



NACCHO

National Aboriginal Community
Controlled Health Organisation
Aboriginal health in Aboriginal hands

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Submission

Skills IQ

Aboriginal and Torres Strait Islander Health Worker

Draft 3

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About NACCHO

NACCHO is the national peak body representing 143 Aboriginal Community Controlled Health Organisations (ACCHOs) Australia wide on Aboriginal and Torres Strait Islander health and wellbeing issues. NACCHO's work is focused on liaising with governments, its membership, and other organisations on health and wellbeing policy and planning issues and advocacy relating to health service delivery, health information, research, public health, health financing and health programs. Our members provide about three million episodes of care per year for about 350,000 people across Australia, including about one million episodes of care in very remote regions.

Sector Support Organisations, also known as affiliates, are State based and represent ACCHOs offering a wide range of support services and Aboriginal and Torres Strait Islander health programs to their members including advocacy, governance and the delivery of state, territory and national primary health care policies.

ACCHOs range from large multi-functional services employing several medical practitioners and providing a wide range of services, to small services which rely on Aboriginal Health Workers/Practitioners and/or nurses to provide the bulk of primary health care services, often with a preventive, health education focus. Our 143 ACCHOs operate approximately 700 facilities, including about 450 clinics. ACCHOs and their facilities and clinics contribute to improving Aboriginal and Torres Strait Islander health and wellbeing through the provision of comprehensive holistic primary health care, and by integrating and coordinating care and services. Many provide home and site visits; medical, public health and health promotion services; allied health; nursing services; assistance with making appointments and transport; help accessing childcare or dealing with the justice system; drug and alcohol services; and help with income support.

Collectively, we employ about 6,000 staff, 56 per cent of whom are Indigenous, making us the second largest employer of Aboriginal and Torres Strait Islander people in the country.

Any enquiries about this submission should be directed to:

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Introduction

NACCHO continue to have serious concerns about the proposed removal of the current Certificate IV Practice and introduction of the Diploma as the entry level qualification for Aboriginal and Torres Strait Islander Health Practitioners. As outlined in our previous submission, this change will cause significant disruption to our workforce, at a time when a strong Aboriginal and Torres Strait Islander health workforce is pivotal to further reducing the burden of disease faced by Aboriginal and Torres Strait Islander people as outlined in the *National Agreement on Closing the Gap 2020*.

NACCHO strongly advocates for the Certificate IV Practice qualification to remain the primary practitioner level qualification. NACCHO supports maintaining the Diploma of Practice as a way for more experienced Aboriginal Health Practitioners to gain advanced clinical skills, and in turn as a clinical pathway into higher education opportunities.

Deletion of either the Certificate IV Practice or the Diploma Practice will remove pathway options for Aboriginal and Torres Strait Islander students which is in contradiction to the aims of the *National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021–2031* (Health Workforce Plan) and fails to take into account the needs of current and future students and their employers.

NACCHO and its Members have provided this feedback to Skills IQ on several occasions and continue to firmly oppose the proposed changes. The proposal for an extended teach-out period does not adequately address the concerns raised. We elaborate on the reasons for our opposition below.

We would like to acknowledge the valuable input received from the following Affiliates and Members:

- Aboriginal Medical Services Alliance Northern Territory (AMSANT)*
- Victorian Aboriginal Community Controlled Health Organisation (VACCHO)
- Aboriginal Health Council of South Australia (AHCSA)
- Aboriginal Health Council of Western Australia (AHCWA)*
- Tasmanian Aboriginal Centre (TAC)
- Aboriginal Medical Service Redfern
- Apunipima Cape York Health Council
- Bega Garnbirringu Health Service
- Bullinah Aboriginal Health Service
- Cunnamulla Aboriginal Corporation for Health
- Central Australian Aboriginal Congress
- Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health
- Coonamble Aboriginal Medical Service
- Danila Dilba Health Service
- Derbarl Yerrigan Health Service Aboriginal Corporation
- Derby Aboriginal Health Service Council
- Dubbo Aboriginal Medical Service
- Galambila Aboriginal Health Service
- Geraldton Regional Aboriginal Medical Service
- Gippsland and East Gippsland Aboriginal Cooperative (GEGAC)*
- Gunditjmarra Aboriginal Cooperative
- Katungul Aboriginal Corporation Regional Health and Community Services

