



Charles Sturt
University

Identification of key determinants of Caseworker workplace wellbeing in Family and Community Services, NSW

Summary Report

March 2020
Charles Sturt University

Executive Summary

Background

In 2018 Charles Sturt University began an investigation into workplace wellbeing at the invitation of the New South Wales Department of Family and Community Services (FACS). The project was designed to inform the Department's development of workplace wellbeing strategies to support caseworkers and other frontline workers. The project explored caseworkers' experiences of workplace wellbeing, the factors that undermine caseworkers' workplace wellbeing and the factors and strategies that can support positive workplace wellbeing for caseworkers.

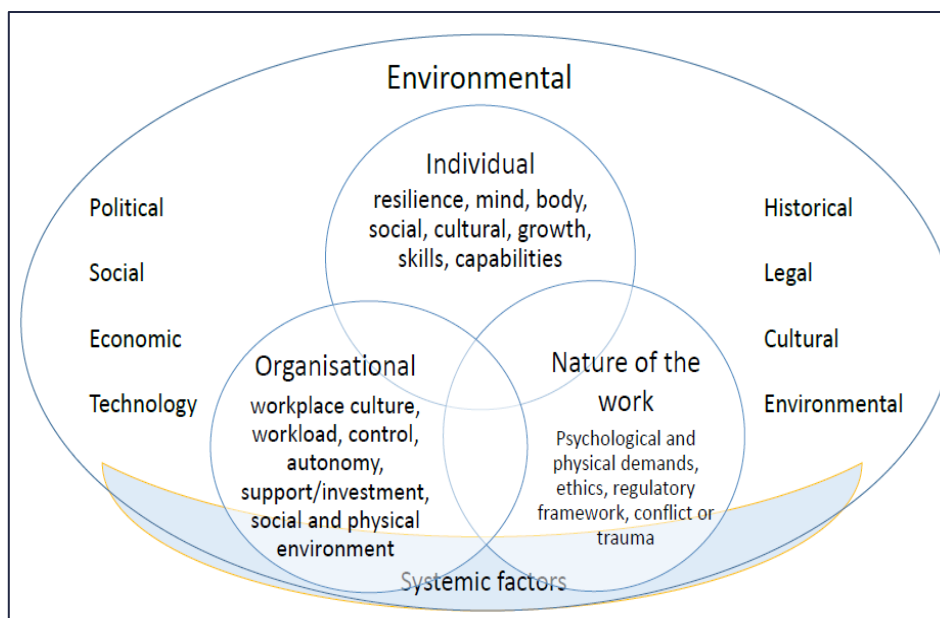
The project sought to identify key factors related to workforce wellbeing from the perspective of FACS staff who are involved in casework. The participants in this study were **randomly selected and interviewed** from across range of contexts and administrative regions. The random stratified sampling combined, with a high response rate, suggests those interviewed were a truly representative sample of the FACS workforce.¹

What is workplace wellbeing?

Workplace wellbeing is situated within the dynamic relationship between:

- Individual factors -resilience, prior experience, individual health, skills and capacities
- Nature of the role - psychological and physical demands, ethics and conflict
- Organisational factors - workplace culture, resources, technology, training and support.

These factors exist within the context of existing cultural, societal, legal, political and regulatory frameworks that inform, influence relationships within and between the individual, the task and the organisation.



¹ This research was conducted prior to the restructure of FACS into the Department of Communities and Justice (DOCJ). As such the FACS acronym has been used throughout the report to signify the Department.

Context

FACS is charged with delivering a highly visible and essential public service, in partnership with other government and non-government services. Changing legislative requirements, the political climate and resource allocations for front-line service delivery are made even more difficult by high levels of media scrutiny when incidents occur. The operating context also affects relationships between managers and caseworkers. The context in which FACS caseworkers seek to provide a public service can bring a number of challenges, but also reward. Some of these factors are unique to FACS, but many are common across human services.

Value alignment

Staff value the work they do and their values align closely with those of the organisation.

A fundamental finding of this research was the strong alignment between the FACS and staff values. Staff are committed to the overarching goals and mission of FACS and carrying out this valuable and vital public service. This alignment provides a protective factor for caseworkers against the stressors of the role. There is an appreciation that aspects of this work will be emotionally and psychologically taxing but the staff interviewed did not see this as the major threat to their workplace wellbeing. This is not viewed as a cause of workplace dissatisfaction. It was viewed as part of FACS' public service mandate. This finding should not be overlooked.

