

HEALTH WORKERS' UNION AGED CARE SURVEY

FINAL REPORT

July 2019



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Authorised by Diana Asmar, Secretary

HEALTH WORKERS' UNION

AGED CARE SURVEY 2019



1,600+
RESPONSES

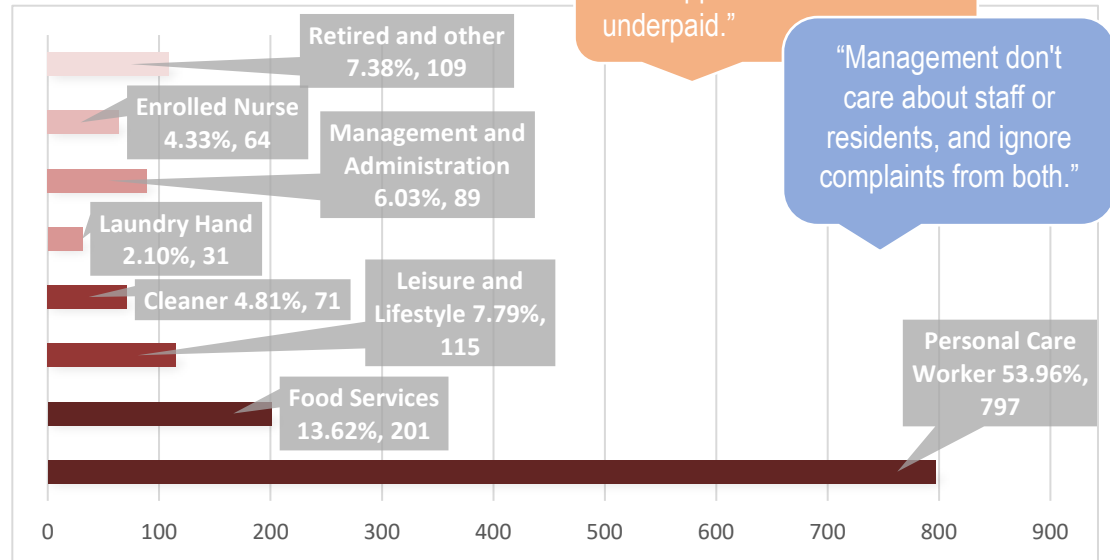


58% OF AGED CARE WORKERS HAVE BEEN ASSAULTED AT WORK

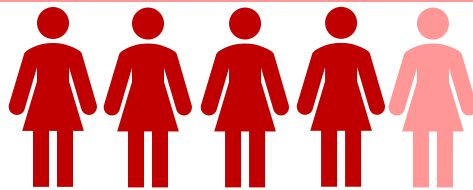


78% OF AGED CARE WORKERS FEEL EXPLOITED

We heard from...



68% of aged care workers said staffing levels and workloads have gotten worse in the last year



4 in 5 aged care workers

are concerned about staffing levels and workloads in aged care facilities



Almost half of participants have sustained an injury at work. More than 7% sustained more than 5 injuries

75% of aged care workers do not believe there are enough **carers**, in their workplace to provide adequate care to residents

WE NEED MORE CARERS, FUNDING AND RESPECT

Join the Health Workers' Union by calling 03 9341 3300



INTRODUCTION

Community concern has been mounting regarding the experiences of those living and working in residential aged care facilities around the country. In September 2018, the ABC's *Four Corners* program delivered a two-part special uncovering some of the worst of our residential care system. The program highlighted accounts of overworked staff, neglected residents, overuse of chemical and physical restraints and a system unable to provide care and dignity to many elderly Australians.

Following the release of the *Four Corners* program, on 16 September 2018, the Commonwealth Government responded by establishing the Royal Commission into Aged Care Quality and Safety (**the Royal Commission**). Tasked with immediately investigating the institutional and systemic issues plaguing our aged care industry, the Royal Commission was instructed to better understand the full extent of the crisis.

This announcement was warmly welcomed by the Health Workers' Union (**HWU**), who for decades has been lobbying for structural reform in the aged care and community services industry. In particular, our member's have been agitating for change in staffing ratios to ensure there are enough carers to provide safe and dignified care for residents.

In response to these events, the HWU initiated a state-wide survey of workers in the residential aged care sector. The purpose of this survey was to better understand the systemic challenges affecting our workers in aged care across the public, private and not-for-profit sectors. We wanted to understand how workers in a variety of positions have been impacted in the last 6 months to 2 years, across five key areas. The presentation of data which follows, explores these themes, including:

1. Staffing levels and workload;
2. Quality of care;
3. Conditions of work and work health and safety;
4. Skills and training; and
5. The perception of those working in the aged care industry.

The survey was conducted online between 29 March to 3 May 2019. Individuals who were working and no-longer working in the aged care industry were invited to participate in the survey. In total, 1,645 workers responded to the survey. To ensure a genuine representation of views across the sector, the survey was open to non-union members as well as union members.

Many of the survey results presented are simply alarming. They show a system in crisis and a workforce under immense pressure.

SURVEY RESPONSES

In March 2019, the HWU conducted a survey of respondents in the aged care and community services industries. A total of 1,645 workers participated in the online survey which sought to better understand the working conditions of respondents in aged care.

The survey, which operated between 29 March and 3 May 2019, collected information from:

- Personal Care Workers and Enrolled Nurses;
- Cooks, Chefs and Food Service Assistants;
- Leisure and Lifestyle;
- Cleaners and Laundry Hands; and
- Administration and Management.

There was no requirement that participants had to be a member of the HWU in order to complete the survey. There was also no requirement that they be currently working in the aged care industry. Participants were able to complete the survey if they were retired or had previously worked in aged care.

The survey included 28 common questions. We provided participants with two opportunities to answer open ended questions regarding the facilities they worked in.

The HWU collected a small amount of demographic data from each respondent. Figures 1 and 2 provide details of each participants age by group and gender. As shown in Figure 2, 86.68% (1,425) of respondents were female, and respondents between the ages of 45 and 64 were highest represented in the cohort (69.53%, or 1,142).

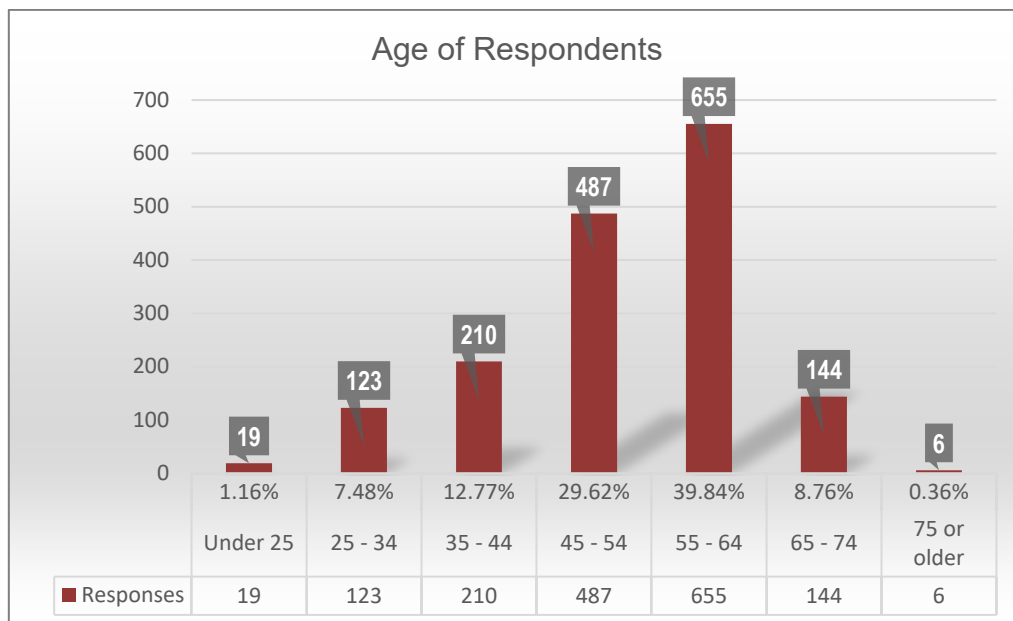


Figure 1: Participants working in aged care by age group

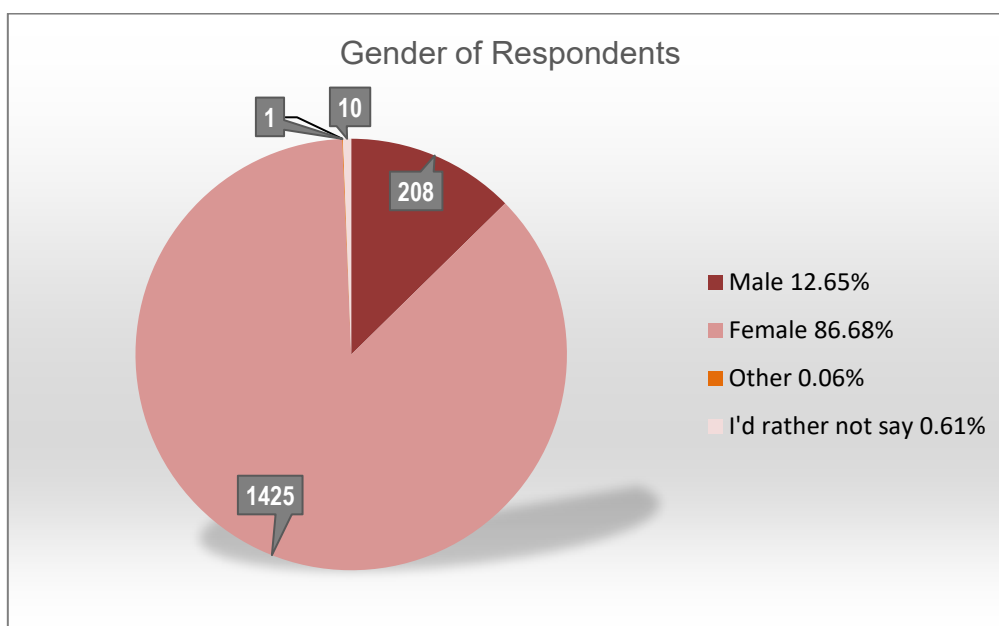


Figure 2: Participants working in aged care by gender

Participants were asked to identify their relationship with aged care: how long they had been working in the industry, what their role is, whether they were still working in the industry and what sector of the industry they work in (public, private or not-for-profit). As shown in Figure 3, 82.06% (1,349) of respondents identified they were still currently working in aged care and/or community services. The bulk of respondents reported they were employed as Personal Care Workers.

