

Worker Survey

IMPORTANT NOTE

Please note that this Worker Survey can be completed by multiple staff at each computer. However the survey cannot be saved at any point prior to completion.

This requires you to complete the entire survey in one sitting. We apologise for this, however felt it important that workers who share computers all have the opportunity to participate.

If at any stage you need to return to the previous page, please click the 'Prev' button at the bottom of the page. Do not press the back arrow on your browser.

This survey should take approximately 20 minutes to complete.

Part 1: Demographic profile

1. What is the name of the organisation where you work?

Please note providing this information is not compulsory but it will allow VAADA to ensure that we receive responses from all Victorian Government funded agencies and workers across Victoria.

2. Sex:

- Female
- Male
- Other

3. Year of birth:

Drop down menu

4. Country of birth:

Drop down menu

Other (please specify): _____

5. Are you of Aboriginal and/or Torres Strait Islander origin?

- No
- Yes - Aboriginal
- Yes - Torres Strait Islander
- Yes - both Aboriginal and Torres Strait Islander
- Prefer not to identify

6. Are you an Australian citizen?

- Yes *(If yes, respondents will be automatically directed to Part 2)*
- No

7. Do you have permanent resident status in Australia?

- Yes
- No

8. If you are working in Australia on a temporary visa, including an occupational trainee visa, how long before your current visa expires? (Please answer in months. E.g. 24)

Part 2: AOD workplace

This part of the survey collects specific information regarding the organisation in which you are currently working. If you work across multiple AOD sites, please respond in relation to your main place of work.

9. Which catchment is your *main* place of work located in?

- Barwon
- Bayside
- Eastern Melbourne
- Frankston / Mornington Peninsula
- Gippsland
- Goulburn Valley
- Grampians
- Great South Coast
- Hume
- Inner East Melbourne
- Inner North Melbourne
- Loddon Mallee
- North Melbourne
- North Western Melbourne
- South Eastern Melbourne
- South Western Melbourne

10. Which of the following Victorian Government AOD funded roles do you *primarily* work in? (Please select one option only)

- AOD counsellor
- Intake and assessment worker
- Assessment worker
- Intake worker
- Care and recovery coordinator
- Dual diagnosis worker
- Family therapist
- Forensic AOD counsellor
- Koori AOD Worker / Koori drug diversion worker / Koori AOD resource service worker / Aboriginal health worker
- Needle and syringe program worker
- Non-residential withdrawal nurse
- Nurse (please identify speciality in 'other' text box below)
- Peer support worker
- Pharmacotherapy support worker
- Researcher
- Residential support worker
- Student (please identify qualification in 'other' text box below)
- Unpaid Volunteer

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- Youth Worker
- Other role (please specify): _____

11. Which of the following best describes your organisation? (Please select one option only)

- Aboriginal and Torres Strait Islander service
- Adult service
- Community health service
- Culturally and linguistically diverse (CALD) service
- Dual diagnosis service
- Early intervention / prevention service
- Family service
- Family violence service (including men's referral)
- Forensic service
- Homeless service
- Hospital – Acute
- Hospital – Emergency Department
- Men's service
- Older adults / Elderly adult AOD service
- Peer based service
- Residential rehabilitation service
- Residential withdrawal service
- Women's service
- Youth service
- Other (please specify): _____

Part 3: Your AOD role

This part of the survey collects information on your AOD role. While it is often difficult to clearly articulate roles in only a few questions, particularly if you work across a number of roles, please try to respond as accurately as possible.

12. Which of the following options best describes your employment status in your current main AOD role?

- Permanent full time
- Permanent part time
- Fixed term full time
- Fixed term part time
- Casual
- Contracted
- Unpaid position

13. What is the total number of hours per week that you work in your AOD role? (Please round up to a whole number)

Hours: _____

14. Of the total hours per week that you work in your AOD role, approximately how many hours do you spend working directly with clients? (Please round up to a whole number). If none, please put '0'.

Examples of direct client work include: intake; assessment; developing care plans; providing treatment; support and care; follow-up and post care.

Hours: _____

15. Of the total hours per week that you work in your AOD role, approximately how many hours do you spend on client-related work that is not delivered face to face? (Please round up to a whole number) If none, please put '0'.

Examples of client-related work that is not delivered face to face include: organising case meetings; preparing case notes; referral; secondary consultation; case review; client reporting and travel time

Hours: _____

16. Do you manage staff?

- Yes
- No

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17. Do you provide clinical supervision and / or other practice support?

Examples of practice support include mentoring and reflective practice

- Yes
- No

18. Do you currently have other paid work outside of the AOD sector in any of the following sectors? (Please select as many as applicable)

- I do not have other paid work outside of the AOD sector
- Child protection / Family support / Out-of-home care
- Clinical mental health
- Disability
- General health (e.g. nursing)
- Housing
- Mental Health Community Support Services
- Non-related to health and welfare sector (e.g. private sector)
- Private practice in the health sector
- Other (please specify): _____

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Please note that the Department of Health and Human Services has not requested and will not be receiving responses to the following two questions. These questions are optional and for use by the Victorian Alcohol and Drug Association (VAADA) only.

