aboriginal or Torres Strait Island descent in 2016, down from 8 percent in 2014.
- A small proportion of the ATOD workforce came from a culturally and linguistically diverse background (7%), though this was up from 4 percent in 2014.
- A very small proportion (2%) identified as having a disability.

Experience

Managers and Team Leaders averaged:

- 7.0 years experience in the ATOD field, down from 7.5 years in 2014;
- 4.8 years average experience as an ATOD manager or team leader, up from 4.0 in 2014; and
- 6.4 years with their current employer, up from 6 years in 2014.

Workers averaged:

- 6.0 years experience in the ATOD field, up from 4.5 years in 2014;
- 5.4 years with their current employer, up from 4.4 years in 2014.

Employment profile

- Almost half (55%) of individuals were employed in permanent positions, and fewer (41%) were employed in fixed term employment contracts. A small proportion (4%) were employed on a casual or temporary basis.
- The largest proportion (63%) were employed full time, while the remainder (37%) were employed part time.

55%
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Qualifications

- Fewer survey respondents noted having a qualification of any sort in 2016 compared to 2014. The majority of respondents in 2016 have a certificate IV or higher – a result consistent across ATOD funded workers and Managers/ Team Leaders.
- The most common types of positions held by ATOD staff were – Counsellor (17%), Social Worker, Support Worker (both 12%), Team Leader/Coordinator and Manager (both 8%).

Table 1: Qualifications of the ATOD workforce 2014 – 2016*

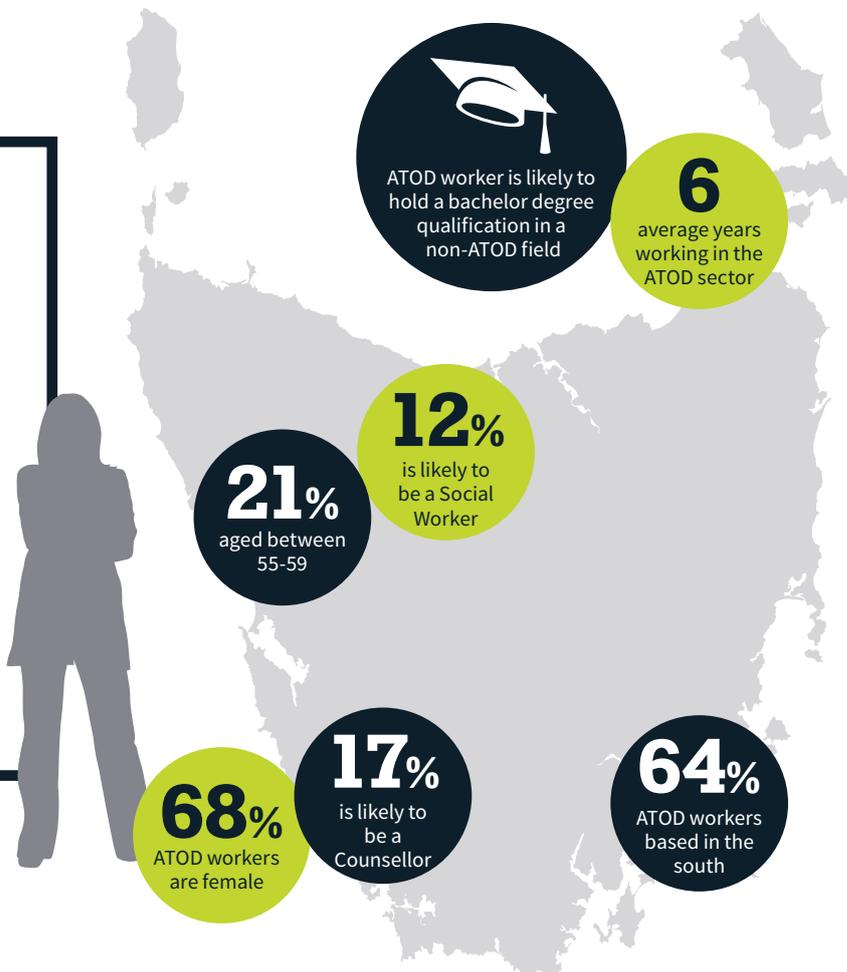
Highest qualification level	All Staff		ATOD funded workers		Managers and Team Leaders	
	2014	2016	2014	2016	2014	2016
Certificate IV or higher	95%	83%	99%	83%	94%	76%
Diploma or higher	86%	73%	94%	77%	94%	59%
Degree or higher	56%	49%	66%	48%	52%	38%

*These qualifications could be from any discipline/area, not just ATOD specific qualifications.