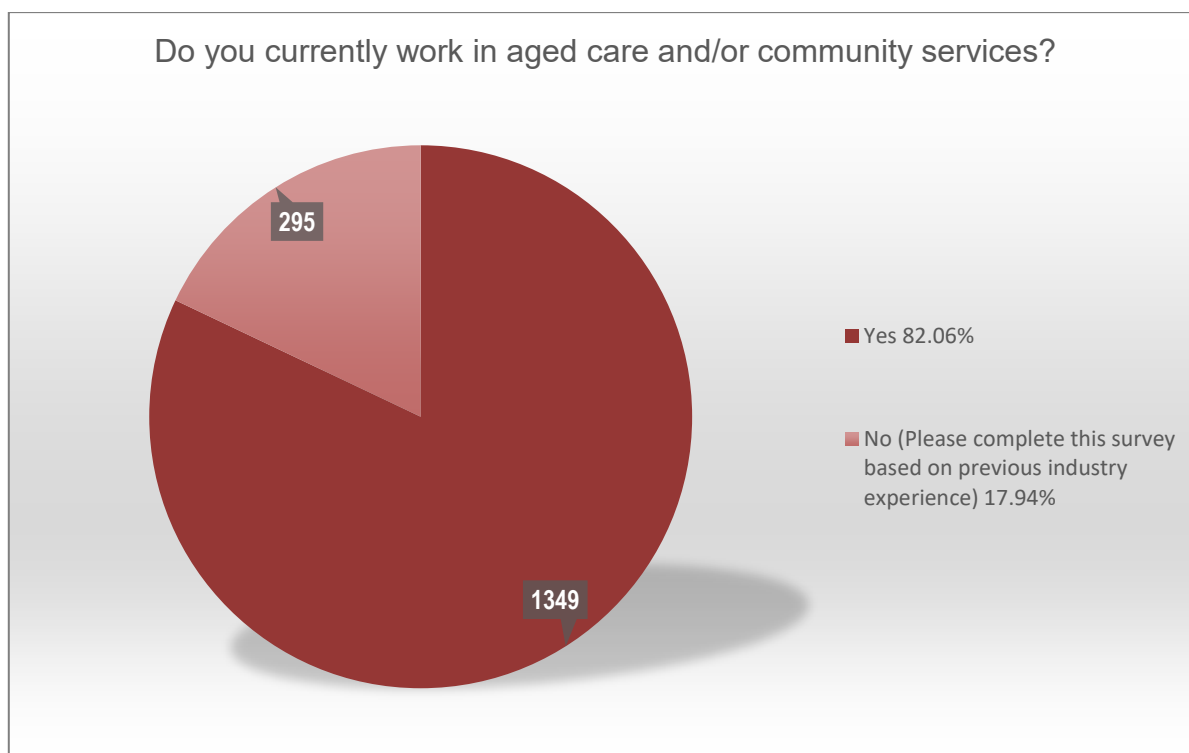


Figure 3: Participation based on previous experience or current employment

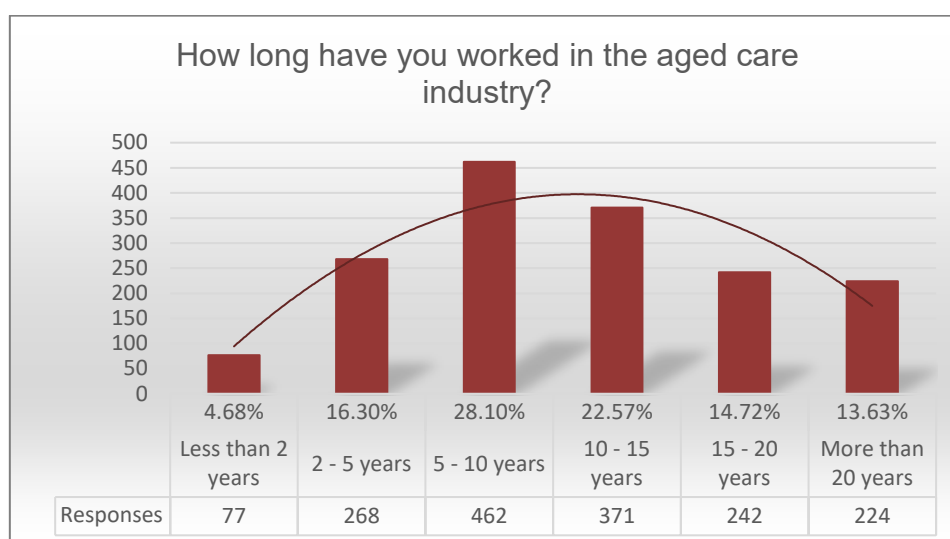


Figure 4: Period participants have spent working in the industry

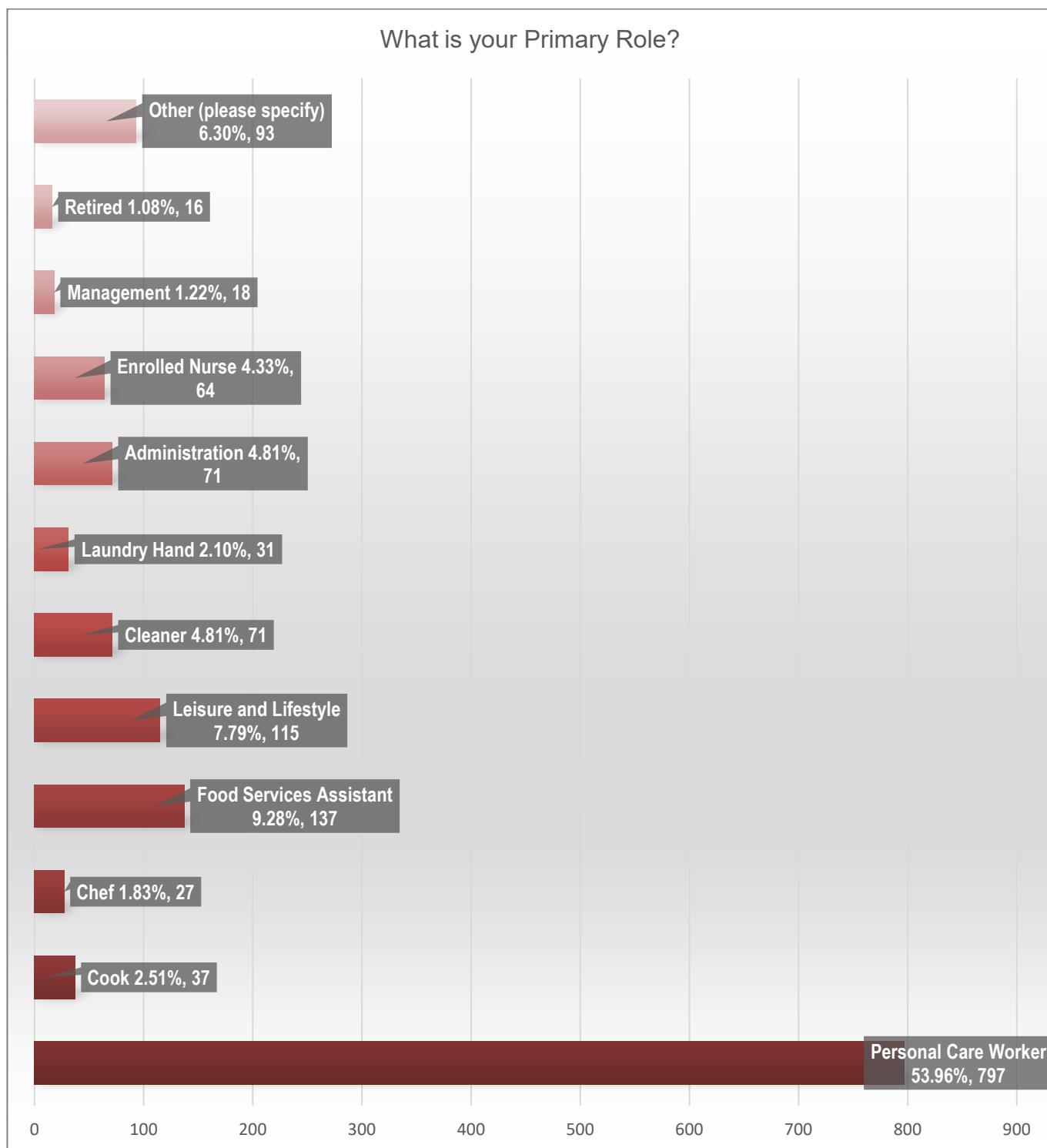


Figure 5: Primary role held by participants

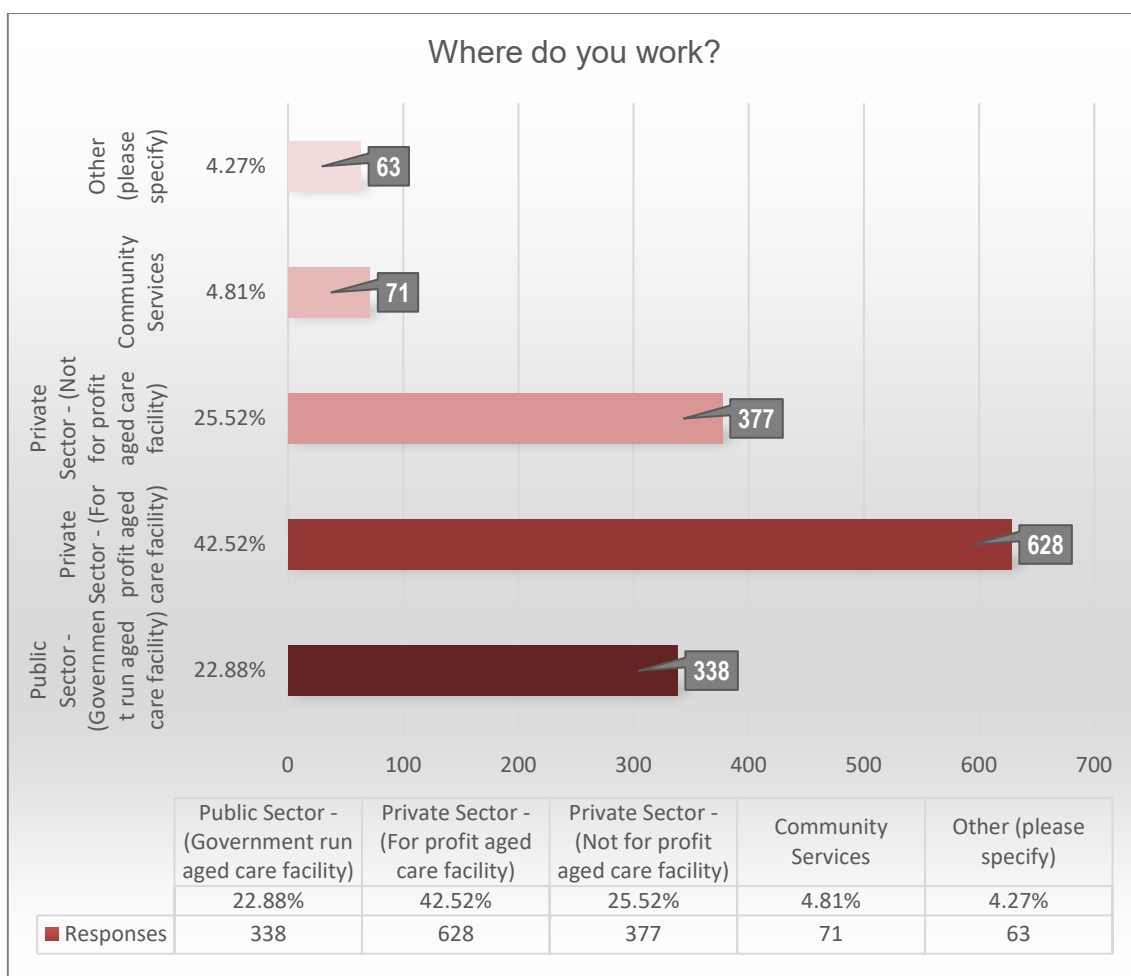


Figure 6: Participants working in aged care by sector

We asked participants to consider their employment relationship and security of employment. Participants were asked how many jobs they currently worked in aged care; if more than one, why. We also asked participants how they were engaged. As shown in Figure 7, the majority of respondents (72.78%, 1,075) were engaged in part-time employment. Of those who reported to working multiple positions (21.35%, 351), 39.46% responded they did so to 'make ends meet' and would 'prefer to work one job.'

