Submission to the Review of the National Registration and Accreditation Scheme for health professions

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The National Aboriginal and Torres Strait Islander Health Worker Association (NATSIHWA) welcomes the opportunity to provide a response to the Independent Review of the National Registration and Accreditation Scheme for health professions.

As the national peak body, NATSIHWA represents all Aboriginal and Torres Strait Islander Health Workers, including the Aboriginal and/or Torres Strait Islander Health Practitioners across Australia. Membership numbers have been growing steadily these past few months and our current total number is 700 of which there are 450 full members.

NATSIHWA sees the establishment of the Aboriginal and Torres Strait Islander Health Practice Board (ATSIHB) as the first step in recognising a profession of health workers that have provided comprehensive and culturally safe care for their communities at the primary health care levels in all urban, rural, regional and remote settings. However are also mindful that there are many more steps to take.

NATSIHWA supports the Aboriginal and Torres Strait Islander Health Practice Board in encouraging health workers to become registered through many of its national activities and NATSIHWA’s professional networking Forums that are held in each state and territory.

In 2011, a huge consultation process was undertaken with Aboriginal and Torres Strait Islander Health Workers, health services and other professionals to understand the health worker workforce for the purpose to inform developments of policies and strategies to strengthen and sustain the Aboriginal and Torres Strait Islander Health Worker workforce to deliver care in response to the known burden and distribution of disease in the Aboriginal and Torres Strait Islander population.\(^1\)

This contributed to establishing a part of the health worker workforce to become regulated under National Law. The emergence of the Aboriginal and Torres Strait Islander Health Practitioners since July 2012 a relatively new workforce that has not had the opportunity to grow and be nurtured as a growing workforce.
The 2011 “Growing Our Future: Final Report” also reports on the wide range of health worker roles, definitions, scopes of practice, education standards and career pathways, with limited career development opportunities. This is influenced by varying levels of respect and recognition of Aboriginal and Torres Strait Islander Health Workers by other professionals and employers, limited workforce information, and a lack of coordinated planning for the workforce. There is also a limited pipeline of new trainees and large numbers of long term vacant positions.

How then, could the emerging new workforce of health practitioners grow to the extent of projection of having an Aboriginal and Torres Strait Islander Health Practitioner workforce of about 1200 in the early establishment of the regulated health worker profession, when there has been very little investment to address those very matters. The skills and knowledge of the Aboriginal and Torres Strait Islander Health Worker and Health Practitioners are still being under utilised.

The investment by the Council of Australian Governments in 2008, to improve health and wellbeing outcomes through various National Partnerships and Agreements lack the equal investment of implementation workforce initiatives. Undertaking cost efficiencies of health workers within the health system has the potential to inform future supply and demand, resulting in modernising how data is collected and the real value of the health workers skills and knowledge.

The Review of Australian Government Health Workforce Program reports states that:

“The provision of safe and appropriate health care to the Australian community is dependent upon ensuring a capable and qualified health workforce. This is supported by the delivery of high quality education and training, and the application of consistent professional standards. The HWA modelling indicated the most effective policy intervention for meeting the increased demand in health services was adopting a process of reform and innovation to increase the productivity of the future workforce to meet future demand. Along with the use of technology, increased productivity can be gained through role re-design which will allow health practitioners to work at the fullest extent of their scope of practice, encourage greater role flexibility and multidisciplinary learning. Enabling practitioners to utilise more varied and transferable skills will also assist to retain the health workforce. It is critical that workforce innovation results in not only improved productivity, improved retention and job satisfaction but also that the safety and quality of care is not affected.”

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The expected impact of the National and Torres Strait Islander Health Workforce Strategic Framework 2011-2015 is to:

1. Increase and improve retention of the Aboriginal and Torres Strait Islander peoples into the health sector;
2. Improved delivery of training and education of Aboriginal and Torres Strait Islander peoples to prepare them for work in the health sector and support ongoing professional development in the workplace; and
3. Improved education and training of all health professionals to ensure they have the skills and understanding to provide the health services to meet the needs and expectations of Aboriginal and Torres Strait Islander peoples and to equip staff with appropriate cultural knowledge.