A 'Typical' Tasmanian ATOD Worker?

The 2016 Workforce Survey results suggests that the 'typical' Tasmanian ATOD worker:

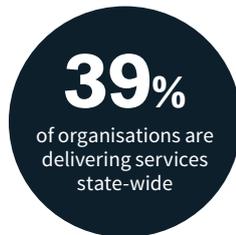
- Is female (68 percent, compared to 27 percent male);
- Is aged 55 – 59 years (21 percent of respondents);
- Is based in the South of the state (64 percent of respondents);
- Has been working in the ATOD sector for an average of six years;
- Is likely to be a Counsellor (17 percent) or Social Worker (12 percent);
- Is likely to be working in a permanent, full-time position;
- Is likely to hold a bachelor degree qualification in a non-ATOD health, social or behavioural sciences field.



Tasmanian ATOD Sector Organisations

Organisation profile

- ATOD services are provided by a variety of large, medium and small organisations. Not all of those organisations are specifically funded to deliver ATOD services. The size of an organisation can determine the extent of in-house support that ATOD workers can access, as well as career pathways and professional development opportunities.
- On average, there were 12 staff per organisation providing ATOD services.
- 39 percent of organisations are delivering services state-wide.
- Just over a quarter (27%) of survey respondents have state-wide responsibilities.
- Most organisations are situated in metropolitan areas around Hobart, Launceston and Devonport.



Wages and conditions

- Around half (51%) of all respondents were employed at levels 4 – 7 under the Social Community Home Care and Disability Services Award.
- 31 percent of individuals received above award wages.
- The majority (91%) of individuals had access to Fringe Benefits Tax exemption or salary packaging, with just over three quarters (77%) electing to opt-in.
- Flexible work hours was available to almost three quarters (72%) of respondents with the majority (64%) utilising this option.
- Almost three quarters (73%) of individuals had access to TOIL or paid overtime, 62 percent participated.

Roles of Managers

- Over three quarters (77%) of managers had client contact or other responsibilities in addition to their management or leadership roles.
- Around a third (29%) of all individuals surveyed had some staff management or leadership responsibilities.