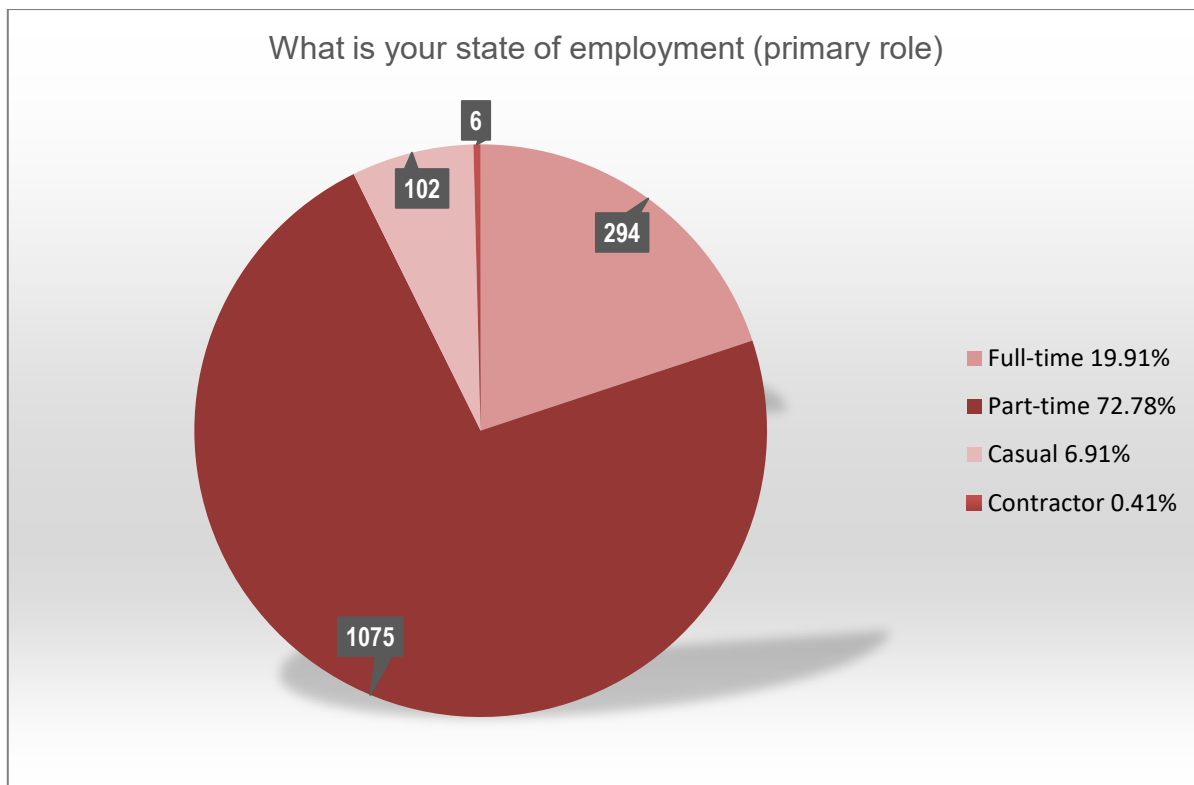


Figure 7: Employment status of participants

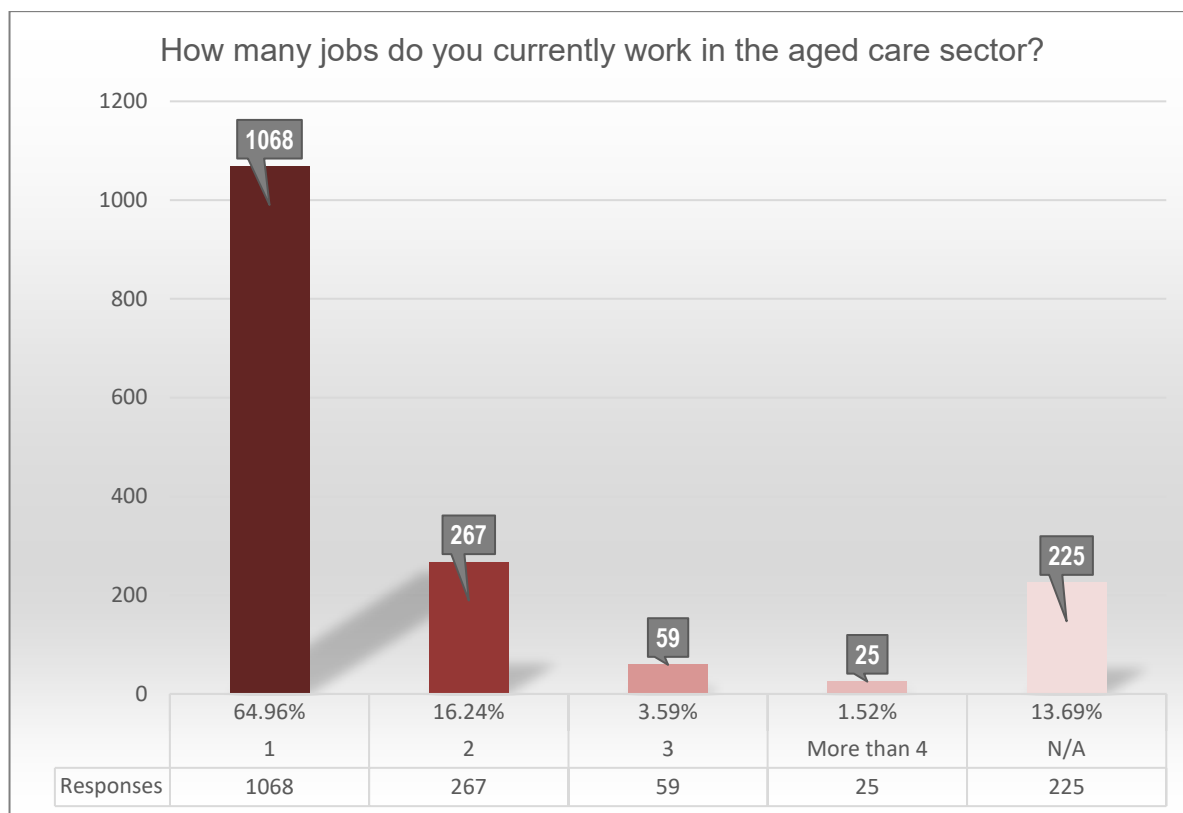


Figure 8: Number of jobs participants currently work

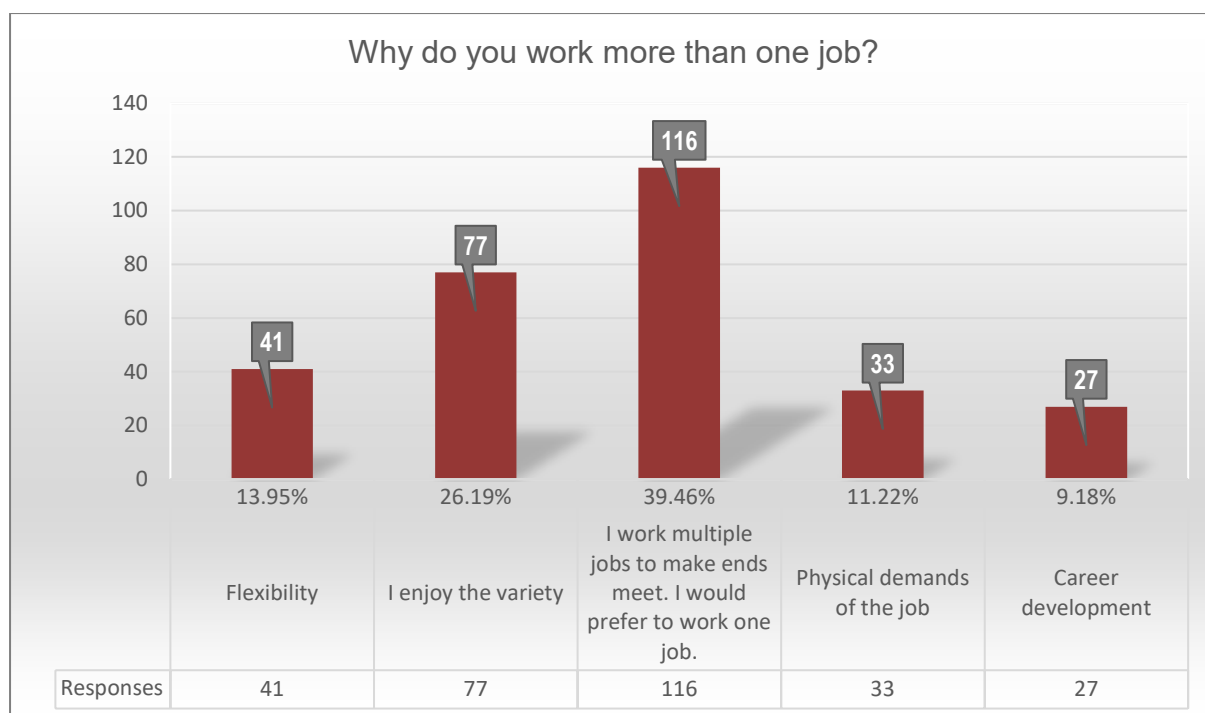


Figure 9: Reasons why respondents work more than one job

STAFFING LEVELS AND WORKLOAD

Participants were asked three questions specifically related to staffing, workload and the care they were able to provide residents:

1. Whether they were concerned about the staffing levels and workload in the workplace;
2. Whether they believed staffing levels had changed in the last 12 to 18 months; and
3. How they felt about the quality of care they were able to provide residents.

The response from respondents was overwhelmingly negative.

Alarming, 81.99% of respondents working in aged care indicated that they were concerned about the staffing levels and workload in their workplace. When asked to reflect upon the trend in staffing and workload in their workplace, 67.66% of respondents considered that issues had worsened or worsened significantly in the last 12 to 18 months. These significant concerns correlated strongly with participants responses to the level of care they felt they were unable to provide (see below in Figure 14).