The nature of the work

Caseworkers value working with children and families, even in the worst circumstances. A key source of job satisfaction for caseworkers were the real-life indicators that people's lives are improving, keeping families together and keeping children safe. Secondary factors in job satisfaction for caseworkers are the stimulating nature of casework and relationships with colleagues. The research team noted, that despite expecting vicarious trauma to be a key source of work-related stress, this was infrequently raised in the interviews.

Interviewees reported that realistic expectations of the demands of the job, was related to longevity in the position. Many interviewees noted a high turn-over rate amongst new employees. They attributed this to unrealistic expectations, inadequate preparation and inadequate support to undertake the work required. Enhanced recruitment and training processes may help address this issue.

The enhanced training and recruitment could include clear information on the nature of the work and workload expectations. The managers also emphasised that initial training should be relevant and focused on practical skills. Careful attention to ensuring mentoring, supervision and support for new employees is essential given the links between positive wellbeing and organisational support reported in the study.

A significant issue reported by caseworkers is the intensity at which they work. Many participants reported constantly working at peak level with limited opportunities for recuperation and consolidation. They reported prolonged periods of high workload during which they were unable to employ strategies for managing their wellbeing. Staff reported they had the awareness and skills to manage their self-care. There is no need to educate caseworkers in this regard. Affirming and supporting caseworkers' autonomy, and allowing time to manage their wellbeing would help.

Individual elements of wellbeing

There was a high variability in reports of personal resourcefulness and resilience. Caseworkers and former caseworkers reported resilience to the aspects of the work involving trauma and neglect of children, and working with families. However, ongoing frustrations with organisational structures, systems (such as ChildStory) and processes impacted on their capacity to 'bounce back'. For others, long-term resilience had its limits, sometimes reached after many years of frustration, or as a result of a particular incident.

Organisational support

The tension between managers' concerns to manage individual workloads and meet community demands and organisational KPIs was frequently raised by the interviewees. High workloads, perceived unfair workload allocation and management were major and frequently cited sources of concern for caseworkers. The introduction of effective mechanisms for registering, monitoring and managing workloads would significantly ameliorate this issue. Although caseworkers described a willingness to cope with very high workloads, consistently working under these conditions adversely impacted on wellbeing. Building 'catch-up' time into workload management, to facilitate timely completion of tasks while simultaneously providing respite from pressing workload demands may improve caseworker wellbeing.

Casework supervision is important for workers in the community services. The experiences of group supervision were remarkably variable among caseworkers. Some reported it was subverted by their line managers for other purposes and had become toxic, others reported it to be implemented 'half-heartedly' and others found it to be highly valuable. A recommendation is that professional supervision be separated from managerial processes. However, given there was extreme variation in perceptions of supervision value (toxic to highly valuable) further research to distil the critical factors related to supervision effectiveness appears warranted.

Impact of organisational culture on workplace wellbeing

The importance of managers being transparent and fair in granting leave, assigning workload and managing teams was emphasised by many interviewees. Research indicates 'fairness' is the single greatest predictor of workplace satisfaction. While family friendly policies do exist within the Department, it was reported that some managers are unwilling to allow their staff to access such provisions. This contributes to poor workplace wellbeing and to high staff turnover. A lack of perceived fairness in the workplace undermined trust between workers and managers and was identified as a major cause of stress.

Frontline managers are often required to 'act-up' in higher level positions at short notice. If they don't receive adequate training or preparation this can lead to other problems. Managers need access to support and resources to manage complex staffing issues such as access to flexible work, return to work after an injury, and team-based workplace conflicts. Investment in training and support for staff undertaking higher duties would yield strong dividends.

Individual resilience exists within the organisational structures. Organisations can build team and individual resilience by encouraging support-seeking, collaborative crisis management behaviours amongst all staff. The balance between supporting staff and performance management is an essential element of organisational performance. An ongoing organisational focus on improving leadership culture to destigmatise poor wellbeing, work to eradicate bullying behaviour at all levels, and maintain standards of staff accountability would enhance employee wellbeing.

FACS is committed to undertaking a process of recognising and acknowledging Indigenous culture. Indigenous caseworkers' experiences of individual, social and systemic racism create extra challenges to their workplace wellbeing. Centring an Indigenous, holistic approach to mental, physical, cultural and spiritual health could demonstrate both a commitment to workplace wellbeing and an institutional valuing of Indigenous culture within the organisation. Strategic appointments of Aboriginal caseworkers, managers and directors across the organisation would demonstrate a commitment to cultural responsiveness. This would enhance the wellbeing of Aboriginal caseworkers and also relations with clients in the community. Creating a Culturally Safe work environment for these workers is vital.