- Kimberly Aboriginal Medical Service (KAMS)*
- Nindila Training Centre*
- North Coast Aboriginal Corporation for Community Health
- Orange Aboriginal Medical Service
- Puntukurnu Aboriginal Medical Service
- Purple House
- South West Aboriginal Medical Service
- Victorian Aboriginal Health Service (VAHS)*
- Walhallow Aboriginal Health Corporation
- Waminda (South Coast Women's Health and Welfare Aboriginal Corporation)
- Werin Aboriginal Corporation
- Wirraka Maya Health Service

* Submissions attached

NACCHO also strongly supports the attached submissions prepared by AMSANT, AHCWA, KAMS, Nindila Training Centre, GEGAC, and VAHS.

Appropriate qualification level

NACCHO's position, and that of its Affiliates and Members, remains that the Certificate IV is the appropriate entry level practitioner qualification.

As outlined in our previous submission, the *Aboriginal and Torres Strait Islander Health Worker Industry Reference Committee Industry Skills Forecast – 2020 Update* notes the existing difficulties in attracting people to the Certificate IV.

Direct entry into a Diploma level qualification can present significant barriers for many potential participants, including language, literacy and numeracy (LLN) skills¹ and confidence to directly enrol in a Diploma rather than a pathway mechanism which is offered by the Certificate IV.

This is borne out by feedback from our Member services.

All our ACCHOs seek to recruit staff from their local communities. Over many years of experience, they have determined that a Certificate level training program is the best entry point for local people.

ACCHOs in rural and regional areas in particular noted that the Certificate IV is the most accessible qualification for local people, many of whom have not studied before, and who may not have schooling beyond Year 10.

The Certificate IV is a less onerous training load for those studying for the first time. Prospective students find it easier to navigate study at the Certificate level which is less academically complex and many ACCHOs use the Certificate IV as the default qualification for those entering traineeships with their organisation. It is critical as a starting point for many Aboriginal and Torres Strait Islander people who want to begin a career in their chosen field of interest.

Many Members noted that requiring a Diploma as the entry level qualification would be setting people up to fail, and that many of their staff would not be qualified today if a Diploma had been required. AHPs consulted by our Member services are not supportive of the Diploma as the base qualification. They informed Member services that the qualification is already challenging at the

¹ Inquiry into Adult Literacy and its Importance. Submission 75, Literacy for Life Foundation (p.10-11)
<https://www.aph.gov.au/DocumentStore.ashx?id=0f9d1283-2376-432f-85b2-3063c8f0f574&subId=705146>

Certificate IV level and that raising it to Diploma level would further disadvantage our most vulnerable young people. They advocated for qualifications and training to remain at the current level.

Members also noted that requiring people to do a Diploma as the base qualification will further compromise the ability of ACCHOs to engage and train an Aboriginal health workforce in their regional footprint, and they risk losing good potential AHPs if the proposed change is made.

One Member commented: *I feel it is important for the Committee to also understand the importance of a Certificate in an Aboriginal person's life and not to down-play the important role it plays, not only in the professional sense, but also in the personal sense. For many, achieving the Certificate is the beginning of their professional journey, not the end. They are role models for their communities, families and for the children who are watching them achieve a qualification. How powerful is that.*

Another member commented, *Aboriginal Health Workers are a very much appreciated and highly respected part of our operations and community, and we will continue to support our Cert III and Cert IV Practitioners as they have been and will continue on our legacy into the future.*

The proposal for an extended teach-out period for the Certificate IV does not mitigate the concerns raised, and is not supported by NACCHO, our Affiliates or Members.