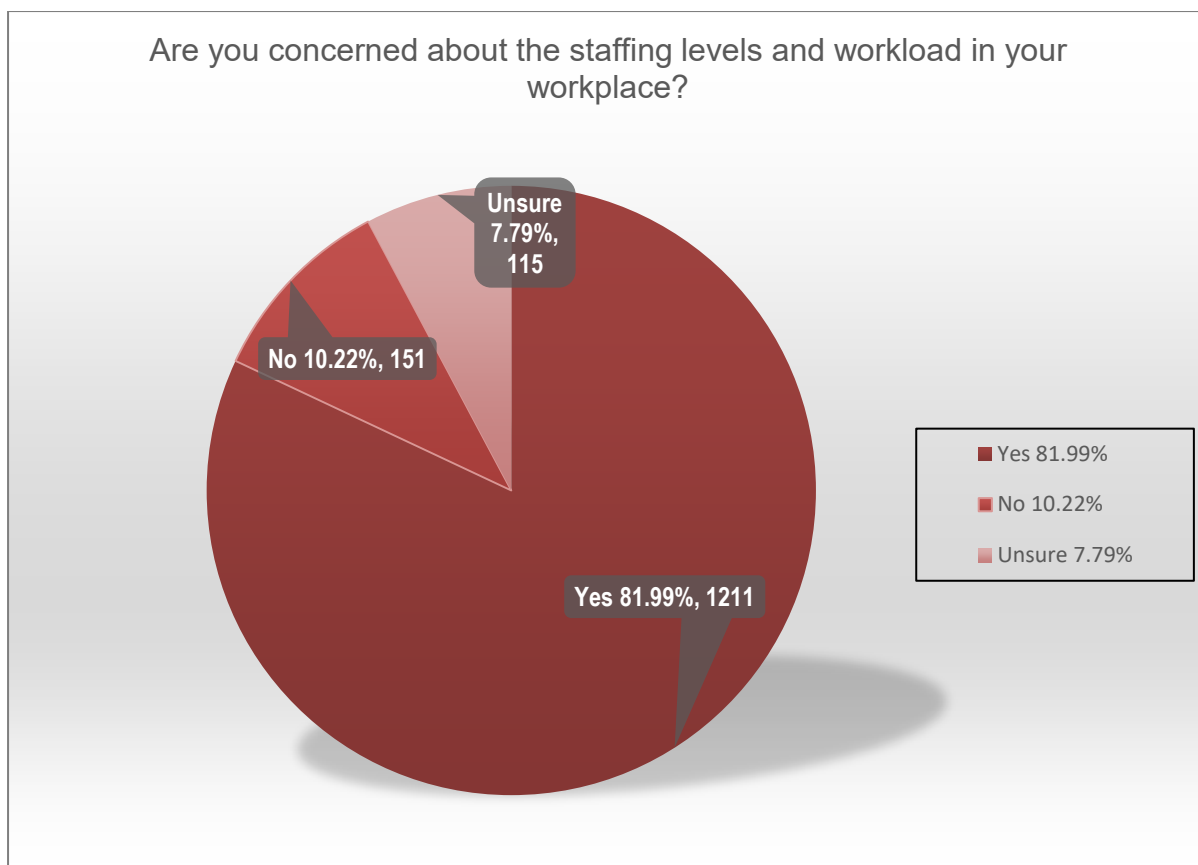


Figure 10: Concerns about staffing levels and workload

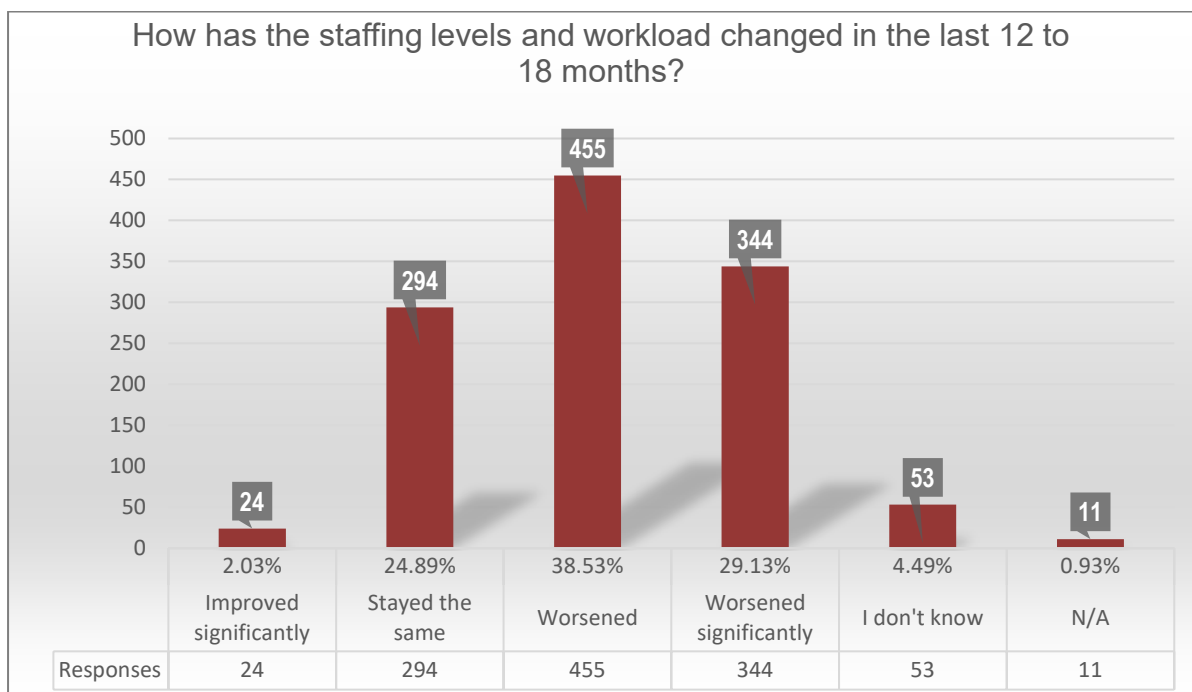


Figure 11: Staffing levels and workload changes over the past 12-18 months

QUALITY OF CARE

Participants were asked to consider the quality of care residents and clients in aged care are currently receiving, based on their experiences working in the industry.

Workers expressed high levels of concern that there were insufficient numbers of carers in their workplace to provide appropriate care to their residents. As little as 10% of respondents considered they had enough carers in their facility to provide adequate care to their residents. These results are particularly alarming for residents and families. When asked whether their facility invests adequately in leisure and lifestyle for their residents, almost half of all respondents answered no.

Finally, workers were asked to reflect upon their perception of the level of care and service they were able to provide their residents on a daily basis. Figure 14 reveals that more than 36% of participants reported they did not have enough time to see to their resident's basic care or emotional needs, with only 7% of workers able to see to residents physical and emotional needs. These results should be particularly concerning for everyone involved in the provision of residential aged care in this state.



Figure 12: Whether respondents consider there are adequate carers in aged care

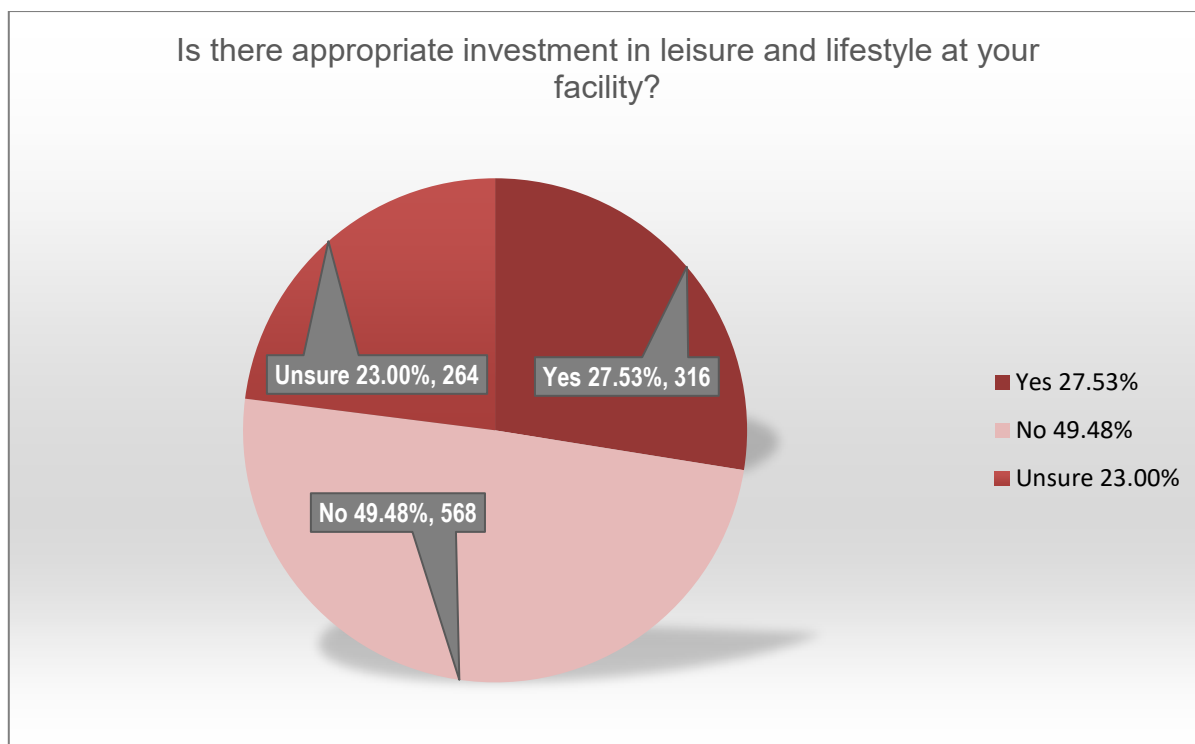


Figure 13: Consideration of investment in Leisure and Lifestyle workers in aged care facilities

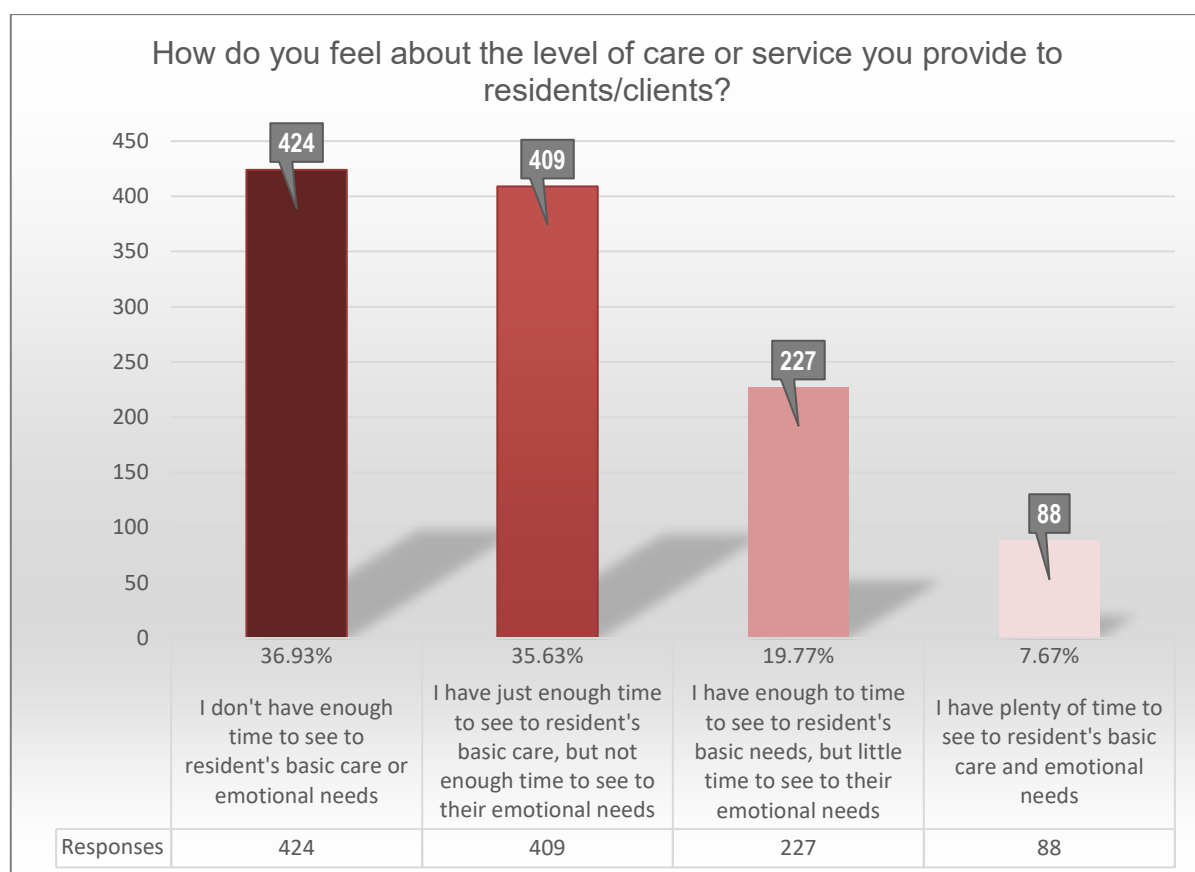


Figure 14: Respondents feelings concerning the level of care or service they can provide residents

CONDITIONS OF WORK

Workers were asked how much unpaid overtime they worked each week averaged over the last 6 to 12 months. In all, 70.59% (1,014) of respondents reported performing unpaid overtime each week, with 26.86% of workers performing 1 to 2 hours of unpaid overtime each week. Keeping in mind the participants represent some of the lowest paid workers in our community, it is of particular concern to the authors of this report that 26.1% of workers responded having worked on average more than 3 hours of unpaid overtime each week, in the last 6 to 12 months.