Figure 3: Management roles in organisations 2016

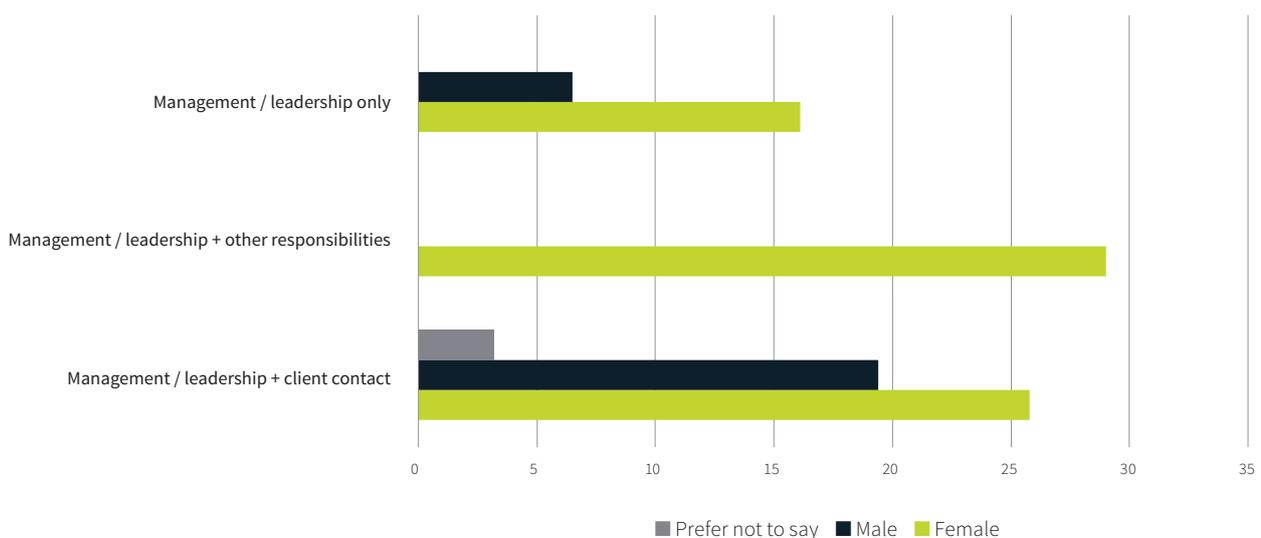


Figure note: Data was filtered to managers only (31 responses)

Figure 4: Management roles in organisations 2012, 2014 and 2016

Management roles within organisations

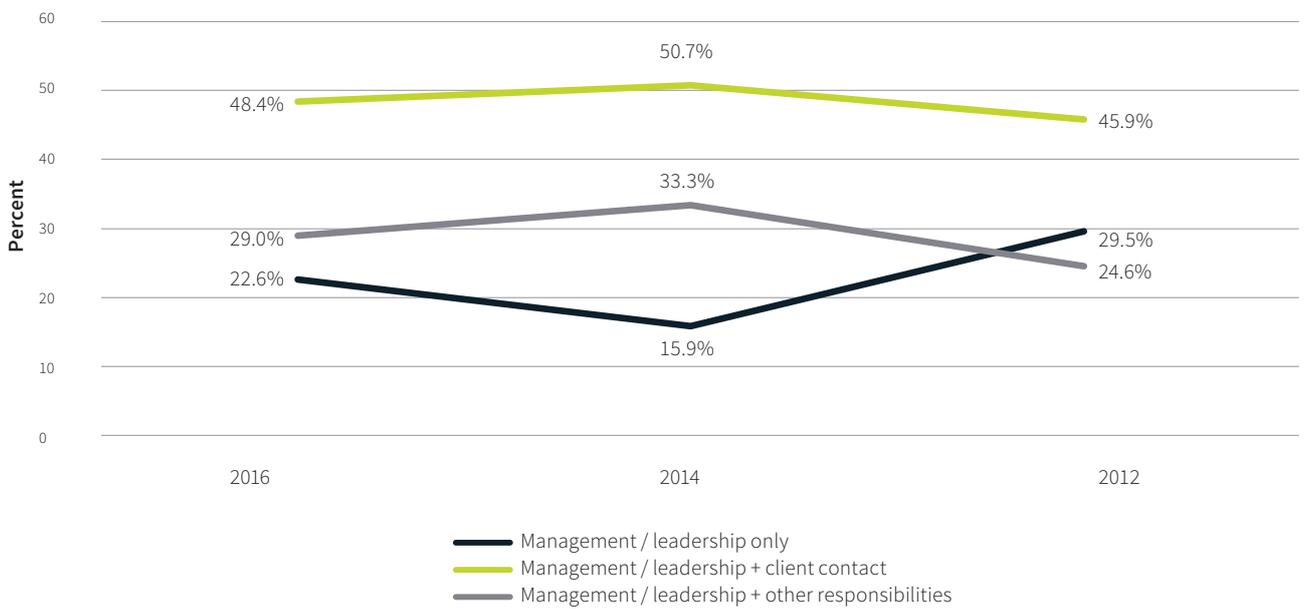


Figure note: Data was filtered to managers only (2016 – 31 responses, 2014 – 69 responses, 2012 – 61 responses)



Professional Development and Training

Current practice

- ATOD organisations and staff are committed to professional development and training.
- The majority of individuals had a performance review structure included in their position description.
- In 2016 the main types of staff development systems in place included: clinical supervision, conference leave, study leave, in-house training programs, opportunities to practice new skills and financial assistance for study.
- The vast majority of respondents (97%) were not engaged in ATOD specific study in 2016.
- 28 percent of survey participants indicated they were members of professional organisation, which most commonly included the Australian Association of Social Workers and Australian Health Practitioner Regulation Agency.