NACCHO notes that should the IRC support industry feedback that the Certificate IV is the appropriate level for this qualification, a further review will be required to ensure that all the proposed qualifications are appropriately scaffolded through the pathway, meet industry requirements for our workforce needs, and that the underpinning knowledge and performance evidence of the units is at the appropriate level to meet these needs. We also note the feedback provided by KAMS and Nindila to this effect.

NACCHO recommend this work be undertaken by Technical Advisory Experts representative of industry to inform the IRC and to ensure good governance, inclusive of adequate timelines to consult with industry.

NACCHO, our Affiliates and Members do not support the units outlined in the proposed Diploma of Practice qualification being relabelled at Certificate IV level as proposed by this consultation.

Accessibility of training

The focus on the provision of culturally competent, holistic care, and accessibility for Aboriginal and Torres Strait Islander students remains central to this qualification.

It is for this reason that many Aboriginal and Torres Strait Islander workers prefer to get their education through an Aboriginal and Torres Strait Islander Community Controlled-RTO (ACCRTO). As noted in NACCHO's previous submission, these are usually small non-profit organisations with limited resources - some of our ACCRTOs have as few as two staff. Many are the training arm of an ACCHO - their sole purpose is to build a skilled Aboriginal and Torres Strait Islander workforce to support their communities.

ACCRTOs are essential to ensuring Aboriginal and Torres Strait Islander people have a culturally appropriate training option to support both student and employer through the study journey from enrolment, clinical placement to graduation.

ACCHOs that need to use mainstream RTOs for staff training continue to experience difficulties. Several Members noted that their experiences with mainstream RTOs was often problematic and

impacted on staff willingness and enthusiasm to study. One ACCHO has chosen to send staff to a more distant ACCRTO for study, rather than use the local mainstream RTO which does not provide a culturally safe training environment.

In its 6 July letter to the IRC, the Australian Aboriginal and Torres Strait Islander Health Practice Accreditation Committee (ATSIHPAC) expressed serious concerns about the impact proposed changes would have on the number of ACCRTOs delivering the base qualification for AHPs and the very serious implications this would have on this critical workforce.

NACCHO supports the concerns expressed by ATSIHPAC and the National Board. The proposed changes are very likely to mean fewer ACCRTOs deliver the base qualification, which will make the qualification less accessible for prospective Aboriginal and Torres Strait Islander students.

This will ultimately result in a decline in AHPs, which is in direct contrast to the Federal and State Governments' commitment to grow and strengthen the Aboriginal and Torres Strait Islander health workforce as committed to in the National Aboriginal and Torres Strait Islander Health Plan 2021 – 2031 and the Health Workforce Plan.

Priority Reform 2 of the National Agreement on Closing the Gap requires that we work in partnership to grow and strengthen the Aboriginal and Torres Strait Islander community-controlled sector. The proposed changes undermine this commitment.

Proposed deletion of qualifications

Certificate IV Practice

NACCHO again note the feedback provided by ATSIHPAC that deletion of the Certificate IV, *will have a significant impact on the health workforce and health outcomes of Aboriginal and Torres Strait Islander Peoples.*

It is NACCHO's firm view that this decision will further exacerbate the current skills shortage identified by Skills IQ in the *Aboriginal and Torres Strait Islander Health Worker Industry Reference Committee, Industry Skills Forecast – 2020 Update.*

The proposed deletion of the Certificate IV Practice runs contrary to objectives Health Workforce Plan, which emphasises strong and robust pathways for Aboriginal and Torres Strait Islander health workers, and the central role that AHPs play in ACCHOS. The Health Workforce Plan is the primary driver of workforce reforms in the Aboriginal and Torres Strait Islander health sector for the next decade. Any changes to the training package must align with the objectives of Health Workforce Plan.

Further, the proposal to delete the Certificate IV removes a key opportunity for Aboriginal and Torres Strait Islander people to access and build a career pathway and threatens our already vulnerable, ageing and diminishing Aboriginal Health Practitioner workforce.

The proposal for an extended teach-out period for the Certificate IV does not mitigate these concerns and is not supported by NACCHO, our Affiliates and Members.

Diploma (Practice)

The Skills IQ Consultation paper notes that should the Certificate IV Practice be maintained, the Diploma of Practice would be deleted. NACCHO, our Affiliates and Members oppose this proposal.

