

**HEALTH SERVICES UNION – SOUTH AUSTRALIA (HSUSA) SUBMISSION TO THE AUSTRALIAN HEALTH PRACTITIONER REGULATION AGENCY (AHPRA) ON CONSULTATION FOR THE ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH PRACTICE BOARD - CONSULTATION PAPER DATED 21 NOVEMBER 2011**

**1. INTRODUCTION**

The HSUSA represents the interests of a diverse range of health practitioners and employees in public and private health and community service sectors. We represent members covering a broad range of skills including radiographers, pathologists, disability workers, administrative workers, mental health workers, kitchen workers, cleaners, aboriginal health care workers and personal care attendants. The essential purpose of the HSUSA is to represent the interests of members in the workforce to improve member outcomes and contribute to the ongoing improvement of health and community care policy, services, and facilities for clients.

**2. WORKFORCE**

HSUSA members care for some of the most vulnerable members of the community in environments of high stress. Roles require not only technical specialist knowledge within the field but also empathy, concern and adherence to mandatory reporting requirements. Our members interact with their direct clients and also with family, friends, bureaucracy, police, and the broader community. Our research informs us that our members are passionate about the work they do and are attracted to the work because of the contribution they can make to the community. Our research also informs us that our Aboriginal Health Worker (AHW) members are concerned to ensure that impending national registration requirements do not disadvantage workers who at times have struggled to meet practitioner requirements established in other health professions who have long histories of social, education and political engagement in the community. Notwithstanding this concern, the HSUSA does not draw a distinction between levels of care and clinical responsibility to be exercised by AHWs.

The AHW workforce is a specialist workforce established to improve health outcomes for Aboriginal and Torres Strait Islander (ATSI) people. It is an eclectic workforce made up of people with myriad life experiences who bring those learned experiences to their work. We

note that issues regarding criminal history have been canvassed in previous consultations. In this regard we support the framework of a fair, transparent and open criminal history check however, reinforce other submissions noting the ATSI community's overrepresentation in the justice system. We submit that all circumstances regarding a person's history should be taken into account when considering registration.

### **3. NATIONAL ACCREDITATION**

The HSUSA is strong supporter of national accreditation as a means of genuinely recognising the vast skills Aboriginal Health Workers bring to the indigenous and non-indigenous community. We support the grandfathering arrangements canvassed in previous consultations for workers subject of registration who have broad experience in the field but do not yet hold a qualification. We further note the paucity of accessible training opportunities in remote areas and look forward to working constructively with stakeholders to ensure AHWs are provided opportunities to participate in training and development to achieve relevant qualifications in the future.

In relation to the current round of consultations regarding;

- Advertising guidelines;
- Code of conduct for registered health practitioners; and
- Guidelines for mandatory notifications

we note the Board's acknowledgement that the above three codes and guidelines are '*...common across the 10 health profession that are currently regulated...*' (Aboriginal and Torres Strait Islander Health Practice Board of Australia, 21/11/11, pg.1). Whilst we are in broad agreement with these proposals we note that existing practice areas have long histories of political, educational, social and technological engagement with the community. In this regard we say the proposed guidelines and codes should be read in context of the roles and responsibilities of Aboriginal Health Workers.

We attach current classification structures for Aboriginal Health Workers from the current Award establishing the skills and responsibilities to be exercised by AHWs.

The HSUSA thanks the Board for the opportunity to make comment regarding the proposed national registration requirements for ATSI health practitioners.

Jorge Navas  
Branch Secretary  
HSUSA  
9 January 2012

Enc.

# HSUSA ATTACHMENT A

## Schedule B—Classification Definitions

### B.1 Aboriginal Health Workers

**B.1.1 Aboriginal Health Worker Grade 1 / Aboriginal Community Health Worker Grade 1** means an employee in their first year of service who will generally have no direct experience in the provision of Aboriginal health services.

They will provide primary health services education and liaison duties under the direct supervision of an Aboriginal Health Worker Grade 2, 3 or 4.