Figure 5: Staff development systems 2012, 2014 and 2016.

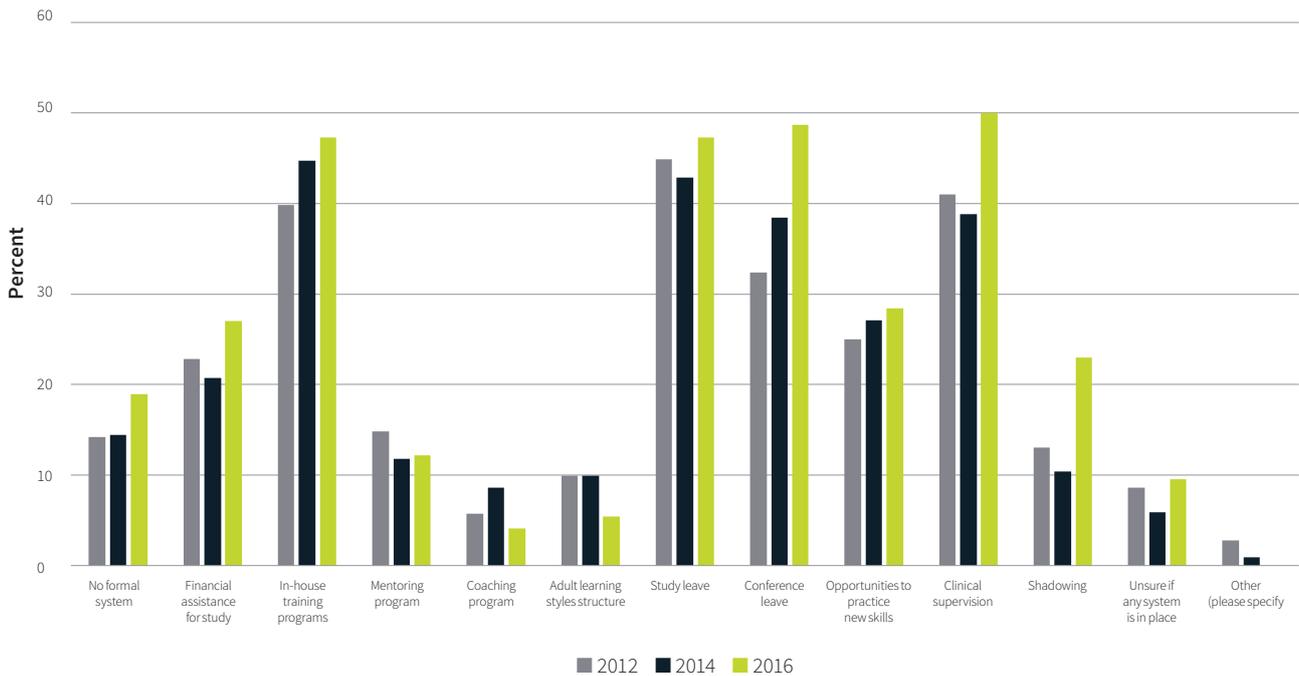


Figure note: Data in the figure is reported in proportions only. In 2016 there were 74 responses, in 2014 there were 186 responses, in 2012 there were 157 responses.

- Around 80 percent of organisations had formal workplace systems in place to enhance the effectiveness of the transfer of learning to the workplace. The types of training transfer strategies in place included:
 - Team/peer partnerships (67%);
 - Monitoring of new work practices (40%);
 - Opportunities to practice new skills (40%);
 - Supervisor support to implement training (40%); and
 - Professional development plans (40%).
- Financial implications were the most common barriers respondents mentioned to accessing professional development and training. These barriers consisted of: the cost of participation (66%), the cost of travel and accommodation (42%), a lack of learning and development budget and/or funding insufficient to cover costs associated with staff learning and development (28%) and difficulty of releasing staff to participate in learning and development (26%).

