



Vocational Education and Training (VET)
Workforce Productivity Commission Issues
Paper Submission

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Community Services and Health Industry Skills
Council

VOCATIONAL EDUCATION AND TRAINING (VET) WORKFORCE PRODUCTIVITY COMMISSION ISSUES PAPER SUBMISSION

THE ONGOING SUPPLY AND QUALITY OF VET PRACTITIONERS ARE CENTRAL TO WORKFORCE DEVELOPMENT IN THE COMMUNITY SERVICES AND HEALTH INDUSTRIES

Key points highlighted in this Submission include:

- The future VET workforce will need to grow in tandem to support the predicted growth in the community services and health industries.
- Future VET practitioners may increasingly be drawn from the community services and health industry workforce itself as a way of strengthening reforms. The extent to which VET teachers/practitioners require industry skill and knowledge means that pathways into VET roles – from community services and health roles – could be more widely established.
- Future roles should enhance innovative partnerships between enterprises and training providers and maximise the use of workplaces as learning environments.
- A VET teacher workforce that is capable of working across VET and higher education in a range of health and community services areas should assist in better articulation for community services and health roles.
- Competency frameworks are in place in the community services industry, including through vocational graduate level qualifications in the CHC08 Community Services Training Package, and should be retained.

BACKGROUND

The Community Services and Health Industry Skills Council (CS&HISC) was first established in the early nineties as the National Community Services and Health Industry Training Advisory Board. Over the past fifteen years, CS&HISC has used its unique position as a national body to lead the introduction of the national qualifications and competency standards in the health and community services industry. The ongoing supply and quality of VET practitioners are central to workforce development in the community services and health industries and the CS&HISC welcomes the Productivity Commission study into the VET workforce.

The CS&HISC also supports the Industry Skills Councils' collective submission to the Productivity Commission's Issues Paper on the Vocational Education Training Workforce. The CS&HISC submission is provided in addition to highlight issues specific to the community services and health industries.

CS&HISC INDUSTRY COVERAGE

The Australian community services and health industries employ almost 1.2 million workers. Our industries have experienced the fastest workforce growth of all Australian industries in the ten years to 2009, resulting in 20% of all new jobs and 410,800 new workers¹.

This is reflected in the number of publicly funded training positions for the health (HLT) and community services (CHC) Training Packages (see *Table 1*). This level of growth is predicted to continue with a further 211,000 jobs by 2014-2015.

Table 1 - Publicly funded RTO enrolments in CHC02/99 Community Services Training Package and HLT07/02 Health Training Package

	2002	2003	2004	2005	2006	2007	2008
CHC02/99	78,905	84,435	90,965	99,275	107,310	113,530	124,733
HLT07/02	155	6,345	10,270	13,275	13,495	15,855	35,629

Source: National Centre for Vocational Education and Research (NCVER), 'Course enrolments in Community Services and Health Training Packages 2008', req. no. 22862. NCVER, Adelaide.

Skills Australia further presents a scenario through *Australian Workforce Futures: A National Workforce Development Strategy*, released in March this year, where the community services industry is expected to grow second fastest out of all Australian industries at a rate of 4% per annum until 2025. The two highest growing occupations being welfare associate professionals (2.8% per annum) and carers and aids (2.6% per annum)². These occupational classifications reflect roles held by aged care workers, disability workers, mental health support workers, alcohol and other drugs workers, counselors and home and community care workers.

The future VET workforce will need to grow in tandem to support the predicted growth in the community services and health industries.

WORKFORCE DEVELOPMENT SUPPORTING FUTURE CLIENT SERVICES

In 2008, the CS&HISC released research identifying that for training and skill development to be successful in meeting the needs across the community services and health sectors and enterprises, key preconditions must be addressed. These preconditions include appropriate funding, employment structures, employee capacity to training, sectoral/group organisations and defined consumer profiles³.

Through this research, the CS&HISC signalled to government and industry that further reform is required to ensure community services and health enterprises are consistently able to implement new work roles and practices required to meet future client needs.

