



**HACSU**

Health & Community  
Services Union

# Report on Safety in Disability

September 2021

## Introduction

The Health and Community Services Union (HACSU) is the Victoria No. 2 Branch of the Health Services Union (HSU). HACSU is one of the fastest growing HSU Branches in Australia, with over 10,000 members working in mental health, disability, and drug and alcohol services across Victoria.

For over a century, HACSU has represented workers who make a real difference to lives of people living with mental illness, disability, and drug and alcohol addiction. HACSU members are employed in a range of occupations including nurses, health professionals, disability and human service workers, program and support workers, trades and administration.

HACSU's longstanding position is that quality public services for Victorians depend on a quality workforce. This means a workforce that is recognised for its skills, commitment and passion in making sure the most vulnerable and disadvantaged Victorians can live better lives and become active citizens.

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**Paul Healey, State Secretary, Health and Community Services Union**

## Background

HACSU is one of the fastest growing trade unions in Australia, representing over 6,500 disability workers.

The safety of the disability sector has always been one of HACSU's highest priorities as a union – we want to see the highest safety standards for persons with disabilities, safe homes, safe worksites, and a safe and supported workforce.

The onset of COVID-19 in early 2020 presented some grave challenges to the safety of Victoria's disability sector. We relied on our thousands of members to report critical safety concerns to us, which we in turn used to inform our advocacy and lobbying to government.

In the early weeks of the pandemic, HACSU called thousands of our members. Their concerns- including around access to PPE, infection control processes- were immediately and directly relayed to government; often on a daily basis. We are confident that our members' reports and feedback played a critical role in keeping COVID infections at a lower level than in other vulnerable settings (including, most devastatingly, aged care settings).

In September 2020, over 900 of our disability members took part in a detailed safety audit of the sector- details of which were shared with all branches of government, NDS, our members, and specific businesses and employers.

Throughout 2021, we've continued to survey our members on a range of critical safety issues. Between May 20<sup>th</sup>-June 14<sup>th</sup>, 1279 HACSU disability members completed our second major safety audit. In April, June and August of 2021, over 1000 HACSU members responded to specific surveys in relation to COVID-19 vaccinations.

## Survey Results Major Themes

### 1.) Staffing shortages

It is evident that there are endemic staffing shortages across the sector, with more than **87% of our members reporting current or recent staffing shortages**. This is an unsustainable situation, that can only be remedied through a unified industry stakeholders approach.

This finding is supported by research conducted in 2020<sup>1</sup> that found insecure work, low pay and lack of training was a factor in attracting and retaining disability workers.

There are current initiatives and reviews occurring to address workforce issues<sup>2</sup>, however there may be a period of time before any impact of these strategies provides workforce needs, without addressing the key issues of security, pay, supervision and training.

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<sup>1</sup> Working in new disability markets: A survey of Australia's Disability Workforce (Cortis and Van Toorn, 2020)

<sup>2</sup> National Disability Insurance Scheme (NDIS) inquiry into the NDIS Workforce  
Department of Families, Fairness and Housing (DFFH) Work that matters media strategy  
Department of Jobs, Precincts and Regions (DJPR) Skills in Employment Project (SKiP) led by Future Social Service Institute

## 2.) COVID 19 Vaccine attitudes and access

The disability sector remains extremely vulnerable to an outbreak of the Delta variant of COVID-19 until the federal supply of vaccinations dramatically increases over the coming months.

HACSU survey results about vaccination conducted in April, June and August 2021 found the following:

	April 2021	June 2021	August 2021
Total Respondents	1084	1004	983
1 <sup>st</sup> dose	10.61%	65%	19%
2 <sup>nd</sup> dose		12%	58%
Booked in	N/A	N/A	2.5%
		<b>Total</b>	<b>79.5%</b>

Of those not vaccinated or booked in:

		April 2021	June 2021	August 2021
Plan to get vaccinated	Respondent %	74%	65%	14%
	<b>Total %</b>	<b>65.4%</b>	<b>36.8%</b>	<b>3%</b>
Do not plan to get vaccinated	Respondent %	26%	35%	86%
	<b>Total %</b>	<b>23%</b>	<b>19.4%</b>	<b>17.5%</b>