Clinical supervision

Of the respondents that identified that clinical supervision was relevant to their role:

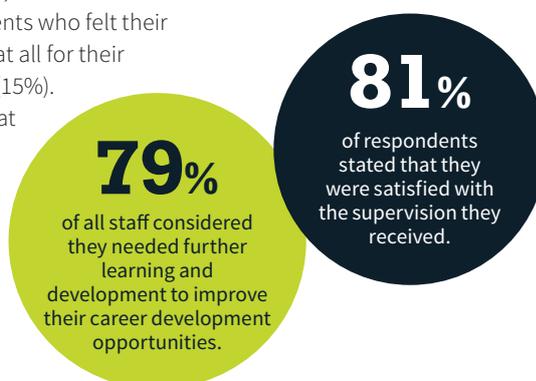
- Around two thirds (67%) of respondents indicated their organisation or program area had a policy that required relevant staff to access clinical supervision – this is up from 44% in 2014.
- Over three quarters (78%) had clinical supervision provided by their own organisation.
- Two thirds (54%) had clinical supervision provided at least monthly.
- The majority (81%) stated that they were satisfied with the supervision they received.

Attitudes to learning

- Access to further learning and development was important to the vast majority (92%) of staff.
- 71 percent felt that their ATOD qualification prepared them well for their current role in 2016. However, there has been an increase in the proportion of respondents who felt their ATOD qualification did not prepare them at all for their current role between 2014 (4%) and 2016 (15%).
- Two thirds (66%) of all staff considered that they needed further learning and development to perform their current duties.
- The majority (79%) of all staff considered they needed further learning and development to improve their career development opportunities.
- 66 percent of all survey respondents stated that it was important to them that the training that they undertook was a nationally recognised qualification (for example a degree or diploma).

Training priorities and interests identified by all survey respondents (in order of priority)

- Building and formalising partnerships
- Consumer participation
- Working with clients with coexisting mental health and ATOD issues
- Managing change
- Measuring outcomes
- Applying research and evidence to practice
- Working with clients with challenging behaviours
- Working with LGBTQI clients
- Leadership skills and knowledge
- Managing staff performance
- Human resource management



Recruitment and Retention

Fixed term contracts and uncertainty

- There has been an upward trend among those employed in permanent, full-time positions between 2010 (20%) and 2016 (29%).
- There has been a small decrease in the number of respondents employed in fixed term positions between 2014 and 2016.

Turnover

- ATOD vacancies averaged 3 per organisation over the previous 12 months in 2016. This was up from 1.4 in 2014. The majority of vacancies were filled within three months.
- Among the barriers to staff recruitment, increases were noted for:
 - Applicants did not have sufficient experience (50%) in 2016 compared to 2014 (11%);
 - Lack of qualified applicants (44%), up from 5 percent in 2014;
 - Insufficient funding to provide attractive salary packages (38%), up from 26 percent in 2014.
- 69 percent of organisations did not consider ATOD staff turnover to be problematic.



Table 2. Employment Status 2010 – 2016

What is your current employment status?

Answer Options (%)	2016		2014		2012		2010	
	Full time	Part time	Full time	Part time	Full time	Part time	Full time	Part time
Fixed Term	29.4	11.8	33.0	13.6	33.0	18.0	20.0	12.0
Permanent	31.4	23.5	29.8	19.4	26.0	20.0	46.0	17.0
Casual/Temporary	2.0	2.0	0.5	3.1	2.0	1.0	2.0	5.0
Volunteer	0.0	0.0	0.0	0.5	0.0	0.0		
Answered question	51		191		174		138	



Figure 6: Factors that attracted individuals to ATOD work in 2014 and 2016.