¹ *Australian Jobs 2010* www.deewr.gov.au/Employment/ResearchStatistics/Pages/AustralianJobs.aspx

² *Australian Workforce Futures: A National Workforce Development Strategy*, Skills Australia, 2010

³ *CS&HISC 2008, Identifying Paths to Skill Growth or Skill Recession: A literature review on workforce development in the community services and health industries, CS&HISC*

Increasing demand for health and community services is being driven by the ageing of the population, increasing rates of disability and persistent rates of chronic disease more prevalent in older age. Our workforce has approximately 40% of workers trained in the higher education sector (e.g. doctors, nurses and allied health professionals) with the remainder of the workforce either untrained or trained in the VET sector.

New combinations of workers and jobs are forming to support the shift in service delivery models that emphasise illness prevention, primary health care settings, community and home-based services and better co-ordination across acute/hospital and other services. This shift is also supported by the emerging rights based focus on delivery of services to people with disability and their families and carers.

We have noted in the CS&HISC's Environmental Scan 2009-2010, that senior assistance and client support roles will play a major role in supporting the shift in service delivery models. The following qualifications reflect the roles needed to support these new models:

- Certificate IV in Allied Health Assistance
- Certificate (IV in Aboriginal and/or Torres Strait Islander Primary Health Care (Practice)
- Certificate IV in Aboriginal and/or Torres Strait Islander primary Health (Community Care)
- Diploma in Aboriginal and/or Torres Strait Islander primary Health (Community Care)
- Certificate IV in Nursing (Enrolled/Division 2)
- Advanced IV in Mental Health
- Diploma in Mental Health
- Certificate IV in Aged Care
- Certificate IV in Disability
- Certificate IV in Community Services

Many of these qualifications reflect new roles to support new service models and include expanded and higher level functions and skills. A key feature of these roles and service models is the strengthened relationship between the senior assistance and client support functions and health and community services professionals. Role clarity and effective delegation and supervision are critical to this strengthened relationship.

As reforms in the community services and health industries take hold in the form of new service models, the VET workforce and practitioners will need to effectively understand and facilitate this relationship through the training and assessment process and in partnership with enterprises and industry stakeholders.

Future VET practitioners may increasingly be drawn from the community services and health industry workforce itself as a way of strengthening reforms. The extent to which VET teachers/practitioners require industry skill and knowledge means that pathways into VET roles – from community services and health roles – could be more widely established.

IMPROVING IMPLEMENTATION

A number of sectors need access to better training and assessment into the future. Currently poor implementation outcomes are often interpreted as being due to a lack of content in the qualifications and competency standards; however, this is not necessarily the case. Improved capacity in the VET workforce can play a part in improving implementation of training and assessment in the community services and health industries.

Examples of situations requiring improvements in implementation to support workforce development challenges identified in the CS&H ISC *Environmental Scan 2010*⁴ include the following:

- Public health employers nationally have identified variable capability of staff trained and assessed against the Certificate IV in Allied Health Assistance. This qualification is critical to the *increased use of assistant and advanced practitioner roles*, and solutions are required to improve consistency in training and assessment.
- Training and assessment against the disability group of qualifications in the CHC08 Community Services Training Package varies widely. Implementation of these qualifications is critical for disability sector development in terms of *addressing conditions, recruitment and retention*, as well as in meeting *increased complexity of client needs*.
- Recent funding programs for training have seen an increase in the number of RTOs delivering aged care qualifications, including through the jobseeker aspect of the Productivity Places Program and through the Better Skills Better Care funding administered by the Australian Government's Department of Health and Ageing (DoHA). The quality of training delivery must be maintained to support continued growth in this workforce and continued expansion of training delivery in priority areas for the industry.