Our ACCHOs and ACCRTOs consider it their responsibility to facilitate strong and culturally safe education and training pathways for potential and current students and their communities - to inspire, motivate and empower them to grow personally and professionally.

Feedback received from our Members emphasised the importance of maintaining the Certificate IV and Diploma pathway to ensure we can build and strengthen a sustainable Aboriginal and Torres Strait Islander health workforce now and into the future.

This view mirrors the advice from ATSIPAC (7 May 2021) which, *strongly recommends that a Certificate IV in Practice is retained as part of the updated training package, alongside the proposed Diploma in Practice, so as to not jeopardise the Aboriginal and Torres Strait Islander Health Practitioner workforce and health outcomes.*

As outlined above, the Certificate IV offers an appropriate entry level learning pathway which should then lead onto the Diploma and other specialist health streams. Deletion of the Diploma of Practice would compromise clinical pathways, skill set development, and specialisation and articulation to higher education degree opportunities.

Retaining both qualifications ensures strong clinical training pathways for AHPs, improves accessibility for Aboriginal and Torres Strait Islander students and supports the gradual upgrading of qualifications over time.

Consultation Process

Again, NACCHO raises its concerns about the consultation process undertaken by Skills IQ.

Most recently, NACCHO expressed specific concerns about the presentation of information in the Skills IQ Consultation guide. The consultation questions as decided by the IRC were not correctly reflected, or even clear. There was biased presentation of the information contained in submissions received in the previous round of public consultations. In addition, the presentation of advice received from ATSIHPAC appeared to suggest that their support for the proposal is unequivocal, when it is not. In fact, ATSIHPAC expressed very clear reservations about the proposal, most significantly the impact these changes would have on the numbers of AHPs in the workforce, and on health outcomes for Aboriginal and Torres Strait Islander communities.

As with the earlier Validation Guide, NACCHO's significant feedback on the Consultation paper was not incorporated. As a member of the IRC, this is extremely concerning, and means a biased view has been presented which neither reflects the diversity of views of IRC members, nor allows people to make a fully informed decision about the proposal.

One Member noted that the Consultation Guide is not clear, and does not address the concerns raised. NACCHO agrees. We also draw your attention to the submissions from KAMS and Nindila (attached), which outline a number of fundamental errors and omissions in the Consultation Guide.

NACCHO is also very concerned about information recently circulated by other IRC members which is misleading and gives a false impression of support from our industry. Again, it presents a biased view, and does not allow those receiving this information to make a fully informed decision.

Despite significant feedback from NACCHO, Affiliates and Members, AMSs and ACCRTOs, that the Certificate IV Practice qualification should remain, this advice has been disregarded. These stakeholders are the key employers and trainers of Aboriginal Health Workers and Practitioners, and as such have a particular interest in ensuring the needs of current and future employees are met.

In addition to the feedback previously provided, Members expressed their overwhelming concern that the voice of industry has not been heard. But more specifically and more disappointingly - that the voices of AHPs, and the people and organisations who train and employ them are being deliberately ignored.

Recommendations

The proposal for an extended teach-out period for the Certificate IV does not mitigate the concerns raised by industry, and is not supported by NACCHO, our Affiliates and Members.

NACCHO recommend:

1. The Certificate IV remain as the primary entry level qualification.

This is in keeping with overwhelming feedback from industry received during public consultations, the recent determination on the Industry Award², and supports the objectives of the *National Aboriginal and Torres Strait Islander Health Plan 2021-2031* to grow and strengthen the Aboriginal and Torres Strait Islander health workforce. Further, it supports the objectives of the *National Agreement on Closing the Gap*.

2. The Diploma (Practice) should be retained. Further, it should be strengthened with specific leadership and advanced clinical streams that support skills development, career progression and advancement to higher degree qualifications such as nursing, medicine and allied health.

² <https://www.fairwork.gov.au/about-us/news-and-media-releases/website-news/changes-to-the-aboriginal-health-award>