Recommendations for further exploration

A qualitative study such as this, captures the lived experience of caseworkers. It provides rich detail on the nature and dynamics of workplace wellness, and highlights areas that warrant further investigation. However, it does not benchmark, or quantify the frequency, intensity or extent of the challenges. It should be noted that since the commencement of this study and FACS had commissioned work to analyse psychological demands of caseworkers. The results of the psychological demands project could perhaps be used in conjunction with this study to further clarify role-related challenges.

Further quantitative research building on the themes and finding of this study would prove highly valuable. Using surveys designed for this workforce, in addition to internationally benchmarked, standardised questionnaires would provide a valuable insight into the extent and intensity of these issues. This research could be triangulated with existing HR data sets such as sick-leave, compensation claims, complaints, grievances and staff turn-over and data from the PMES to provide an evidence base to inform and evaluate initiatives to enhance workplace wellbeing.

1 Background

In 2018 Charles Sturt University began an investigation into workplace wellbeing at the invitation of the New South Wales Department of Family and Community Services (FACS).

Goals

This project will inform the Department's development of workplace wellbeing strategies to support caseworkers and other frontline workers. It will assist the Department to:

- Reduce perceived work-related stress and vicarious trauma
- Increase staff workplace satisfaction and productivity
- Reduce sick leave, extended leave and compensation claims
- Reduce turnover rates
- Increase consumer satisfaction.

Research questions

- What are caseworkers' experiences of workplace wellbeing?
- What are the factors that undermine caseworkers' workplace wellbeing?
- What factors and strategies support positive workplace wellbeing for caseworkers?

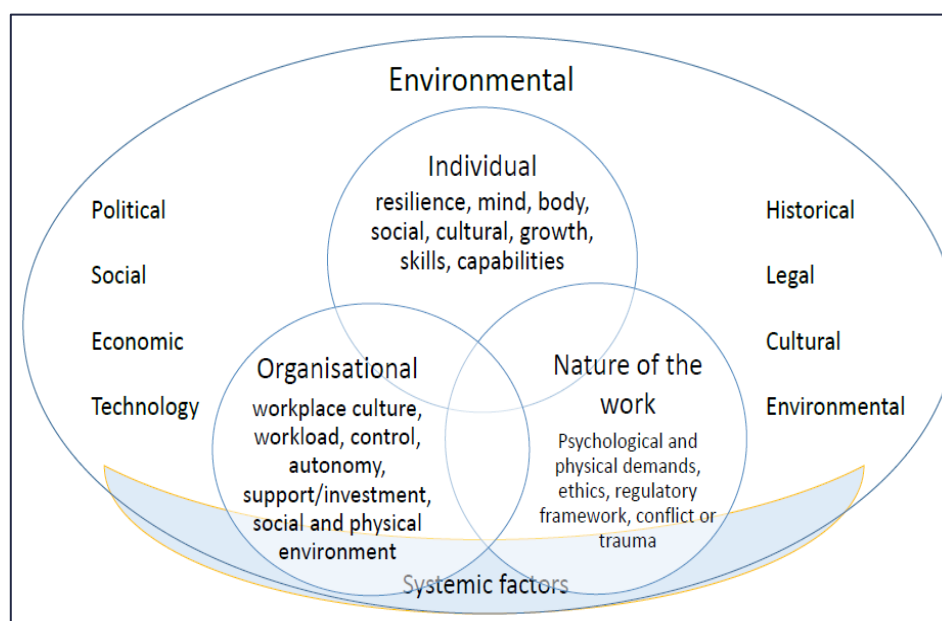


Figure 1-1: Holistic Approach to Wellbeing

2 What We Did

Phase One: Literature review

A comprehensive literature review was conducted to provide an evidence base and inform the research.

Phase Two: Consultation and design process

A series of meetings were held with FACS Employee Relations, Safety & Wellbeing staff, the Office of the Senior Practitioner and union to discuss the design and methodological approach.

Phase Three: Case worker interviews

Phase two of the project involved the collection and analysis of in-depth qualitative information

Phase Four: Focus groups of managers interviews

Using caseworker interview data to inform the interview prompts, three focus groups were held with managers. (The results of this study will be provided in a separate report.)

Sampling strategy

The entire workforce the sample was stratified by the following factors and participants selected randomly from by gender, time in FACS, district, rurality and size of team

Recruitment

A total sample of 32 caseworkers were interviewed with a response rate of 73 percent. A further 8 interviews were conducted with key stakeholders who were union representatives from the PSA. Where appropriate, quotations and data from the PSA interviews were used as supplementary evidence to support findings from the caseworker interviews.