Of those not planning to be vaccinated: Reason provided:

REASON		April 2021	June 2021	August 2021
Safety concerns	Respondent %	76%	75.6%	65.5%
	<b>Total %</b>	<b>17.4%</b>	<b>14.5%</b>	<b>11.4%</b>
Opposed to vaccination	Respondent %	11.7%	13%	10%
	<b>Total %</b>	<b>2.6%</b>	<b>2.5%</b>	<b>1.7%</b>
Will not be vaccinated if mandated	Respondent %	N/A	N/A	87.8%
	<b>Total %</b>			<b>15.3%</b>

### Key findings:

By August, almost 80% of respondents had a vaccine or were booked in.

Between April and June 2021, a notional increase of 9% of respondents did not plan to get vaccinated, however this was reduced to 8% below initial rates by August.

Hesitancy due to safety of vaccines remained constant from April to June, however decreased in August by about 10%.

Designated COVID vaccine hubs, and the dedicated vaccine blitz for disability workers held in early June had a positive impact with 22% of respondents receiving a vaccine as part of the 'blitz'.

In the August survey conducted, a question about mandating was included – with just over **15%** of total respondents saying they would still not be vaccinated even if mandated (88% of those not planning to be vaccinated)

Vaccinations of Pfizer was 57% and AstraZenica was 43%

### 3.) Disciplinary processes, WorkCover, and the mental health impacts

Almost 10% of respondents have been absent or stood down from work due to a workplace allegations or investigation in the last 12 months. This is an abnormally high number and is a recent phenomenon. It is unsustainable, completely at odds with other industries, often appears unjustified, and is having a truly devastating impact on the mental health and wellbeing of the disability workforce.

**Discipline** – 119 Respondents (9.3%) had been stood down and of those:

Length of time stood down:

46.02% less than 3 months

25.66% between 3 and 6 months;

21.24% between 6 and 12 months,

7.96% more than 12 months

This is alarming and not only a major contributor to mental health issues, but financially irresponsible and damaging to the workforce.

Effect on Mental Health (Of 115 respondents)

.9 % reported no effect (1)

5.2 % reported a mild effect (6)

25.2 % a moderate effect (29)

68.7 % reported a severe impact (79)

***That is 94% of respondents who had significant mental health effects (moderate to severe).***

#### **Workcover**

11.61% of 1266 Respondents had been absent from work on Workcover and of those:

#### **Absence**

54.07% less than 3 months

13.33% between 3 and 6 months;

17.78% between 6 and 12 months,

15.56% more than 12 months

Effect on Mental Health Total Respondents:

8.4% reported no effect

15.27% reported a mild effect

35.88% reported a moderate effect

43.51% a reported a severe impact

This equates to almost **80% of respondents who had significant mental health effects** whilst on Workcover (moderate to severe).

#### Access to services/Treatment

- 95.42% sought services and treatment from a GP
- 24.43% accessed Employee Assistance Program (EAP)
- 66.41% sought emotional support from a family member or friend
- 61.83% accessed prescription medication
- 29.01 % attended a hospital including emergency departments
- .76% sought no support or treatment (1 person)

#### Return to Work

Less than half of employers assisted workers to return to work through a formalised Return to Work plan.

- 49.61% Return to Work Plan
- 20.93% reported they were not adequately supported to return to work
- 13.95% did not return to work

#### Supports

HACSU members away from work for discipline and Workcover reported the following about what would have supported them more:

- 38.28% Provision of information
- 58.59% Regular communication
- 24.22% Dealing with discipline matter faster

This supports the view that having access to information, good communication and expeditious processes supports employees to return to work and maintain good mental health.

## **4.) Health and Safety**

#### Designated Work Groups (DWG)

Almost 70% of workplaces reported not having a DWG.

Only 30.55% of respondents reported that they had a DWG in their workplace.

42.34% of 1162 respondents were uncertain if they had a DWG at their workplace, and 28.14% responding that they did not.

#### Health and Safety Representatives (HSR)

Almost 50% of respondents reported that they were did not have a HSR or were unsure if they did in their workplace.

