

# Aboriginal and Torres Strait Islander Health Worker Qualifications Stakeholder Engagement Paper

The Aboriginal and Torres Strait Islander Health Worker Industry Reference Committee (IRC) has responsibility for seven qualifications, packaged in the HLT Health Training Package. The training products allocated to this IRC were last endorsed on 1 July 2013. The IRC has identified the need to review the qualifications that cater to this sector and submit a Case for Change to the Australian Industry and Skills Committee (AISC) in the current scheduled review period.

The VET qualifications that are to be considered for inclusion in the Case for Change are:

- **HLT20113 Certificate II in Aboriginal and/or Torres Strait Islander Primary Health Care**
- **HLT30113 Certificate III in Aboriginal and/or Torres Strait Islander Primary Health Care**
- **HLT40113 Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care**
- **HLT40213 Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care Practice**
- **HLT50113 Diploma of Aboriginal and/or Torres Strait Islander Primary Health Care**
- **HLT50213 Diploma of Aboriginal and/or Torres Strait Islander Primary Health Care Practice**
- **HLT60113 Advanced Diploma of Aboriginal and/or Torres Strait Islander Health Care.**

These qualifications are aligned to job roles in the following four types of Aboriginal Health Worker categories:

- *Aboriginal Community Health Worker/Aboriginal Community Controlled Health Worker:* This role provides access, liaison, health promotion and preventative health services to the Aboriginal community.
- *Aboriginal Hospital Liaison Officer:* This non-clinical role provides advocacy, support and liaison within an acute care health setting (for example, within hospitals) and multipurpose services.
- *Principal Aboriginal Health Worker:* This role provides relevant graduate tertiary-level clinical/professional services to the Aboriginal community.
- *Aboriginal and Torres Strait Islander Health Practitioner, Aboriginal Health Practitioner, Torres Strait Islander Health Practitioner (protected titles):* To operate in these roles a worker must be registered with the Aboriginal and Torres Strait Islander Health Practitioner Board of Australia. These roles provide direct clinical services to the Aboriginal community and hold a **Certificate IV in Aboriginal Primary Health Care Practice** qualification.

SkillsIQ, on behalf of the IRC, is seeking input from industry to capture perspectives on the issues raised by the IRC and any other feedback raised by industry. Feedback received will inform the development of a Case for Change to be submitted to the Australian Industry and Skills Committee (AISC) requesting an update to existing qualifications.

### Qualifications and Units of Competency

The IRC has identified skills gaps in the current qualifications relating to skills in:

- the general health and wellbeing of Aboriginal and Torres Strait Islander people;
- working with alcohol and other drugs;
- mental health;
- telehealth and e-health;
- family and domestic violence; and
- mandatory reporting for health workers.

Some of these gaps may be addressed by additional units of competency; or the addition of material to existing units of competency; or by importing units from other areas of the training package. The IRC is seeking stakeholder feedback on the skills gaps identified by industry and how these could best be addressed. The IRC is also seeking feedback on clinical placements and where they are appropriate within the qualifications within this sector.

- Are there skills gaps in the current qualifications and, if so, what are they?

Response:

Given that Aboriginal and Torres Strait Islander people experience poor oral health earlier in their lifespan and in greater severity and prevalence than the rest of the population, and being less likely to receive treatment to prevent or address poor oral health, oftentimes only accessing care in emergency hospitals, all relevant qualifications for Aboriginal and/or Torres Strait Islander Primary Health Care should require some overview to enable oral health screening to occur. The ADA recognises that there are a number of elective courses that are available for a range of these qualifications, but there should be a general oral health screening unit included as a core unit.

- Are additional units of competency needed in the areas listed above or could the gaps be addressed by strengthening existing units of competency?

Response:

See above response. In terms of implementation a strengthening of an existing unit of competency may be adequate although the ADA would like to examine the detail of that proposal if that approach was taken.



## Get Involved - Provide your Feedback

Feedback on this paper should be provided via email to SkillsIQ at [alexandra.cook@skillsiq.com.au](mailto:alexandra.cook@skillsiq.com.au) by Friday 15<sup>th</sup> December.

This feedback will then be considered by the IRC to inform the development of a Case for Change to be submitted to the AISC in early 2018.

Should you have any queries, please contact:

Alex Cook, Skills Engagement Executive, at the email above or by telephone at (02) 9392 8100.