	CWs >3yrs	CWs 6 weeks – 1 year	Ex CWs	TOTAL
Email or letter sent	67	14	17	98
Removed from list following automated response	14	0	-	14
Declined to participate	7	1	4	12
No response to any attempts to contact	23	6	2	31
No response to follow up after initial contact	5	0	4	9
Participated in an interview	18	7	7	32 ^a
Response rate				
	18/25	7/8	7/11	32/44
	72%	88%	64%	73%

^a 32 randomly selected participants, plus 8 participants recruited through the PSA

Table 2.2: Response Rate Caseworker Interviews

Analysis

The analysis was guided by the approach outlined Yin (2016). These five phases are: compiling all data collected, including transcripts, field research notes and team debrief notes reflecting on the data collection process; disassembling the data; reassembling of the data into potential themes through a process of immersion; interpreting the data; identification of the findings

3 The Workplace Context for FACS Caseworkers

The mission and values context

A key finding of the interviews was that FACS caseworkers were committed to the overarching mission and values of the Department, and they derived a high level of job satisfaction providing a valuable public service. Specifically, they valued the work of protecting children and young people from risk of significant harm and ensuring that more children are safe at home with their families.

I love the work... especially with the restorations. I love it and that's the best and I want to be able to do it well... it's not the work I dislike... I do it because of the children. I don't do it for a pay cheque. I can get a pay cheque anywhere.

The political and legislative context

Caseworkers recognise

- The political and legislative imperatives in which they operate
- Public expectations of the Department in meeting targets
- Media scrutiny
- The tension between policy imperatives and limited funding and resources
- Negative aspects of recent legislative changes, and its impact.

Well any type of job is extremely political you know. [That]... depends on which government ... is in power, it's about what they want FACS to do And so then you've got newspaper, radios and TV and stuff when there's a child death or an extreme case and stuff like that, but you're not allowed to publicly say [that it's the result of government policy].

Working with Aboriginal and Torres Strait Islander families

FACS has had a long-term involvement and engagement with Aboriginal communities in NSW. A significant proportion of FACS clients are Aboriginal, and working respectfully with Indigenous clients emerged from the interviews as a particular area of concern for caseworkers. Intergenerational trauma and past child protection policy impacts on the daily work of caseworkers. Relationships with Aboriginal clients form part of the work context for caseworkers and continue to be an area of concern in their wellbeing.

The impression of Community Services... we didn't have a great reputation as a Department, or past errors and mistakes and decisions that were made in the broader Aboriginal community. There is still that very much underlying animosity but we are slowly but surely... I know in my own [casework] I have got a few Aboriginal families and I know that some of those barriers are breaking down slowly because their attitudes have changed. People that are now working for Community Services are a lot more supportive.

The risk management and compliance context.

Many caseworkers perceived strong focus on risk management and compliance with rules and regulations. Caseworkers felt that the increased amount of 'paperwork' associated with risk management took up time that could be better spent in dealing with clients. Poor mental health was viewed as a risk to be managed, rather than a worker to be supported, the response from many workers was to keep their mental health problems secret rather than disclose them to the organisation:

So there's an issue there with frontline workers being medically discharged if they don't like you. So you've got to, you've got to keep stuff from them, from some management.

4 Nature of the Work

Expectations of the job

The majority of caseworkers reported that their expectations were mostly realistic when it came to the challenges of child protection and they were prepared to face significant challenges as part of their role. Resistant clients, angry outbursts and violent threats were all noted as part and parcel of being at the coalface of the Department.

I knew on my first day, even applying for a child protection caseworker position that I was not going to be meeting a family at their highest point. I knew that I was to expect some level of resistance and anger and hostility, I was expecting that.

However many new graduates were often shocked by the work, and resigned to pursue different work.

There are some people that come straight out of uni that have never actually... heard a sad story in their life, so it could be quite shocking for them.

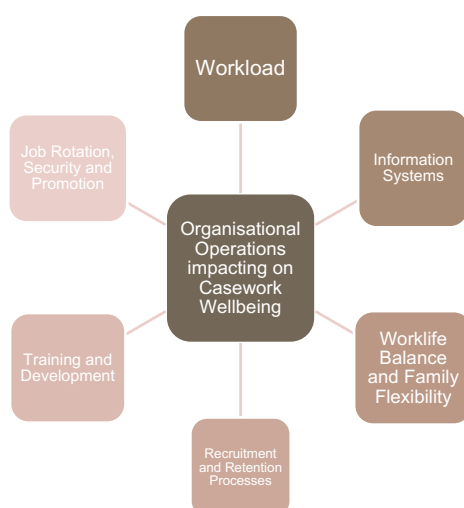


Figure 4 Organisational operations impacting on wellbeing

Client hours

Numerous caseworkers reported that they were expecting more face-to-face client time. They had to realign their expectations to prevent disappointment when they spent less time in face-to-face hours.

