27 February 2026

House Standing Committee on Employment, Workplace Relations, Skills and Training

Parliamet House

Canberra ACT 2600

Dear Committee Members,

Re: Joint submission from Cancer Council NSW and the Australian Research Centre for Cancer Survivorship to the Inquiry into the operation and adequacy of the National Employment Standards

Cancer Council NSW and the Australian Research Centre for Cancer Survivorship welcome the opportunity to make a submission to the House of Representatives Standing Committee on Employment, Workplace Relations, Skills and Training inquiry into the operation and adequacy of the National Employment Standards.

This joint submission focuses on the adequacy of entitlements under the National Employment Standard (NES) for people with cancer who are of working age.

We acknowledge the Terms of Reference exclude casual employment and flexible working arrangement. While we will not focus on those aspects of the NES within this submission, we note that there is a serious need for reform of casual worker entitlements and flexible working arrangements to provide better protections for workers affected by cancer. We look forward to contributing to future work on these matters.

About us

Cancer Council NSW is Australia's leading cancer charity, dedicated to reducing the impact of cancer for all Australians. Working across every aspect of every cancer, we support families affected by cancer when they need it most, speak out on behalf of the community on cancer issues, empower people to reduce their cancer risk, and find new ways to better detect and treat cancer.

The Australian Research Centre for Cancer Survivorship (ARCCS) is a partnership between UNSW and Cancer Council NSW. It is the first research facility in the world dedicated solely to understanding and improving life after a cancer diagnosis.

People with cancer are a large and highly vulnerable cohort within the labour market

Cancer is a highly prevalent condition among people of working age. In Australia, there are approximately 1.66 million cancer survivors and about half are of working age [1]. Cancer treatment and recovery frequently extend over months and can be characterised by fluctuating capacity rather than permanent incapacity. [1]

Evidence demonstrates that cancer has a major impact on employment. Nearly half of cancer patients face employment changes, with about 46% of working-age individuals remaining out of work after diagnosis [1].

Cancer is a major cause of productivity loss in Australia, higher than other chronic conditions. In NSW alone, it is estimated that cancer results in $240m in lost wages each year [2].

People with cancer are around three times more likely to exit full-time work than the general population [1]. Many are willing to work but workplace systems and entitlements are poorly designed for serious, temporary illness.

For people with cancer, employment is often more than a source of income. Staying connected to work can provide stability, dignity, social connection and a sense of normality during a time of significant disruption. On the other hand, unplanned workforce exit due to inadequate leave or inflexible workplace arrangements can compound emotional distress and accelerate financial hardship [3].

People with cancer comprise a highly vulnerable population within the workforce. However, they are often not captured by existing social safety nets. Many people with cancer are expected to recover or regain capacity over time, unlike people with permanent disability. However, cancer differs from short-term illness as treatment is often prolonged, unpredictable and cumulative in its effects – and often accompanied by discrimination and stigma.

Paid personal and carer's leave NES entitlements are inadequate for people with cancer

The NES provides ten days of paid personal leave per year for full-time employees, pro-rated for part-time workers. There is no leave entitlement for casual workers. While this entitlement may be adequate for short-term illness, it is entirely insufficient for serious conditions such as cancer.

Cancer treatment often involves surgery, chemotherapy, radiotherapy and ongoing monitoring. Side effects including fatigue, pain, nausea, cognitive impairment can have significant impact on a person's capacity to work. Consequently, workers with cancer often exhaust their paid personal leave within weeks of diagnosis.

Once paid leave is exhausted, workers face stark choices: continue working beyond their capacity, take unpaid leave, reduce hours, or leave employment altogether [4]. For those in insecure employment arrangements, there is often no leave to draw on, creating an unfair system where the ability to remain employed with cancer depends on employment type, employer discretion and individual financial reserves [1].

The inadequacy of paid carer's leave further compounds these problems. Family members and carers often need to attend medical appointments, provide transport and support people through cancer treatment and recovery. Many carer's exhaust leave provisions quickly with some – disproportionately women – reducing working hours or exiting the workforce [3].

For both patients and carers, existing NES entitlements do not reflect the realities of cancer.