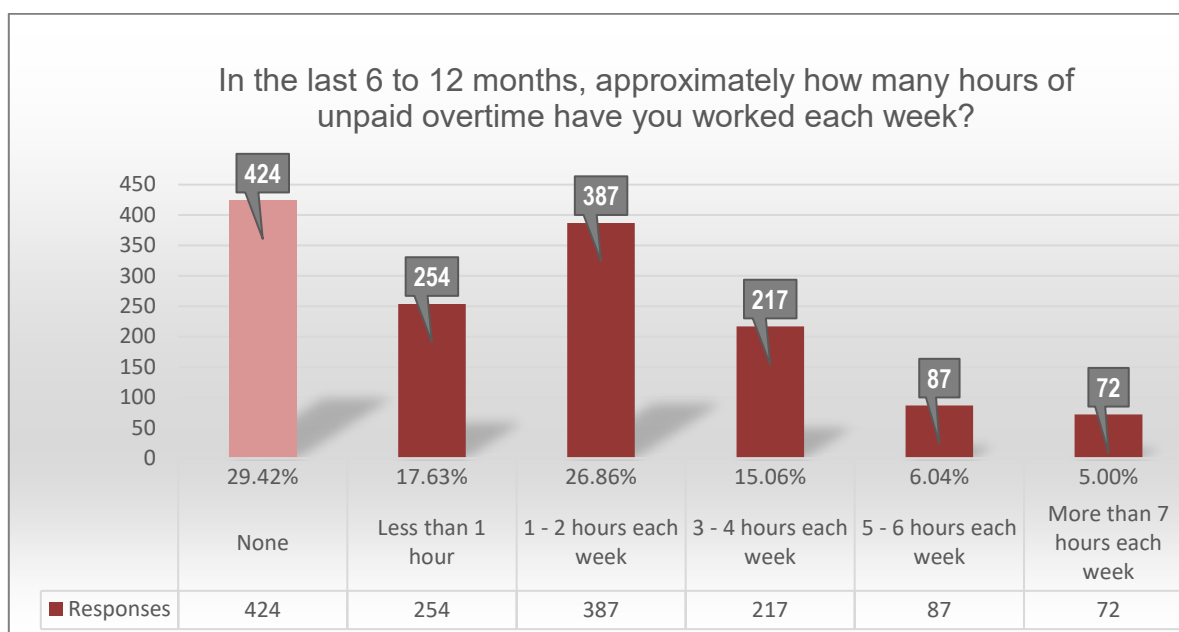


Figure 15: Amount of unpaid overtime worked by aged care workers

Those respondents who identified that they regularly worked unpaid overtime in the last 6 to 12 months, were then asked to reflect upon why that was so. In response, 620 workers reported that they performed unpaid overtime to support resident's basic and emotional needs, such as showering/toileting/dressing/feeding, or talking to residents/making tea/keeping them company. They were not paid for performing these core functions. Significantly, 431 workers performed unpaid overtime to complete paperwork and administration, which included handover not allocated time during their shift.

Workers were asked to reflect upon a variety of situations and to consider whether they had experienced those situations (see Figure 17 below).

Consistent with anecdotal evidence reported by Union members and Union staff, the results are alarming. In the last 6 months, 309 workers reported having been required to work with residents with mental health concerns, without the appropriate training or experience required to support those residents. More than 260 workers reported working in a facility which kept continence aids locked in a cupboard, only accessible by management. Alarming, 199 aged care workers reported having to work with insufficient lifting aids available, and 177 were rostered to work a shift with a ratio of 1 to 30 residents (or more), both scenarios putting residents and workers in immediate physical danger.

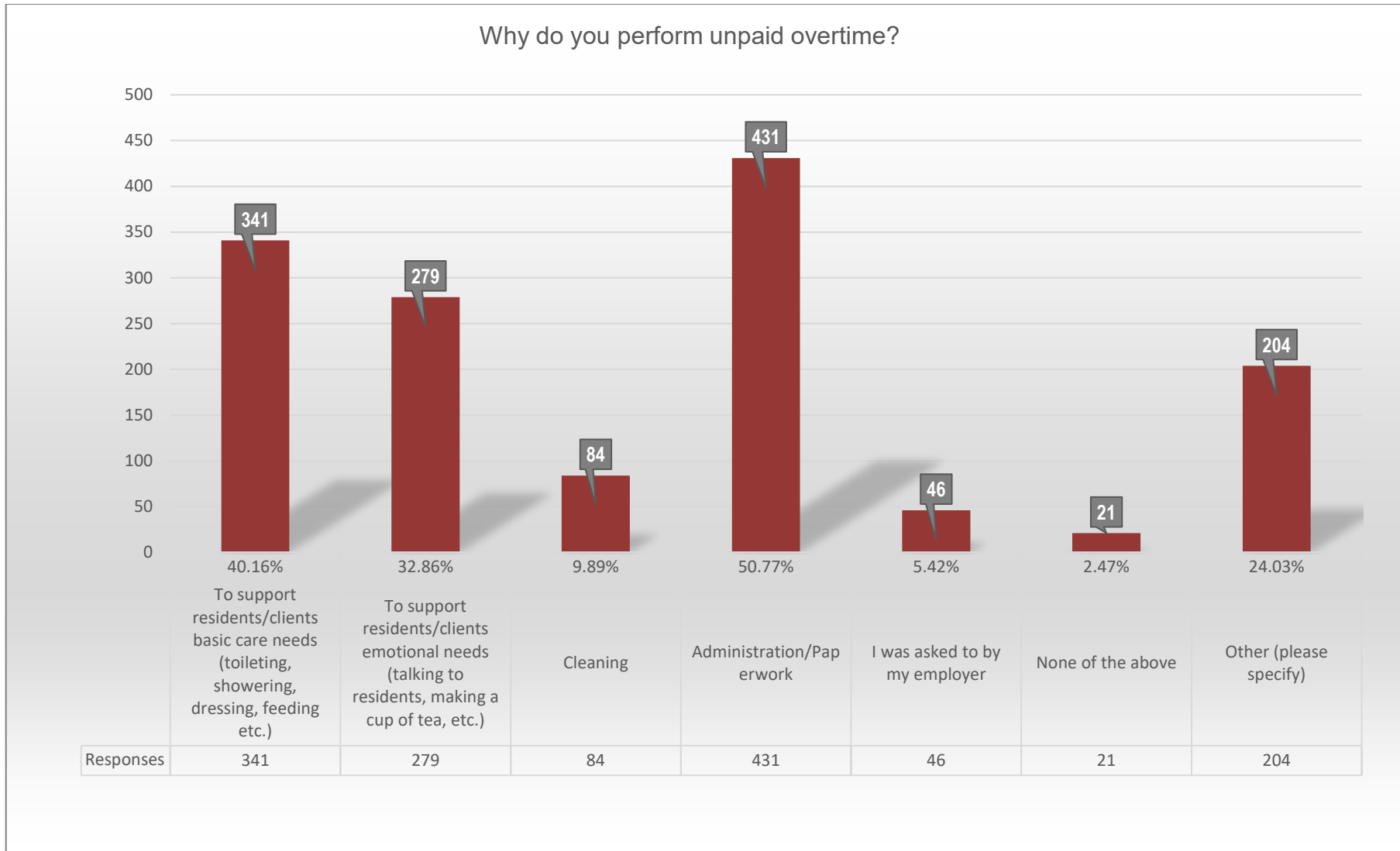


Figure 16: Reasons why unpaid overtime was worked. Note: Respondents could choose up to 2 options.

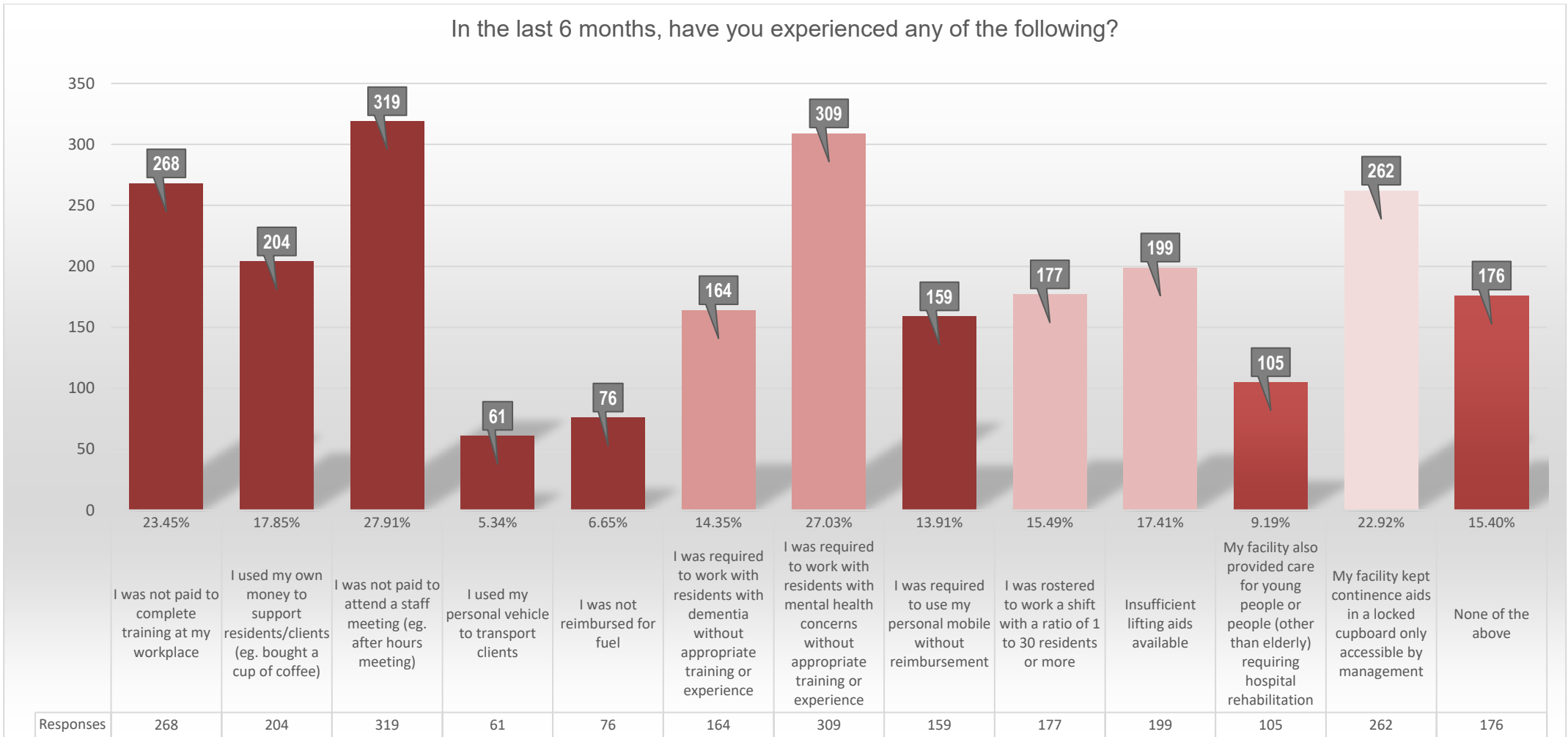


Figure 17: Common experiences of aged care workers. Note: respondents could choose any number of events

WORK HEALTH AND SAFETY

Workers were asked directly if they had been assaulted at work by a resident in the last two years. Figure 18 reveals that more than half of those who participated in the survey reported having been assaulted by a resident in the last 2 years. Only 41% of respondents reported having not been assaulted in the last two years. Alarming, 9.06% of all respondents reported having been assaulted 5 to 9 times, and 14.46% more than 10 times in the last 2 years.