Workload and pace

The majority of caseworkers were not prepared for the workload and pace expected of them. The requirement that caseworkers would do what was necessary to get the work done (including staying late, work from home and sacrificing accrued flex hours if a crisis arose) was unexpected.

Flexible work: promised but not provided

Caseworkers spoke of specific expectations around flexible working arrangements not being met.

No, nup. No, they make it sound so beautiful and easy, and family friendly, and meaningful, and stuff like that ... when I took the job, we were both told that it's going to be a very family friendly and flexible arrangement, and whatever, and so, now [partner's] like, oh, this isn't what we signed up for.

Challenges

Vicarious trauma and the emotional nature of child protection work

Caseworkers reported they were aware that their role would involve witnessing and hearing about other people's trauma, particularly that inflicted on children, domestic violence and intergenerational trauma.

It does take a toll on you... Anyone who's said that it doesn't that's a lie or they're very numb and they need a new job.

Frustrations and disappointments

Caseworkers often reported they had to come to terms with the idea that 'there is only so much you can do' as they continued to work in their role.

Being the person between the institution and the clients

A major challenge of their role was having to be the 'face' of decisions which they had not made, and did not agree with, but which they had to deliver to clients.

You're having to implement decisions that are not in the best interests of the families or the kids, that's a whole new challenge on top of the other challenges that you have.

Sources of job satisfaction

More than 25% of participants expressed that they 'love' or 'really like' their work, in spite of the challenges to their wellbeing overall. This section discusses the main sources of satisfaction.

Working with children and families

The cause is child protection. So, that's it. It's not the organisation.

I love the work, don't get me wrong especially with the restorations. I love it and that's the best and I want to be able to do it well.

Values and ethics

Some participants were able to identify agreement between the values of the workers and the public values of the organisation:

The Department as a whole are working with a more strengths-based perspective ... they are drawing on that and utilising families more and that fits really well with my own values ... We all go into this work because we want to fix things and fix people and help people,

Doing the job well

Caseworkers gained satisfaction directly from being good at their job, and continuing to develop as caseworkers.

Other work relationships

Job satisfaction came from the nature of their work relationships, namely, good relationships with colleagues and managers.

My colleagues. I stand in absolute awe of them. Of all the shit they throw at us, they are dedicated, motivated. They are super-human, miracle workers. They are talented, imaginative. They are good people to work with, really good people to work with.

5 Factors that Impact Wellbeing

Caseworkers demonstrated a sophistication in their ability to identify a wide range of factors that embody the concept of wellbeing and awareness that wellbeing is embedded in workplace relationships structures and systems

Resilience

Caseworkers discussed the importance of resilience as a component of maintaining their wellbeing.

I'm pretty good and knowing myself and taking some personal inventory and I just deal with it through the systems I've developed through recovery not just necessarily work stuff so I talk about it with people.

Individual indicators of poor wellbeing

Caseworkers mentioned a range of personal indicators of poor workplace mental health. Many reported being unaware of these changes until visiting their GP about other matters

- Poor sleep
- Fatigue
- Reduced cognitive flexibility and resilience
- Agitation, anger, whingeing, complaining, snapping, yelling, general rudeness and increased swearing
- Many caseworkers observed that their swearing habits and sense of humour had changed
- Anxiety
- Depression episodes of crying.

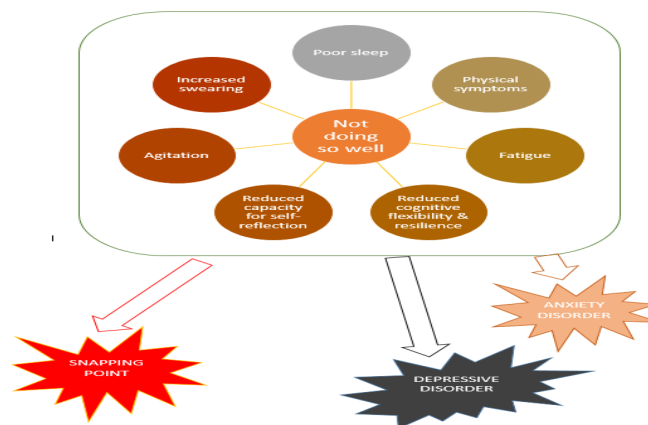


Figure 5-1 Indicators of poor emotional wellbeing

Social Indicators of poor wellbeing

Family

Many caseworkers discussed how their wellbeing and work-related stress impacted on their family.

My relationship with my partner [is impacted] because I come home and I vent at him to try and relieve the stress.

Work-related stress was described as impacting directly upon a caseworker's parenting behaviours.