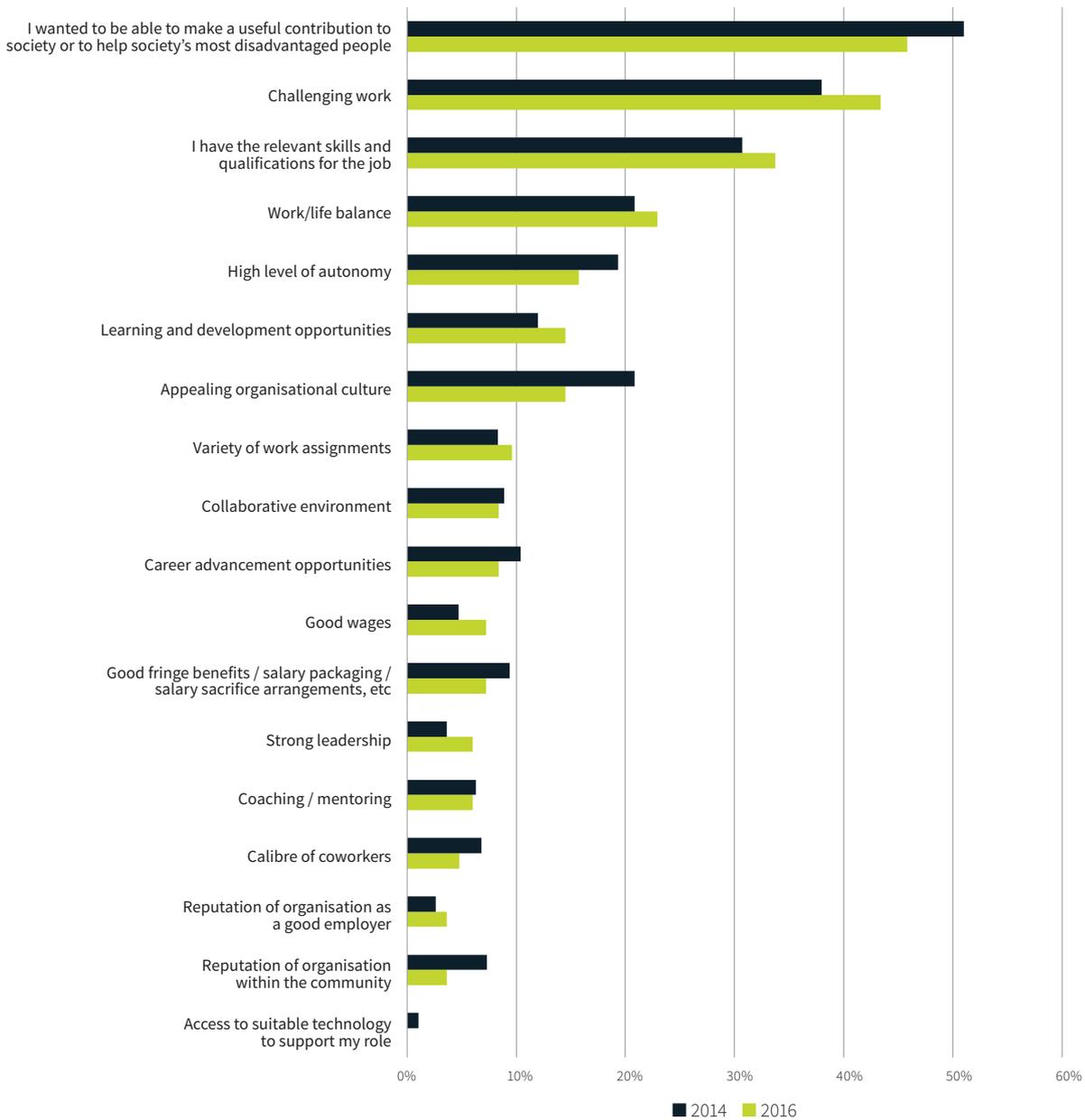


Figure note: In 2014 (n=192), and 2016 (n=83) - this was asked of all who completed the individual survey.

- Fewer respondents were attracted to the sector by ‘a wish to make a useful contribution to society or to help society’s most disadvantaged people’ in 2016 (46%) compared to 2014 (51%).
- Increases were noted among those who were attracted to ATOD sector because it was ‘challenging work’ (43%) and they ‘had the relevant skills and qualifications’ (34%) in 2016.
- The top three reasons that individuals are attracted to their work remained stable between 2014 and 2016.

Reasons to stay

- Just under half (48%) of all respondents identified enjoyment of their job as a reason to stay.
- A belief that the clients are at the centre of the service (33%), that their work gives them the chance to make a useful contribution to society (30%) and a belief in the work of the community sector (29%), were the other main factors that were most likely to influence staff retention.