VAADA's intention is to examine broad employment categories across the AOD sector and assess underlying remuneration issues impacting recruitment and retention.

19. What award or agreement are you employed under / is your contract based on?

- Enterprise Bargaining Agreement
- Individual contract / non award
- Medical Scientists, Pharmacists and Psychologists Award
- Residential and Support Services Award
- Social and Community Services Award
- Unsure
- Other (please specify): _____

20. What is your current annual salary before tax? (Please round up to the nearest thousand)

If you work part time, please provide an annualised amount as if you were working full time

Drop down menu

Part 4: AOD experience

This part of the survey seeks to understand your experience of working in the AOD sector, including privately and publicly funded Australian and international services.

21. Is your current position the first role you've had in the AOD sector?

Yes

No

22. How long (in years and/or months) have you been employed in your current organisation?

Years _____

Months _____

23. How many years and/or months of AOD service experience have you had overall? (Please include both Australian and international experience)

Years _____

Months _____

24. Where did you work before your current organisation?

Volunteer within the AOD sector

Working within the AOD sector in another organisation

Working outside the AOD sector

Student or student placement (please specify level of qualification)

25. Which sector did you work in prior to joining the AOD sector? (Please select one option only)

I haven't worked in any other sector

Child protection

Clinical mental health

Disability

Education

Employment services

Health

Housing

Justice

Mental Health Community Support Services

Private sector

Sexual health

Youth

Other (please specify): _____

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26. To what extent do you agree or disagree with the following statement: "I feel confident in my capability to respond to client needs?"

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

Part 5: Qualifications

This part of the survey seeks to understand your formal qualifications including: qualifications that are specific to AOD and addiction studies; health, social or behavioural science qualifications; and all other qualifications.

27. Have you completed a formal qualification that is specific to AOD and/or addiction studies? (If you are currently enrolled, please select 'no')

Yes

No *(If no, respondents will be automatically directed to question 32)*

28. Please select your HIGHEST formal qualification that is specific to AOD and/or addiction studies.

Accredited short course

Certificate I

Certificate III

Certificate IV

Diploma

Advanced Diploma or Associate Degree

Undergraduate Degree (Bachelor)

Honours Degree (Bachelor)

Graduate Certificate

Graduate Diploma

Masters

Doctorate / PhD

29. What is the title of your HIGHEST formal qualification that is specific to AOD and/or addiction studies? (E.g. Certificate IV of Alcohol and Other Drugs; Graduate Diploma of Alcohol and Other Drugs)

30. What year did you complete your HIGHEST formal qualification that is specific to AOD and/or addiction studies? (Please use whole numbers. E.g. 2001)

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31. To what extent do you agree or disagree with the following statement: “My formal qualification that is specific to AOD and/or addiction studies has prepared me for my current AOD role”

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

Please give reasons for your answer: _____

Respondents will be automatically directed to question 33

32. Are you currently enrolled in a formal qualification specialising in AOD and/or addiction studies?

- Yes (Please specify): _____
- No

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33. Have you completed a formal health, social or behavioural science qualification that is not specific to AOD and/or addiction studies? (E.g. community development, counselling, nursing, pharmacy, psychology, public health, social work, youth work, welfare)

(If currently enrolled, please select 'no')

Yes

No (*If no, respondents will be automatically directed to question 38*)

34. Please select your HIGHEST formal health, social or behavioural science qualification that is not specific to AOD and/or addiction studies.

Accredited short course

Certificate I

Certificate III

Certificate IV

Diploma

Advanced Diploma or Associate Degree

Undergraduate Degree (Bachelor)

Honours Degree (Bachelor)

Graduate Certificate

Graduate Diploma

Masters

Doctorate / PhD

35. What is the title of your HIGHEST formal health, social or behavioural science qualification that is not specific to AOD and/or addiction studies? (E.g. Bachelor of Social Sciences; Diploma of Welfare Studies)

36. What year did you complete your HIGHEST formal health, social or behavioural science qualification that is not specific to AOD and/or addiction studies? (Please use whole numbers. E.g. 2001)

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37. To what extent do you agree or disagree with the following statement: “My formal health, social or behavioural science qualification that is not specific to AOD and/or addiction studies has prepared me for my current AOD role”

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

Please give reasons for your answer: _____

Respondents will be automatically directed to question 39

38. Are you currently enrolled in a formal health, social or behavioural science qualification that is not specific to AOD and/or addiction studies?

- Yes (Please specify): _____
- No

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39. Have you completed any other formal qualifications?

This question refers to education and training that is NOT specific to AOD and or/addiction studies and is NOT a health, social or behavioural science qualification.

(If you are currently enrolled, please select 'no')

- Yes
- No (***If no, respondents will be automatically directed to question 43***)

40. Please select your HIGHEST formal qualification that is NOT specific to AOD, addiction studies, health, social sciences or behavioural sciences.