All industry stakeholders should take steps to improve future implementation of CHC08 and HLT07 to address such workforce challenges. The future role of the VET workforce should be considered in relationship to broader stakeholder responsibilities, for example:

- Employers should ensure that the preconditions and capacity for effective training and other workforce development activities are in place to support skills growth.
- RTO's should identify and meet specific industry and enterprise requirements through continuous improvement.
- VET regulatory stakeholders, including the CS&HISC, state/territory training authorities, Skills Australia and the Department of Education, Employment and Workplace Relations (DEEWR), should identify opportunities to better address industry sector requirements through amendments to regulatory processes.
- New resources and strategies should be funded and developed by relevant stakeholders to support CHC08 and HLT07 implementation activities that specifically address industry workforce development challenges and implementations.

⁴ CS&H ISC *Environmental Scan 2010*

Improvements in implementation will be supported by better linkages between industry and the education sector. Despite the clear vocational focus of the VET sector, it is common for teacher training to be based around teaching and learning in institutional/classroom settings. However, workplaces provide legitimate and effective learning environments. Future roles should enhance innovative partnerships between enterprises and training providers and maximise the use of workplaces as learning environments.

INNOVATIVE WORKFORCE DEVELOPMENT

Australian Workforce Futures highlights the potential to use existing public funding for training as leverage for increased workforce development activity including helping “organisations tackle job design, work organisation, innovation and the effective management of workers”. Australian governments spend \$5.16 billion annually on vocational education and training.

The Australian Government's Skilling Australia for the Future policy has committed to augmenting this funding by about \$500 per annum between 2008 and 2013. Skills Australia recommends that this additional funding is continued to 2025 to deliver on workforce development objectives.

Innovative partnerships between industry and educational providers and a holistic approach to skills delivered are proposed as strategies to increase productivity. These strategies encourage workforce development activity beyond the delivery of qualifications only, as the major contribution of the education and training sector. This is encouraging for innovation in workforce development in the community services and health industries. Successful workforce development in the community services and health workforce will require VET practitioners to support a broader range of activity beyond delivery of qualifications only. These activities will include support for innovative workforce development in areas such as job design, recruitment and retention, better utilisation of existing skills as well as training and assessment.

ARTICULATION

Enhancement of the tertiary sector is another major recommendation, as set out in *Australian Workforce Futures*. Establishment of a tertiary education sector will see a future merger of arrangements for VET and higher education. The community services and health industries include large workforces trained in both sectors. New roles arising from service delivery reforms will result in new work roles and functions which may draw on elements traditionally placed in *either VET or higher education only*.

We are seeing new articulation arrangements between RTOs and universities e.g. enrolled nursing to registered nursing; allied health assisting to health degree/professional programs; and similar linkages in the early childhood education and care sector. These are important for the community services and health industries and fostering new careers to support workforce development. A VET teacher workforce that is capable of working across VET and higher education in a range of health and community services areas should assist in better articulation for community services and health roles.

HIGHER LEVEL VET QUALIFICATIONS

The issues paper poses the following questions in relation to higher level/vocational graduate level qualifications in Training Packages:

Are training packages still appropriate as a basis for designing vocational training arrangements? Is a shift away from competency based training at higher qualification levels desirable? Might it happen in the next five to ten years? If so, what implications, if any, might this have for demand for the VET workforce? (pg 18)

In specific response to these questions it is noted that there are several vocational graduate qualifications in the CHC08 Community Services Training Package for which there has been noted demand and these have been well received.

In the past the higher education sector has not had the capacity to provide all of the higher level skills needed in the community services industry especially. The vocational graduate qualifications in CHC08 should be seen as adding value and complementing higher education offerings in key areas e.g. statutory child protection.

The vocational graduate qualifications need to be given further time to contribute to emerging workforce development needs in the community services and health industry.

The health professions are grappling with the need to work across different functions; in a multi- or trans-disciplinary way. Each profession has its own capability framework informing delivery of qualifications in the higher education sector.

Health Workforce Australia is currently undertaking research into aspects of competency frameworks and the potential to apply these to the whole of the health industry. This research is being undertaken at a conceptual level irrespective of the roles of VET or higher education. Any progress on establishing such a framework is a long way off – however this debate further indicates the interest and value of competencies and their use for development of higher level skills.