Figure 7: Factors affecting the decision to stay with current employer in 2016

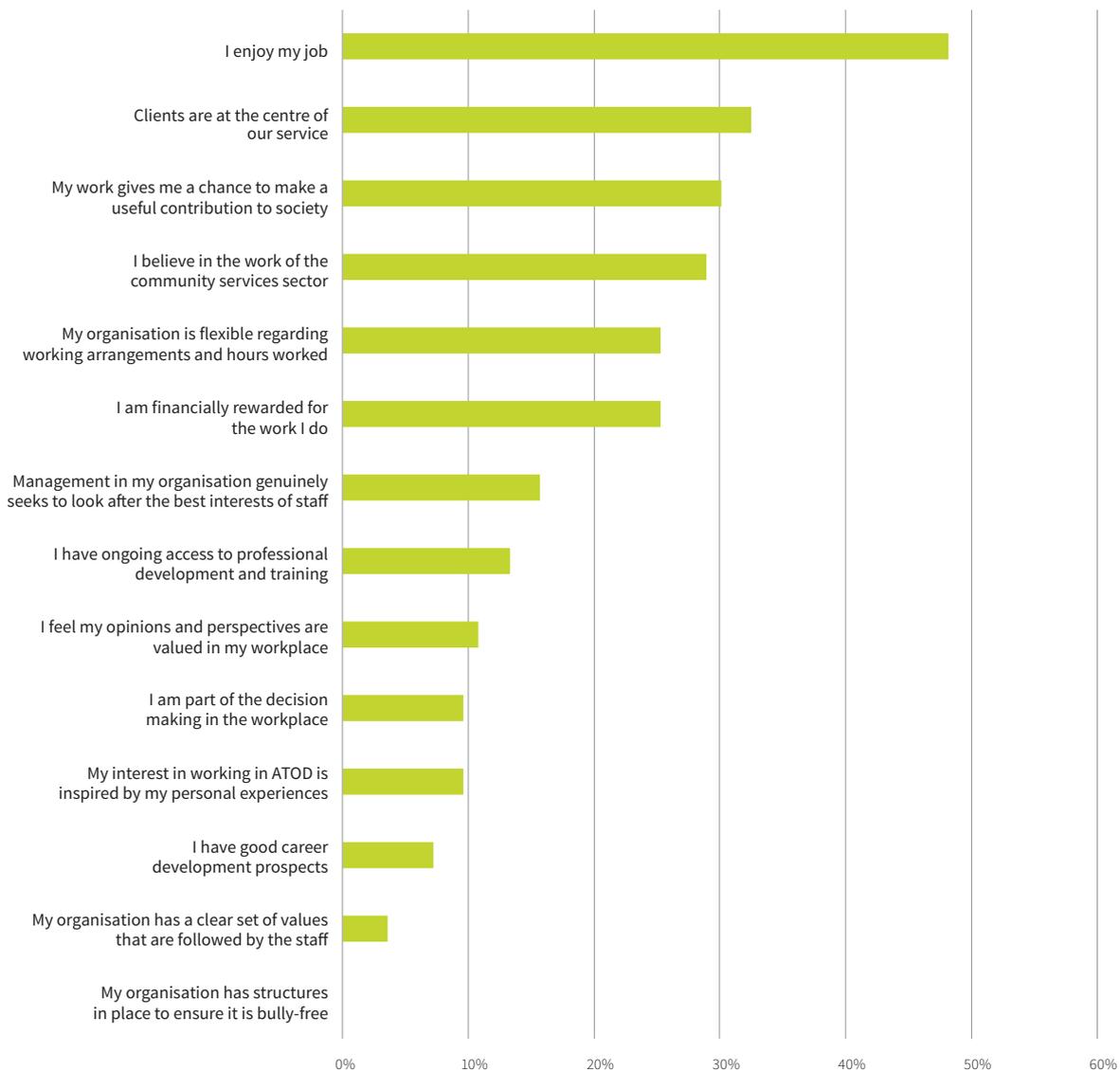


Figure note: all survey respondents were able to answer this question (52 responses)

Reasons to leave

- A quarter (25%) of individuals would leave their job in order to expand their skills and experience in other areas and a lack of organisational support (24%).
- Around a fifth (22%) cited being able to be paid more elsewhere as a reason to leave, with just under a fifth identifying a discontent with the way change is managed in the workplace (19%) as a reason to leave.