I've got little kids and that's really difficult for them because I'll be typing – they got home last night and I was on the computer typing out notes from yesterday, so you've got to wait, I've got to finish this ... my kids will go, let's do this, and I'll go, no, I've got to do this, I've got to make this phone call,

Increasing withdrawal from others

Caseworkers reported withdrawing from engaging with others as an indicator of poor wellbeing

Strategies for Maintaining Wellbeing

Accessing support

Given the relational nature of case work, it could be expected that reaching out to others for support is a key strategy utilised by caseworkers. Caseworkers seek support formally and informally, both internal and external to FACS. Discussed in full in the main report, they are summarised in Figure 5.

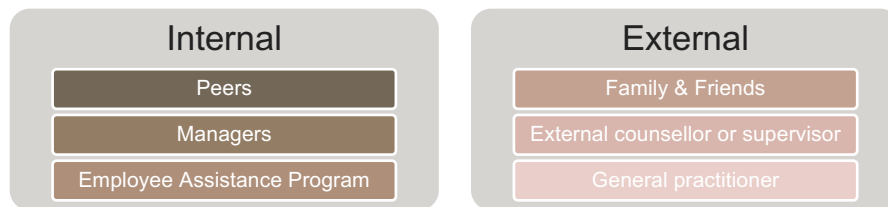


Figure 5-2 Internal and external forms of support for caseworkers

Practical strategies

Caseworkers discuss a range of strategies to manage stress in the workplace (see Figure 5.3)

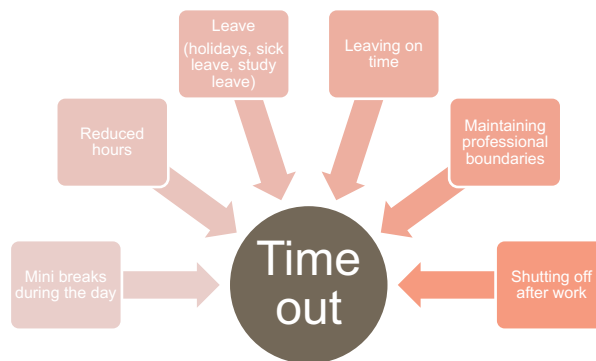


Figure 5-3 Time out strategies for caseworkers

Non-work activity

Many caseworkers reported that spending time doing recreational, home and leisure activities



Figure 5-4 Other lifestyle strategies for maintaining wellbeing

Psychological Strategies

Caseworkers used a range of psychological strategies to manage their wellbeing including mindfulness, meditation, self-regulation and only thinking about work at certain times. They recognised the need to accept various limitations (e.g. personal, time, organisational and policy) and the importance of balancing negative stories with positive ones, from their own families or the small wins for clients.

6 Impact of Organisational Culture on Caseworker Wellbeing

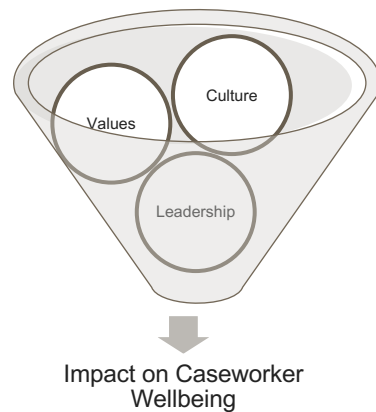


Figure 6-1 Impact of organisational values, culture and leadership on wellbeing

Organisational values and caseworker wellbeing

Feeling undervalued was also linked by caseworkers to clear messages that they were replaceable:

They don't value you... there's that idea that, 'well, we can always take people from the pool so you can leave if you want to leave', kind of thing

Leadership and management

The idea of leadership is commonly conflated in organisational texts where the word 'leader' is used synonymously with 'manager'. The figure below sets out a useful list of definitions that supported the data analysis in assessing the impact of leadership on caseworker wellbeing.

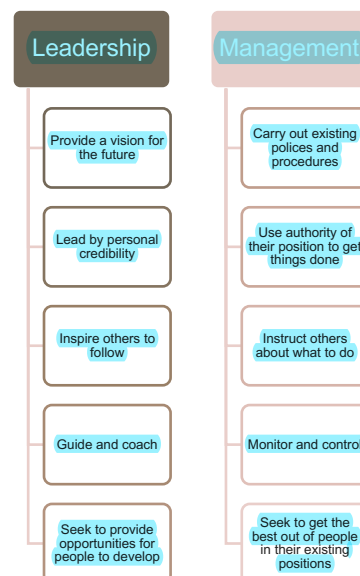


Figure 6-2 Leadership or management? Source: Hubbard, G. (2019). *Strategic management: thinking, analysis, action* (Sixth ed.). Melbourne, VIC: Pearson Australia.