Workers were asked to consider how many times they have been injured at work, whilst supporting a resident/client. Workplace injuries were reported by 46.95% of respondents, with the majority (39.55%) of workers reporting 1 to 4 events.

In addition to the responses outlined in Figures 18 and 19, respondents were asked whether their workplace took work health and safety seriously. Only 38% of respondents answered yes, they felt their workplace took health and safety seriously.

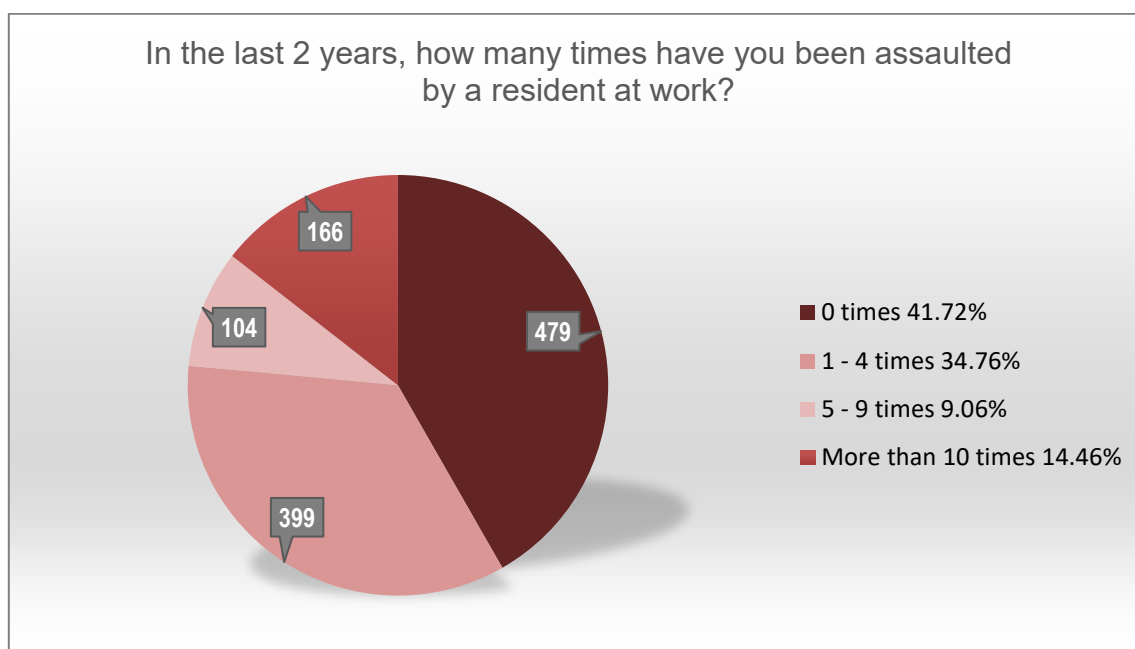


Figure 18: Amount of times aged care workers had been assaulted by a resident while working

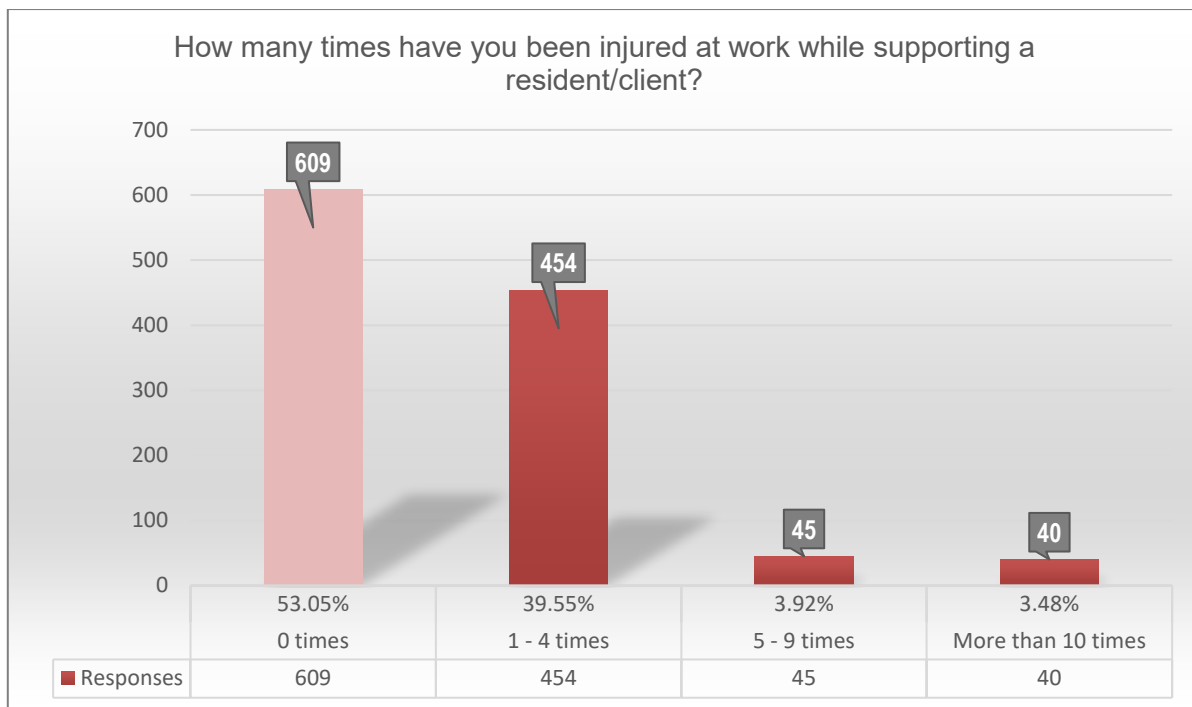


Figure 19: Workplace injuries in aged care

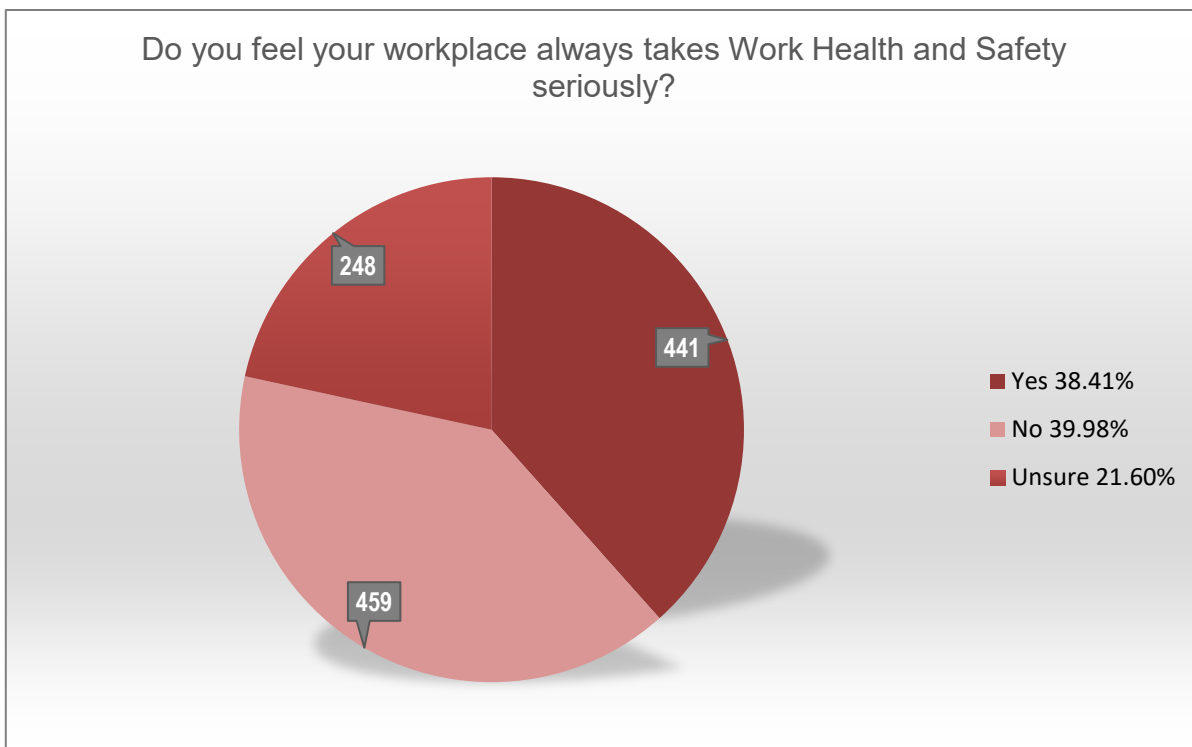


Figure 20: Perception of how seriously workplaces take Workplace Health and Safety

In addition to the responses outlined in Figure 19, participants were offered the opportunity to provide further information regarding the types of injuries they sustained in the workplace. In total, 373 responded providing information concerning the injuries they sustained.

SKILLS AND TRAINING

Workers were asked to consider their skills and training before entering aged care, and the level of investment their employer made in learning and development in their careers whilst in employment. While just under 75% of workers considered they had the necessary skills and training needed to perform their role when they first started, only 33% of respondents considered their workplaces invested in supporting their careers. Further, only 35% of respondents agreed they were provided enough paid time to complete training in the workplace.