Figure 8: Factors that could affect the decision to leave a current job in 2016.

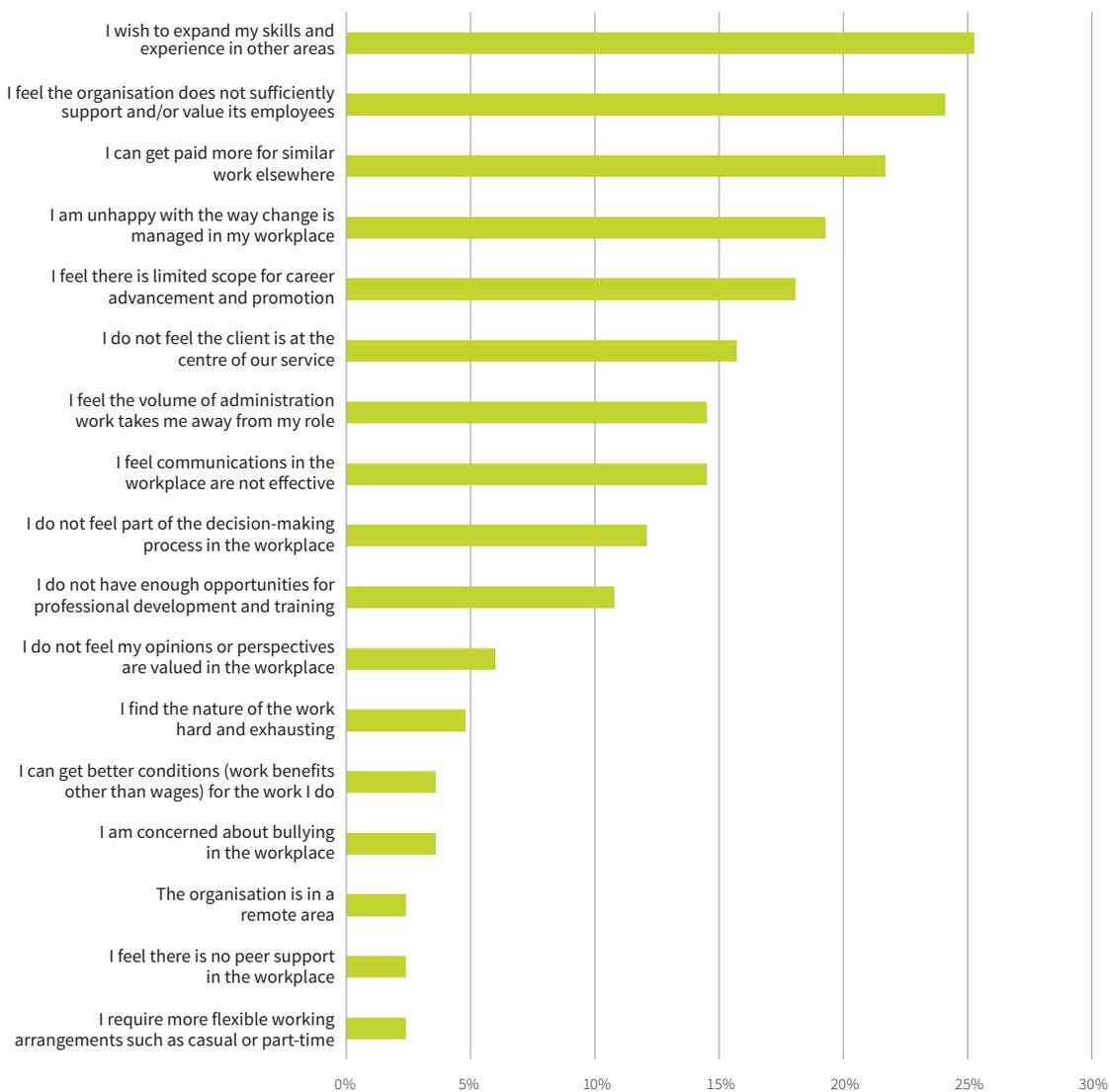


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