**B.1.2 Aboriginal Health Worker Grade 2 / Aboriginal Community Health Worker Grade 2** means:

- (a) a person who has completed Certificate III in Aboriginal and/or Torres Strait Islander Primary Health Care or equivalent, or the required Aboriginal Community Health Worker qualification;
- (b) a person with other qualifications or experience deemed equivalent by an Aboriginal community controlled health service; or
- (c) an Aboriginal Health Worker Grade 1 who has been promoted to Aboriginal Health Worker Grade 2 after having been assessed by their employer as having the requisite competence. It would be expected that in all but exceptional circumstances such a person would have had a minimum of one year's experience at Grade 1.
- (d) An Aboriginal Health Worker Grade 2 is expected to provide a range of health functions of a clinical, preventative, rehabilitative or promotional nature under the general direction of other staff of the Aboriginal community controlled health service.
- (e) Duties include, under the direct supervision of an Aboriginal Health Worker Grade 3 or 4:
  - (i) assist in the provision of comprehensive primary health care and education of clients, in conjunction with other members of the health care team;
  - (ii) under instruction assist in the provision of standard medical treatments in accordance with established medical protocols;
  - (iii) collect and record data from clients which will assist in the diagnosis and management of common medical problems and medical emergencies;

- (iv) in line with policies and programs established by the health team, participate in educating and informing the community about preventative health measures; and
  - (v) undertake orientation and training programs as available.
- (f) An Aboriginal Health Worker or Aboriginal Community Health Worker required by State or Territory legislation to maintain registration as a condition of their employment who holds a Certificate III in Aboriginal and/or Torres Strait Islander Primary Health Care or equivalent or the required qualification for an Aboriginal Community Health Worker will be classified as no less than a Grade 2 Level 2 Aboriginal Health Worker/Aboriginal Community Health Worker.

It is desirable that staff at this grade should have Aboriginal knowledge and cultural skills—level 1.

### **B.1.3 An Aboriginal Health Worker Grade 3 is:**

- (g) A **Senior Aboriginal Health Worker**, a person who independently undertakes a full range of duties, including dealing with the most complex matters. A Senior AHW would hold either Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care (Practice) or Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care (Community) or equivalent. Workers will be expected to perform their duties with little supervision, and may be required to work as a sole practitioner remote from the health service; or
- (h) An **Aboriginal Health Worker—Team Leader**, a person who heads a small team of Aboriginal Health Workers. Workers at this level will be required to hold expert knowledge of Aboriginal health issues, as well as assisting with the planning and supervision of other workers' duties. An Aboriginal Health Worker—Team Leader would hold either Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care (Practice) or Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care (Community) or equivalent; or
- (i) An **Aboriginal Health Worker** who holds a Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care (Practice) or Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care (Community) or equivalent.

(Note: An Aboriginal Health Worker required by State or Territory legislation to maintain registration as a condition of their employment and who holds a Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care (Practice) or Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care

(Community) or equivalent must be classified as no less than a Grade 3 Level 2 Aboriginal Health Worker).

It is desirable that employees at this grade have Aboriginal knowledge and cultural skills—level 1.

**B.1.4 Aboriginal Health Worker Grade 4** means:

- (j) A person who performs a senior co-ordinating role in respect of Aboriginal Health Workers within an Aboriginal community controlled health service. An Aboriginal Health Worker with either a Diploma of Aboriginal and/or Torres Strait Islander Primary Health Care (Practice) or Diploma of Aboriginal and/or Torres Strait Islander Primary Health Care (Community) or other qualifications or experience deemed equivalent by the Aboriginal community controlled health service will be classified at this grade.
- (k) An Aboriginal Health Worker required by State or Territory legislation to maintain registration as a condition of their employment who holds a either Diploma of Aboriginal and/or Torres Strait Islander Primary Health Care (Practice) or Diploma of Aboriginal and/or Torres Strait Islander Primary Health Care (Community) or equivalent will be classified as no less than a Grade 4 Level 2 Aboriginal Health Worker and their classification descriptor will be Aboriginal Health Worker Practitioner Grade 4 Level 2.

It is desirable that staff at this grade should have Aboriginal knowledge and cultural skills—level 2.

Source: Aboriginal Community Controlled Health Services Award 2010