Supervision

Group supervision

Thirty-eight of the forty participants raised group supervision. Perspectives and experiences of group supervision were strongly polarized.

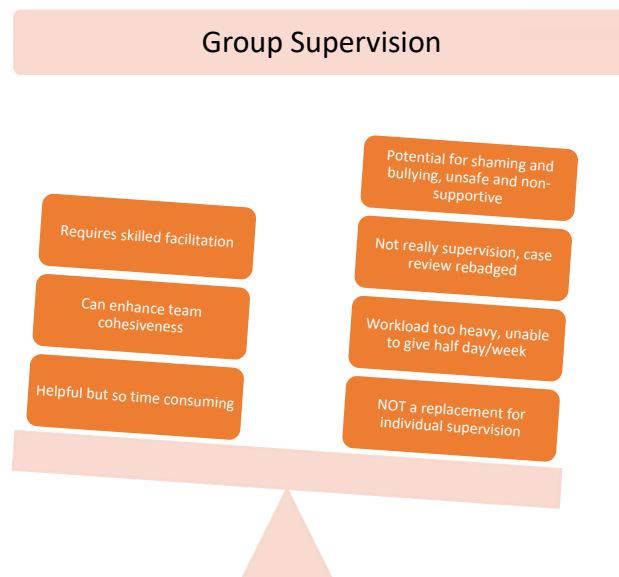


Figure 6-3 Factors contributing to good group supervision

I can only talk from personal experience, but if you're having an issue with your manager, you're not about to voice that in a group setting. So, there's no forum to say, I need help, and I'm not okay. It's also the expectation that in group supervision that the case worker is able to say, I am not okay, and this is why. In order to do that, you need to have the trust of those in the group

Individual supervision

Almost half of the participants spoke of individual supervision, and with the exception of one person, described individual supervision as more useful than group supervision processes.

Conclusion

For supervision, both group and individual, to be fully effective as a quality assurance mechanism and to support worker wellbeing it needs to be separated from line management and performance management. Caseworkers report that conflating line management supervision and clinical supervision frequently evoke ethical tensions and problems. This conflation of process creates an environment in which supervision may not meet either of the key objectives of a safe workforce or emotional and practice support. Staff were confused by this arrangement and a clear separation between line management and clinical supervision would benefit both processes.

7 Elements of Organisational Operations that Impact on Caseworker Wellbeing

Organisational issues such as workload, intensity, complexity and balance, are discussed in section 4.

Information systems

A particular element of their workload that Caseworkers identified overwhelmingly as contributing to their stress and poor wellbeing was the implementation of the information system ChildStory².

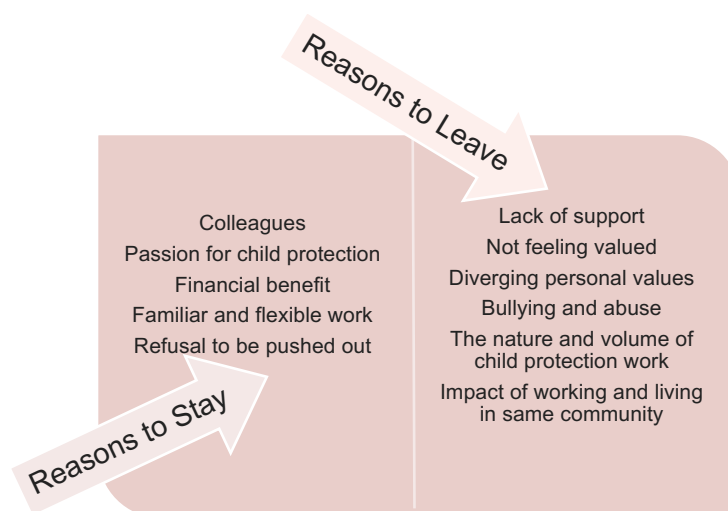


Figure 7-1 Reasons for staying and leaving

Reasons to leave and reasons to stay

Caseworkers interviewed reported various reasons why employees had or would leave FACS. These are illustrated in Figure 7-2.

Training and development

Mandatory training

The training is fairly regular. Like various kind of things that we have to attend so I would probably say like I would say at least once every two months something comes up like a training that we need to go

Ignite

Numerous caseworkers also identified the online 'ignite' program as an opportunity for training. While some caseworkers were appreciative that the program was available, they had critiques of the modules. They felt the content was quite shallow and theoretical.

² Data collection for this project occurred from January 2019 to September 2019 and comments regarding Childstory may reflect implementation issues that were current at that time.