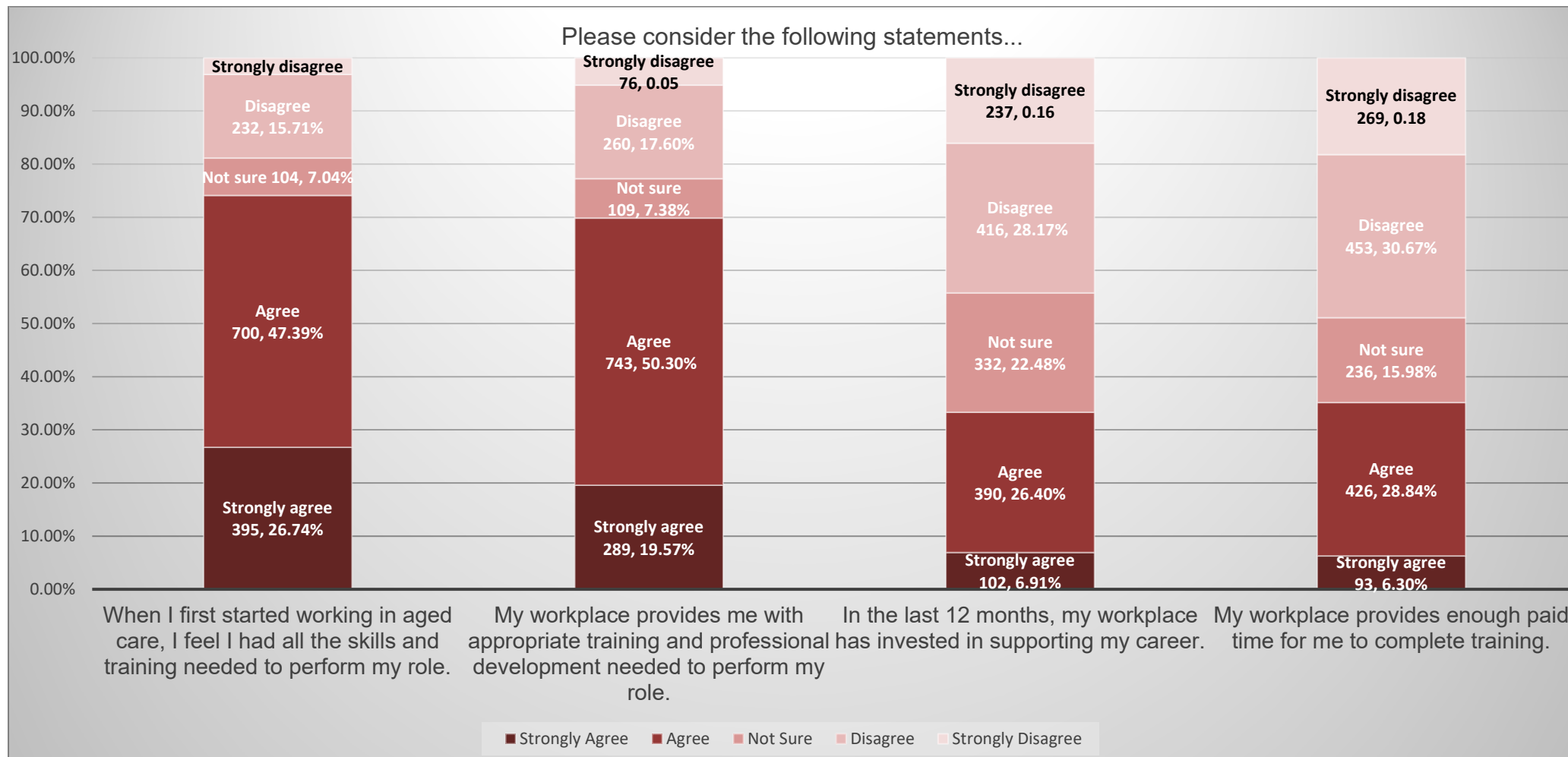


Figure 21: Level of investment in skills and training in aged care

SKILLS REQUIRED TO MANAGE

Participants were provided the opportunity to reflect upon their management, and whether they considered their individual manager had the necessary skills and training required to manage people in the workplace. Aged care workers were first asked to identify whether they were managed by a Registered Nurse (RN), and then to reflect upon their skills. More than half (57.23%, 657) of all respondents were managed by an RN. Of those who responded, only 39% considered they had the required skills and training needed to manage them in the workplace.

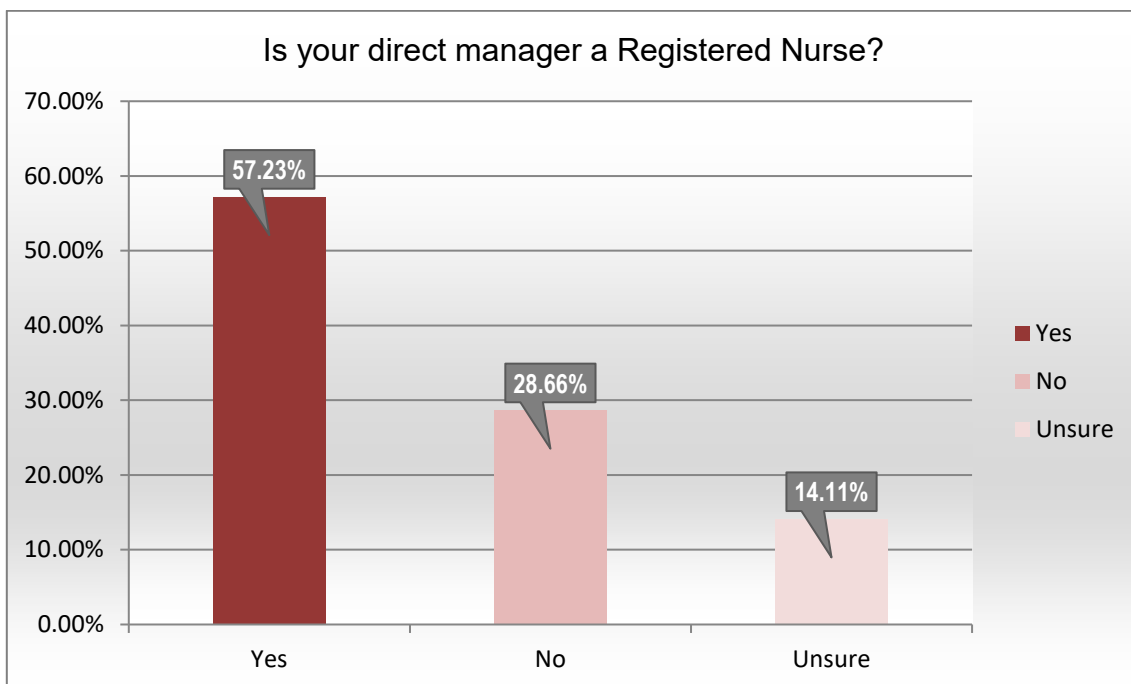


Figure 22: Identifying whether respondents were managed by a Registered Nurse

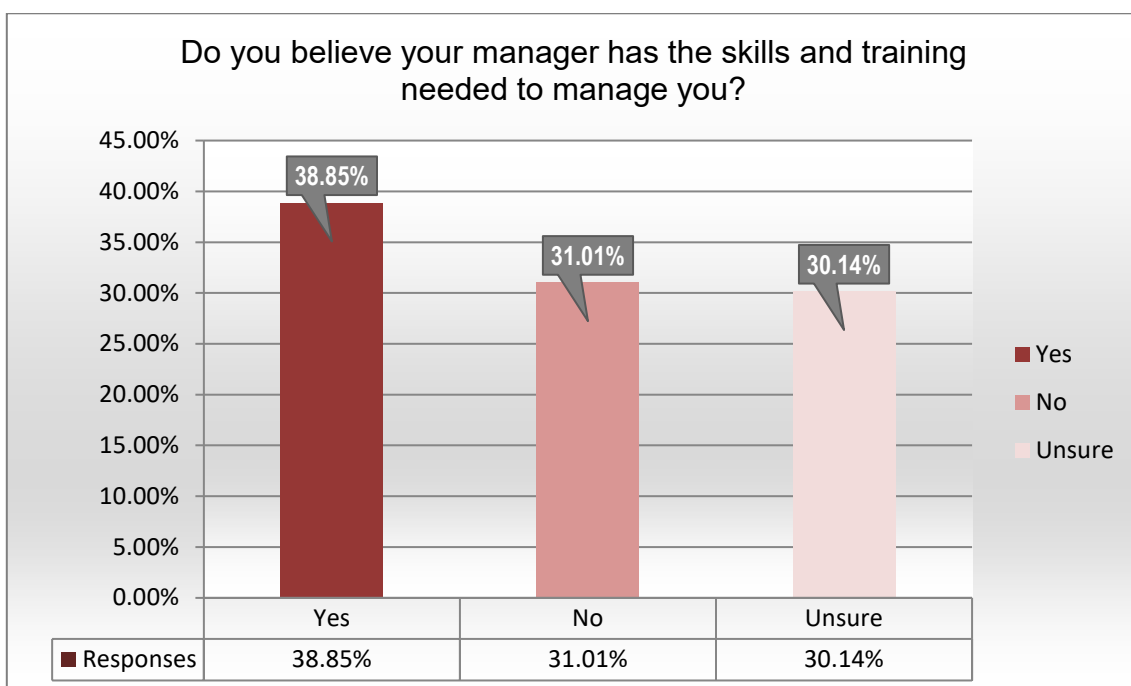


Figure 23: Respondents perception of their managers skills

PERCEPTION OF THOSE WORKING IN AGED CARE

Participants were asked whether they felt their workplace, residents and the broader community respect the work they perform. More than 50% of workers responded they felt their immediate supervisor and boss does not respect the work they perform. Tellingly, more than 60% of respondents felt their employer/workplace did not value their work in aged care. When asked whether residents respect the work they perform, 83% of workers agreed they did.

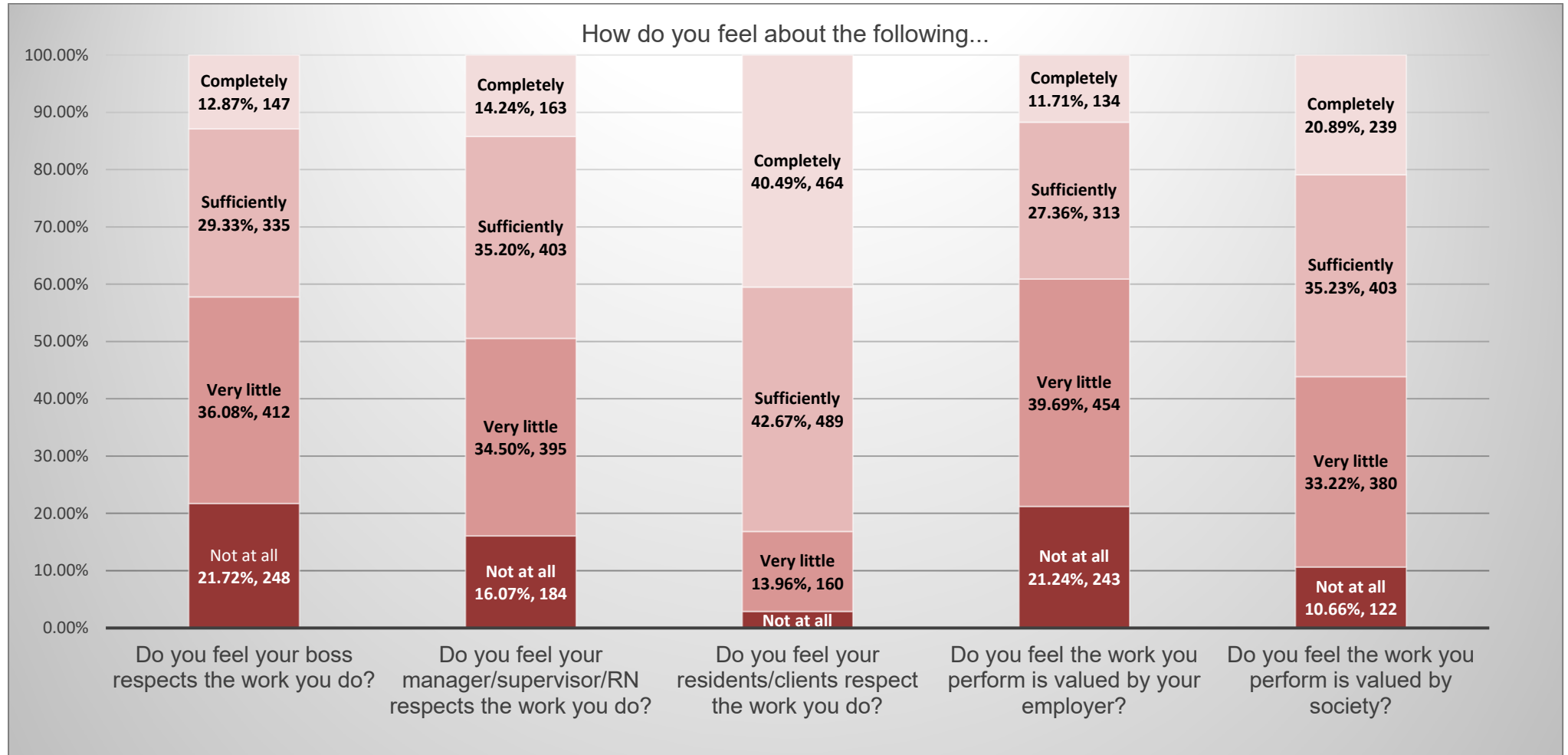


Figure 24: Respondents perception of respect for their work in aged care

Participants were asked to consider whether on balance, they felt exploited in their employment in aged care. Concerningly, more than 77% of workers felt exploited working in the aged care industry. We consider these results correlate with results displayed in Figures 10, 12, 15, 16, 17, 18 and 19 as they relate to understaffing, unpaid overtime, use of personal money in the course of employment, the frequency of assaults and injuries sustained in the workplace and the lack of investment in people's careers and learning and development.