There needs to be evidence of a coordinated approach in development of this workforce to fully recognise the value of the whole health worker workforce.

The standards set for the Aboriginal and Torres Strait Islander Health Practitioner includes the qualifications being set at the minimum of a Primary Health Care Certificate 1V Practice. Achieving this qualification can take from twelve months to two years and is competency based. This means that their qualification requires undertaking of 800 hours and includes a continuing professional development component similar to other health professions. This supports our previous statement that the profession requires the relevant time to ensure that the workforce can be nurtured to grow. The accreditation process undertaken by the ATSIHPB for this profession ensures us that this higher level of education and training assists in maximising the protection of the public.

Through NATSIHWA’s national activities, we are informed of the shortage of health workers in various areas around Australia. NATSIHWA has provided opportunities for health workers to encourage further education and career pathways. These opportunities are limited to the health worker but are much more assessable to other professions.

The Aboriginal and Torres Strait Islander Health Worker Workforce has been identified as the specific workforce at the primary health care level. A strong health worker workforce increases the access for Aboriginal and Torres Strait Islander peoples at the primary health care level in all settings of urban, rural, regional and remote. Through early intervention and prevention strategies, the health worker plays an important and vital role in achieving outcomes towards “Closing the Gap” in health outcomes.

The workforce is being recognised as an ageing workforce, and requires better investments to improve career pathways for the health worker and health practitioner. It is a revolutionary step towards a sustainable workforce.
NATSIHWA continues to work with other national peaks on strategies to increase and sustain our workforce however limited funding to develop partnerships is a barrier. Investment dollars are finding their way into areas outside of the Aboriginal and Torres Strait Islander Health sector, when there is capable leadership within the Aboriginal and Torres Strait Islander sector to develop and drive the implementation plans.

The very positive and concrete component of the Aboriginal and Torres Strait Islander Health Practitioner’s standards is the protected title of “Aboriginal Health Practitioner, or Torres Strait Islander Practitioner, and/or Aboriginal and Torres Strait Islander Health Practitioner. No other profession can aim to rightfully own.

NATSIHWA strongly supports long term investment into many areas to support the growth and progression of the health workers into the health practitioner’s specialty stream and beyond.

In response to the options around National Boards as stated in the consultation paper, in considering the unique position of the Aboriginal and Torres Strait Islander Health Practice Board in having the cultural understanding of the history of the Aboriginal and Torres Strait Islander population, it is our strong view that this Board continues to operate to support and advance the profession.

The option of collapsing the smaller boards into one single board would be a huge risk to the growth of the workforce. It would diminish the voices of this specialty stream of health practitioners when it is only just emerging as a new regulated profession. Complaints and notifications could potentially risk the omission of the cultural assessment that only can be fully understood by this Board and Sector. You only need to look at the high incarceration rates of Indigenous people and the poorer outcomes to consider that it would be a step backwards to the whole process.
The Aboriginal and Torres Strait Islander Health Practice Board had contributions from the NT Health Worker Association, Health Workforce Australia and additional funds from undertaking projects to support establishment. The health professions that have been in existence for many years are more than likely to have had stronger foundations resulting in establishing at a quicker rate.

Option One of amalgamation would result in an increase of registration fees for the health practitioner and is seen as a high risk to this profession. NATSIHWA recommends that funding should continue under the COAG strategy and part of the Closing the Gap Initiative.

NATSIHWA continues to advocate and represent the Aboriginal and Torres Strait Islander Health Workforce including the Aboriginal and/or Torres Strait Islander Health Practitioners and to have the workforce professionally recognised as part of the wider Aboriginal and Torres Strait Islander Health Professional Workforce.

Yours sincerely

Zell Dodd
Chief Executive Officer
Friday, 10 October 2014

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1 Growing our Future – Final Report of the Aboriginal and Torres Strait Islander Health Worker Project 2011
2 Growing our Future – Final Report of the Aboriginal and Torres Strait Islander Health Worker Project 2011
3 Review of Australian Government Health Workforce Program
4 The National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework 2011-2015