- Accredited short course
- Certificate I
- Certificate III
- Certificate IV
- Diploma
- Advanced Diploma or Associate Degree
- Undergraduate Degree (Bachelor)
- Honours Degree (Bachelor)
- Graduate Certificate
- Graduate Diploma
- Masters
- Doctorate / PhD

41. What is the title of your HIGHEST formal qualification that is NOT specific to AOD, addiction studies, health, social sciences or behavioural sciences? (E.g. Bachelor of Arts; Diploma of Business)

42. What year did you complete your HIGHEST formal qualification that is NOT specific to AOD, addiction studies, health, social sciences or behavioural sciences? If you're currently enrolled, please advise the year you intend to complete your qualification. (Please use whole numbers. E.g. 2001)

Respondents will be automatically directed to question 44

43. Are you currently enrolled in a formal qualification that is NOT specific to AOD, addiction studies, health, social sciences or behavioural sciences?

- Yes (Please specify): _____
- No

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44. Which of the following units of competency of the Certificate IV in AOD work have you successfully completed

Please note that the names of the AOD skill set units below have recently been superseded.

- I have not completed any of the units of competency of the Certificate IV in AOD work
- Assess needs of clients with alcohol and-or other drugs issues
- Work effectively in mental health settings
- Work effectively in the alcohol and other drugs sector
- Work with clients who are intoxicated

45. Do you currently hold Department of Health and Human Services accreditation to work with forensic clients?

- Yes
- No

46. Do you currently hold Department of Health and Human Services accreditation to provide forensic clinical supervision?

- Yes
- No

Part 6: AOD skills and training

This part of the survey seeks to understand your AOD skills and training needs.

47. Have you undertaken training in any of the following areas? (Please select as many as applicable)

- Administration (e.g. developing policies, risk assessments and work manuals)
- Building and maintaining service partnerships
- Clinical supervision
- Leadership and management (e.g. staff performance, team leadership, peer workforce support)
- Managing risk behaviours (e.g. aggression)
- Responding to multiple and complex needs (e.g. dual diagnosis, trauma)
- Specific interventions or therapies (e.g. Cognitive Behaviour Therapy, Motivational interviewing, brief interventions)
- Working with multidisciplinary teams
- Working with specific population groups (e.g. Aboriginal and Torres Strait Islander, LGBTI, CALD people)

48. Would you like training/further training in any of the following areas? (Please select as many as applicable)

- Administration (e.g. developing policies, risk assessments and work manuals)
- Building and maintaining service partnerships
- Clinical supervision
- Leadership and management (e.g. staff performance, team leadership, peer workforce support)
- Managing risk behaviours (e.g. aggression)
- Responding to multiple and complex needs (e.g. dual diagnosis, trauma)
- Specific interventions or therapies (e.g. Cognitive Behaviour Therapy, Motivational interviewing, brief interventions)
- Working with multidisciplinary teams
- Working with specific population groups (e.g. Aboriginal and Torres Strait Islander, LGBTI, CALD people)

49. Are there any additional areas (not listed above) in which you would like to receive training/professional development?

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50. Do you have access to any of the following forms of clinical supervision and/or other practice support? (Please select 'no' or as many as applicable)

Examples of practice support include mentoring and reflective practice

- No - I do not have access to internal or external clinical supervision/practice support ***If no, respondents will be automatically directed to Part 7***
- Yes- I have access to internal individual supervision/practice support
- Yes – I have access to internal group supervision/practice support
- Yes- I have access to external individual supervision/practice support
- Yes – I have access to external group supervision/practice support
- Other (please specify): _____

51. How frequently do you access supervision/practice support?

- Fortnightly
- Once a month
- Every 3 months
- Every 6 months
- Once a year or less

52. To what extent do you agree or disagree with the following statement: "I feel the clinical supervision/practice support provided by my organisation meets my needs"

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

Part 7: Employment satisfaction and future work plans

This part of the survey seeks to understand your employment satisfaction and future work plans

53. How satisfied are you with your current employment in the AOD sector?

- Very dissatisfied
- Dissatisfied
- Unsure
- Satisfied
- Very satisfied

Please give reasons for your answer: _____

54. What do you plan to do in the next 12 months of your career in the AOD sector? (Please select one option)

- Continue working in my current role
- Decrease my working hours
- Increase my working hours
- Leave the sector with a view to returning at a later time
- Leave the sector with no intention to return
- Move horizontally into another AOD role
- Seek promotional opportunities within my organisation
- Seek promotional opportunities within the sector
- Other (Please specify): _____

55. What do you plan to do in the next 3 years of your career in the AOD sector? (Please select one option)

- Continue working in my current role
- Decrease my working hours
- Increase my working hours
- Leave the sector with a view to returning at a later time
- Leave the sector with no intention to return
- Move horizontally into another AOD role
- Seek promotional opportunities within my organisation
- Seek promotional opportunities within the sector
- Other (Please specify): _____

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56. Do you have any other feedback that is relevant to better understanding the issues faced by the AOD workforce in Victoria?

Thank you for taking the time to respond to the Victorian Alcohol and Other Drug Services Workforce Study 2016.