- 50.99% Yes
- 31.02% No
- 18.68% Uncertain

Of those **only 57.56% knew what a HSR does**, with 30.08% saying they knew somewhat what they did, however only 36.74% report occupational health and safety issues to their HSR, with the majority reporting only to their Manager 56.28%.

Only 50.39% of respondents have the HSR details displayed in their workplace.

#### Response to OH&S issues

When asked how well employers responded to OH&S concerns that have been raised, **more than 60% or 1145 respondents reported that the response was inadequate.**

- 19.74% Very well
- 39.13% Well
- 25.33% Poorly
- 10.83% Very Poorly
- 6.81% Not at all

72.83% of 1152 respondents reported being comfortable with reporting issues as they arose, and for those who didn't, analysis of barriers of the 283 comments could be categorized as follows:

- 47% No response, lack of action, not worth it as nothing changes
- 14.5% Impact on job security
- 13.4% Feel unsupported and unvalued
- 9.9% Concerned about being seen as being difficult/ troublemaker

There was however, a high level of clarity on COVID 19 reporting processes with almost 90% of respondents saying they were clear on how to report COVID 19 concerns

These results indicate that there is a lot of work to be done in education about health and safety, attraction and support of health and safety representatives and systems relating to employee supports, particularly in relation to the resolution of issues, that impact on future reporting.

## **5.) Occupational Violence and bullying**

### Occupational Violence:

More than half of respondents have experienced occupational violence in the last 12 months.

Of those:

- 53.09% have experienced physical violence,
- 66.94% have experienced psychological harm,
- 20.52% have experienced discrimination, and
- 6.68% have experienced gender based violence.

Of those respondents who have experienced occupational violence in the last 12 months, the majority have experienced it multiple times.

Only 11.752% report an isolated incident

51.88% report between 2-10 incidents

5% of respondents report experiencing occupational violence multiple times *per day*.

Most incidents of occupational violence resulted in injury or illness (57%), with 76% reporting a psychological injury, and 31% reporting a physical injury.

As a result of occupational violence, 45% of those impacted sought medical help from a GP, and over 20% required prescription medication. However only 7.57% made a Workcover Claim.

#### Bullying:

In the last 12 months more than 40% of 1127 respondents had been bullied at work, with the majority being reported from a co-worker or Manager.

18.38% client or consumer

11.31% A family member, friend of carer of a client or consumer

56.97% A co-worker

54.14% A manager

9.49% Other

## Summary and Recommendations:

These survey results provide clear evidence that there is a lot more to be done to keep Disability workers safe from Occupational Violence and bullying, and better supported through issues of injury and disciplinary processes.

HACSU have always, and will continue to work collaboratively with government agencies, WorkSafe, NDS, and disability providers to address these issues and ensure that disability workers health and safety is always considered a priority.

### Key Recommendations:

1. Extend and continue to support funding toward Workforce strategy initiatives to ensure a sustainable and valued workforce
2. Continue to lobby for greater Workforce standards that ensure secure, safe, supported and adequately paid workforce
3. Development and maintenance of a coordinated University, TAFE, and Senior High School links programs aimed at increasing the recruitment of suitable candidates to the sector
4. Government agencies to develop a stronger Vaccine hesitancy strategy that includes paid time for workers to access vaccination forums, develop and dissemination of educational materials targeted to disability workers, and leave provisions to increase vaccination rates and attitude.
5. Best practice for discipline matters to be reviewed and adopted from the HACSU Discipline and the effects on Mental Health in the Disability Sector Paper <sup>3</sup>
6. Mandatory Occupational Health and Safety Training for all Managers in disability services to be funded and reported

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<sup>3</sup> HACSU paper on Discipline and the effects on Mental Health in the Disability Sector September 2021



7. All staff to be provided with specific training related to the specific needs of people they support including Inclusive Communication and Behavior Training (ICAB) or other equivalent behaviour management training to address the incidents of Occupational Assault
8. Funding by government agencies to conduct a major Review of occupational violence in the disability sector that identifies incidence, cause and impacts, and develops an industry wide occupational violence strategy.