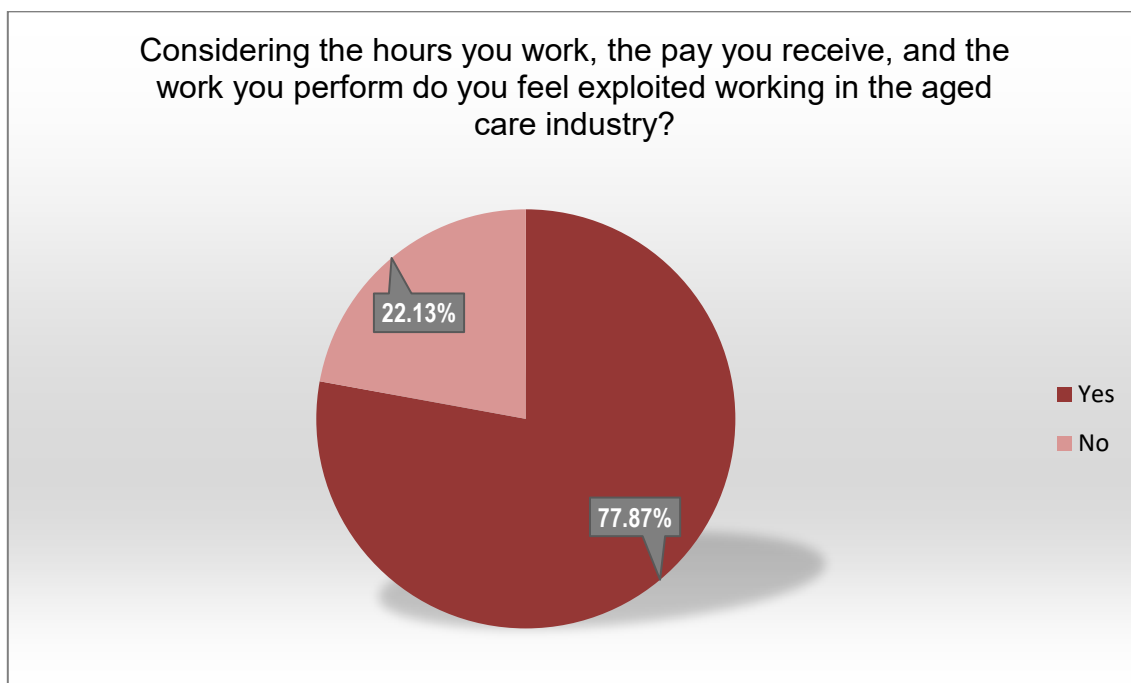


Figure 25: Respondents perception and feelings to worth working in aged care

In addition to the information presented above, workers were provided the opportunity to respond to two final questions. Participants were asked to consider how they thought working and living conditions in aged care facilities could be improved and to describe the facility they work in. A discussion of these responses is presented below.

WE NEED MORE STAFF

The overwhelming theme to emerge from participant's responses was a sense of abject frustration with the current state of affairs in residential aged care facilities. That is, frustration with the lack of physical resources to care for people, frustration with the lack of care staff and frustration with the lack of time to provide personal and emotional care for residents.

Participant's accounts optimistically describe what could happen should more staff be employed, and ratios implemented. Participants described an expectation that with lower ratios of care workers to residents, residents will experience higher quality care and more attention spent on their emotional and lifestyle needs. Similarly, participants expressed a strong message, that should facilities continue to cut staff and shifts, workers cannot be held responsible for the consequences. Workers strongly believe, that in order to improve the living and working conditions in residential aged care, urgent investment needs to be made into more and appropriate staffing in facilities.

'Full of frustrated care workers with not enough time to care for residents.'

'Don't cut hours and then put unrealistic expectations on staff to complete work loads and documentation. It's too stressful and residents sense it. Invest more in activities with experienced accredited recreation staff. Bring back good old-fashioned laughter. Everything these days is so serious and clinical to the point of almost being impersonal.'

'With more staff and better equipment, we would be able to give better services to residents.'

'Living conditions can be improved by raising ratios in aged care. This would also benefit working conditions. More feedback from residents (if able to cognitively answer) on how they would like their environment to be.'

'Better ratios of staff to residents so holistic care can be provided instead of the basics...'

'Let the residents have a choice instead of just being a number. Give staff time to actually do the work they are required to do especially providing emotional support '

Participants expressed concern that the money residents spend in fees and extras, was not adequately being distributed where it's needed most. Participants were particularly pessimistic that facilities had the interests of residents or workers in mind when allocating financial resources. Instead, workers feel they are not adequately compensated for the work they perform, and cynically believe, based on their experiences, that facilities are more interested in turning profits for their investors.

'Million-dollar fees, not being spent on residents!'

'Terrible facility, these residents suffer all day, all they care about is money and not the residents.'

'Facility concerned more with profits, looks instead of needs.'

'Not willing to spend money on staff or resident's needs.'

'Facility looks great, most workers live just above the poverty line.'

Many participants expressed this horrible feeling of being overwhelmed by the working conditions in residential aged care facilities. Participants spoke of the stress, feeling of exhaustion and dread having to operate under these extreme working conditions every day. Participants considered the workload, insufficient staffing levels and duties required of them are contributing to these extreme conditions.

'Every day we have to work with agency or less staff and the stress level and the workloads is just unbearable'

'Stressful. Out of 6 shifts this week I was sweating exhausted and tired.'

'Stressful, not enough time to preform duties required.'

'Full on, you do not stop. Hard to take a break.'

'It used [to] provide good care but now it is just the most horrible and stressful place to work; none of the staff want to be there.'

'Busy, under staffed, stressful; many responsibility's, no support.'

'A place I dread that I once loved where I go to work now.'

'It is a toxic place filled with bullying and harassment.'

Given these conditions, it is not surprising then that many participants described feelings of genuine hopelessness. Participants expressed feelings of low staff morale, concern that management do not care for the welfare of residents and management, and that generally, their place of work is a negative environment to operate within.

*'A place of hell and victimization. You do as the current management tells you or there is the door!
'They say it's the resident's home, but they don't show any compassion.'*

'Management don't care about staff or residents and ignore complaints from both.'

'I used to love my job now I struggle to go to work knowing it's not a pleasant workplace to work.'

'Running on empty, very low staff spirit.'

Through this despair, participants overwhelmingly described a prevailing sense of duty to their residents. Participants have shared their experiences coming together as a team and expending the last of their emotional energy to piece together what they can, of a positive existence for residents in residential aged care. This commitment to duty and service to elderly Australians is a testament to the resilience of our aged care workforce. However, it appears to be running on almost empty.

'Good dedicated staff that try their best.'

'Staff are friendly, supportive and part of a team.'

'I have been there 15 years I work there for the residents.'

'Hard working, demotivated staff who love to look after others.'

Finally, many participants expressed a specific need for ratios of care staff to residents, and increased staffing of lifestyle, cleaners and kitchen staff. With implemented ratios, participants felt they would have more time to dedicate to resident's emotional needs as well as their basic care needs.

'More investment from the Government, a shift in the way society values care work, better staff to patient ratios, more respect for the elderly and greater focus on their individual needs.'

'Ratios in aged care would improve all aspects of aged care for residents.'

'need a ratio of 5 residents to a personal carer. Need 30 residents to a nurse. More hours for cleaning and laundry. More lifestyle team.'

'Staffing & resident ratios needs to be look at. Staff would love to spend a fair bit of time with residents/clients, not in a rush in order to achieve all the task each shift.'

'Higher ratios of care staff to residents, better Lifestyle programmes, more time allocated to cleaning needs.'

CONCLUSION

The findings of the Health Workers' Union Aged Care Survey 2019 confirm the concerns already held by many in our community. Our results reveal an aged care sector characterised by:

- Inadequate staffing levels and genuine workloads concerns;
- Lack of investment in ongoing professional development and necessary skills and training;
- Unacceptable levels of injury and abuse of aged care workers in the course of their employment;
- Employers which do not take health and safety seriously;
- Insufficient investment in leisure and lifestyle and the emotional needs of residents; and concerningly,
- Inadequate resources and time for carers to provide care and dignity to their residents; which leaves
- Our aged care workforce feeling disrespected, used and exploited.

Our aged care workers are abused and injured in the course of their employment at an alarming rate. The regularity of these incidents is just so concerning for the following reasons. First, no worker should ever go to work with an expectation they will be physically or emotionally abused in the course of their employment. Secondly, many aged care facilities appear to show a complete disregard for an individual's right to work in a safe workplace in violation of their responsibilities under existing legislation. One worker explained what it is like working in a dementia unit.

'I remember at the end of one of my shifts, the Nurse Unit Manager asked me 'how was your day.' 'Not good', I responded. I had been assaulted three times on my shift. She laughed. 'It is a dementia unit David. You need to come to work and expect to be hit.'

Anonymous, Enrolled Nurse

Our aged care workers are working in relative isolation, particularly on night shift. If they're experiencing occupational violence with such alarming regularity, the system is broken. Aged care facilities need to respond better to ensure our workforce is working in a safe environment.

Are they doing enough? The results of this survey would suggest not. Only 38% of workers considered their workplace took work health and safety seriously. These results are genuinely concerning given the environment these facilities are placing our workers in.

We consider aged care facilities need to immediately invest in skills development and training for their workforce, in order to ensure the safety of their workers. Our results reveal that 39% of carers were required to work with residents with mental health concerns without the appropriate training. Similarly, 21% of carers were required to work with residents with dementia without the appropriate training. This is unacceptable. It places workers at risk of injury and residents at risk of inadequate care. Aged care providers must immediately be held responsible for the environment they are putting residents and workers in with this cavalier approach to work health and safety.

Finally, 177 workers reported having worked a ratio of more than 1 to 30 residents. This cannot continue to occur. Workers cannot be expected to provide any level of care or service to our elderly Australians, when they are placed in such unacceptable working conditions. A ratio of 1 carer to 30 residents can only be considered unsafe under our existing work health and safety legislation. It places workers and residents at an unacceptable risk.

If we're going to have any impact addressing the issues identified in this survey, we urgently need to:

- Adequately fund aged care;
- Address the insufficient ratios of personal care workers and enrolled nurses in our facilities; and

- Urgently address work health and safety in our aged care facilities, and the appalling rates of worker assaults and occupational violence.

We consider this is in part addressed by ensuring there is a mechanism to ensure funding for staffing levels and providing training and professional development for personal care workers, those directly delivering care to residents. We need those managing facilities to be held accountable for the way they treat their employees. We also consider it is time to reconsider the skills required of those managing care workers.

The results of this survey revealed that our aged care workforce is inadequately resourced to provide adequate care for resident's basic personal care and emotional needs. This directly correlates with the quality of life residents can expect in aged care facilities. If we don't immediately increase funding and the numbers of personal care workers, leisure and lifestyle workers and enrolled nurses in aged care facilities, our community cannot hope to improve the living conditions in our residential aged care facilities. Our elderly deserve better.