Caseworker development program

High levels of stress were felt by new caseworkers when they were made the primary worker of a case before they had finished their training. This level of stress on unprepared and often inexperienced caseworkers had a detrimental effect on their wellbeing, and in some cases led to them resigning only months after being recruited. While the majority of content is casework-specific, some caseworkers were encouraged that self-care and wellbeing was mentioned in the training albeit briefly. There was widespread consensus the CDP needs to provide more exposure to real-life realities of working as a caseworker in order to adequately prepare staff for the reality of casework.

One of the case workers that had only been there for about 3 or 4 months, in tears, she says 'I don't know what to do, I've got 4 cases allocated to me and I'm the primary worker, and I've got to go out and do all this stuff, and I'm still at training' ... policy and procedure in the previous 16-17 years was always you are not to be allocated a case until you've been signed off from CDP ... [but] that's been happening, that's been creeping in.

On-the-job mentoring

Numerous caseworkers identified a possible solution to the problems they saw in the CDP: on-the-job mentoring.

'Acting Up' training

While the impact that acting-up, managerial changes and promotion to new roles have on wellbeing

There is no training, and they don't understand, and they don't get it. And that caseworker, when an acting manager opportunity comes up, is thrown in the deep end and with no support.

Job rotation, security and promotion

Job rotation, job security and promotion have the potential to be strategic tools used to support and encourage workplace wellbeing among caseworkers. Job rotation could be used to address burnout or to multi-skill the workforce and develop broader perspectives of the organisation. A growing sense of insecurity among caseworkers could undermine workplace wellbeing, while a lack of transparency in promotion processes could lead to poor perceptions of fairness and undermine wellbeing.

Recruitment and retention

Recruitment of good quality, resilient staff is an important foundation for the functionality of the organisation.

Performance management

Approximately a quarter of caseworkers interviewed identified that while quotas, benchmarking and turnover are regularly monitored, these performance indicators were not seen to give due consideration to the intensity of cases, nor to capture qualitative measures of work pace and emotional demand.

Bullying and disciplinary procedures

Participants called for clear and transparent handling of bullying cases along with just and equitable implementation of codes of conduct, complaint procedures and solutions to bullying.

- Peer-to-peer
- Relations between caseworkers and frontline managers
- Relations between frontline managers and senior staff
- Responses to bullying

Transparency and fairness need to be built in to all aspects of managing staff and responding to bullying.

8 Conclusion

This report explored caseworkers' experiences of wellbeing, the factors that undermine their wellbeing and the elements and strategies that can support their wellbeing. The key findings for each of these three questions are presented below.

What are caseworkers' experiences of workplace wellbeing?

- Caseworkers value working with children and families
- Individual wellbeing is closely tied to organisational structures and systems such as:
 - workload management
 - user friendly information systems
 - work-life balance support provisions
 - rostering and rotations to enable recuperation and consolidation
 - Increasing the baseline workforce FTE
- Supervision was a two edged sword. When it was implemented well at the local level staff found it highly beneficial, but when not implemented appropriately staff found it toxic.

What are the factors that undermine caseworkers' workplace wellbeing?

Staff are highly committed to the values and public role of the organisation, but they are sensitive to when these values are not manifest within the organisation. A high proportion of interviewees reported

- a high workload and a high intensity caseload
- leave and flexible work arrangements not being accessible
- systemic tensions: especially the tension between meeting KPIs and effectively complying with child protection policies and protocols
- sub-optimal workplace culture, including bullying and unfair work and leave allocations

What factors and strategies support positive workplace wellbeing for caseworkers?

- Due to their training and background caseworkers are skilled at self-care and use a range of strategies to manage their wellbeing. However, they become frustrated when not able to implement these wellbeing strategies due to workload demands
- Enhanced recruitment and retention, and induction training are key actions participants believed would support workplace wellbeing and enhance the effectiveness of the FACS workforce.

Future opportunities

Managers are the carriers or barriers of workplace culture and pivotal to the wellbeing of the staff. They have a key role in building team culture and supporting the wellbeing of their staff. Investing in training and development for this cohort (including those who 'act-up') would yield rich dividends. Many caseworkers spoke highly of their managers who are leading effectively. However, **supporting and developing the leadership skills of front-line managers would be a cost-effective way to improve workplace wellbeing.**

Many of the key themes and issues related to caseworker wellbeing revealed in this research are common to most human service organisations, and some are unique to FACS. The data presented here provides an evidence base to develop and administer focussed, standardised surveys to quantify the extent, intensity and importance of these issues across the entire organisation. It would also provide benchmarks by which to design and evaluate programs to enhance workplace wellbeing.

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