Insecure work

Cancer Council NSW and ARCCS note that casual employment is excluded from the Terms of Reference of this inquiry. However, we wish to acknowledge that people in other forms of less secure work such as labour-hire workers, contractors, gig-economy workers and small business employees are over-represented among those who experience financial hardship following a cancer diagnosis [3].

These workers are least likely to have paid leave, income protection insurance or access to employer-provided arrangements. Under the current NES framework, they are entitled to very limited protections. Greater protections under the NES and the introduction of a temporary wage subsidy could enable people with insecure work to remain connected to their industry, increasing productivity and lessening reliance on other government support payments.

The limits of existing social supports

When paid leave and workplace flexibility are insufficient, people with cancer are often forced to turn to the broader social security system. However existing supports are poorly aligned with the realities of cancer [5].

The National Disability Insurance Scheme (NDIS) is designed for people with permanent and significant disability. Many people with cancer do not meet eligibility criteria because their condition is episodic, treatment-related or expected to improve over time, even though they may experience profound functional impairment for extended periods.

Similarly, income support payments such as JobSeeker are ill-suited to people undergoing cancer treatment, as they require recipients to be actively seeking work. The Disability Support Pension involves strict requirements and lengthy assessment processes that exclude many cancer patients who are temporarily unable to work.

As a result, a significant cohort of people with cancer fall through the cracks as they are too unwell to work, ineligible for disability supports, and inadequately protected by employment standards. This policy gap places undue pressure on individuals, families and charitable organisations to fill the void.

Several international jurisdictions offer substantial support to individuals with chronic illnesses, such as:

- United Kingdom: up to 28 weeks of Statutory Sick Pay
- Canada: up to 26 weeks of federal sickness benefits
- Norway: 52 weeks of paid sick leave
- Germany: 6 weeks full pay, then 72 weeks part-pay

Recommendations

Reform to the entitlements provided under the NES is necessary to protect workers with cancer who slip through the cracks of other social supports. The realities of contemporary cancer treatment mean entitlements are inadequate, particularly as they relate to sick and carer's leave.

We recommend the Australia Government:

1. Expand and modernise sick and carer's leave entitlements for people with serious conditions like cancer to better reflect the duration and variability of treatment and recovery. This could include increasing the entitlement from 10 days per year and introducing greater flexibility to take personal leave for appointments and treatment even when "fit to work".

2. Establish a targeted direct wage-subsidy program to help employers retain staff undergoing cancer treatment or returning to work after recovery. The scheme would provide temporary income support to employees whose working hours or capacity are reduced during treatment, with funds paid directly to the employer to offset wage costs. We have attached a report from McKell Institute that proposes an economic rationale and roadmap to introduce a direct wage support scheme in Australia.

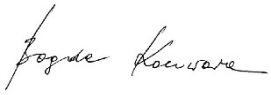
3. Enable employees to access a shared pool of donated or government-funded leave to supplement exhausted entitlements during treatment or recovery. This could operate through workplace agreements or public-sector participation, with employees able to contribute unused annual or long-service leave and receive a tax deduction or credit for doing so. The model mirrors initiatives in Scandinavian and Canadian workplaces and aligns with the values of solidarity and fairness expressed by participants in this research. It would help bridge short-term income gaps without placing additional pressure on employers.

4. **Reform compassionate leave entitlements to better support families affected by cancer**. This is especially important when cultural mourning practices, including Sorry Business, commonly extend beyond the current two-day entitlements.

5. Conduct an inquiry into work and cancer in Australia. A system-wide review would help assess the adequacy of social supports and legal protections for people with cancer in the workplace.

We thank the Committee once again for the opportunity to contribute to this important work. We would be pleased to discuss this submission further at the Committee's convenience. For any further enquiries, please contact Brad Gellert, Manager Policy and Advocacy at Cancer Council NSW at bradley.gellert@nswcc.org.au or 02 9334 1748.

Yours sincerely



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[5] Cancer Council Australia. Disability and Cancer Care: Treatment and Care Policy. Cancer Council Australia, Sydney, March 2025. https://www.cancer.org.au/about-us/policy-and-advocacy/treatment-care/disability