



**NATSIHWA**

Ph: 02 6221 9220 / 1800 200 800

Fax: 02 6162 0851

PO Box 729, MAWSON ACT 2607

Level 1 Unit 2

31-37 Townshend Street

PHILLIP ACT 2606

[www.natsihwa.org.au](http://www.natsihwa.org.au)

National Aboriginal and Torres Strait Islander Health Worker Association

Response to HW2025 Selected Health Occupations: Aboriginal and Torres Strait Islander Health Worker/Practitioner Report for consultation with the Aboriginal and Torres Strait Islander Health Workforce Advisory Committee

---

NATSIHWA is a member of the Health Workforce Australia's Aboriginal and Torres Strait Islander Health Workforce Advisory Committee. The above report was not directly received within the NATSIHWA office and therefore the extended timeframe to provide a response is greatly appreciated.

NATSIHWA is the national peak body for Aboriginal and Torres Strait Islander Health Workers (ATSIHWs) and has a growing membership which reached 550 at the end of October 2013. NATSIHWA appreciates the opportunity to provide comments on behalf of its members however the opportunity to receive comments from its membership is lost due to the timeframe for this report.

Introduction:

- It is recognized that the workforce supply and demand projections are not produced in the report and it is assumed the rationale is that the Aboriginal and Torres Strait Islander Health Workforce, particularly, the Aboriginal and Torres Strait Islander Health Practitioners (ATSIHP) is the emerging new workforce that has registration, accreditation and continuing professional development processes similar to Nurses, Doctors and Allied Health Professionals which commenced in 2012.
- Acknowledging that the Certificate 1V ATSIH PHC Practice is the minimum qualification for registration, NATSIHWA would like clarification on "what is deemed the "equivalent" qualification and for providing that information to its members.

What do we know about this workforce P5:

- Are the RTO members of ATSIHRTONN that play a significant role in delivering the ATSIH Primary Health Care Certificates, included in the VET data collection (NCVER)?

ABS Census of Population & Housing P6:

- This definition in the first paragraph of “someone who liaises with patients etc” is a little ambiguous and could possibly lead to incorrect data - perhaps this deficit in data quality could be acknowledged? For example - How many of those who reported their occupation as an Aboriginal and Torres Strait Islander Health Worker have a primary health care qualification?
- The increase in ATSIH male workers of 72% seems high. It would be interesting to know the figures on the next census.

P11 Table 4:

- Under the Industry, could the number be allied health assistants and are they still Aboriginal and Torres Strait Islander Health Workers and could this also be the same for other industries?

P15 – Labour force status:

- ATSIHPB states that there is 300 at June 2013. We suggest that the report state the dates of accumulation ie July 2012 to June 2013 or whatever month is started registration.

P18 Table 10:

- The data here might also be reflecting that there could be a small number of ATSIHP are also Allied Health workers, ie Aboriginal and Torres Strait Islander Health workers who call themselves health workers but are also an Audiometrist.

P20 NCVET student numbers, last dot point:

- What is determined as equivalent and suggest that examples be provided for further clarification.

P20 Course comments:

- A number of ATSIHW and ATSIHP are enrolling in higher education such as Puggy Hunter Scholarships that are not only dedicated to the nursing field, other pathways are audiologists. They are still ATSIHW / ATSIHPs undertaking scholarships which are providing a career pathway. It is recommended that future reporting could provide ATSIHP transitioning into the other health professions.

Table 14 P23:

- What does ‘Indigenous Health’ refer to? It is not primary health care specific therefore may not be relevant to this report which is Aboriginal and Torres Strait Islander Health Worker specific.
- Table: Hospitals: is the data clear about Hospital Liaison Officers and do they have an ATSIH PHC qualification?

How can workforce activity be measured P24 -25:

- There is conflicting information or requirements of the health worker with regards to Medicare and registration eligibility. What level of clinical duties for Certificate 111 Health Workers perform? It is not likely that a high level of clinical duties, particularly the more invasive clinical duties would be performed as it would be out of their scope of practice. There may be ATSIHWs who do not have to use the new title of ATSIHP (organization may require them to stay in existing title) but have a Medicare provider number. There is a clause in the ATSIHP guidelines and should be inserted into this report.

What were the jurisdiction views P25:

- Issues affecting the workforce also include ATSIHW & ATSIHP are moving to higher pay in Medicare Local Areas and other fields outside of health such as Mining. The issue of pay scales for the Aboriginal and Torres Strait Islander Health Workers has been an ongoing issue for a number of years. Currently there is no incentive for ATSIHW to become registered if the pay scales are still inadequate. Male health workers are affected by this issue and are more likely to move to other areas of employment.
- There is inconsistencies across jurisdictions regarding clinical practice issues such as the Drugs & Poisons Act which legislations differ in each state and territory.
- Barriers to becoming a registered ATSIHP: Not really a work supply issue for Aboriginal and Torres Strait Islander Health Workers collectively, as you can still work as an Aboriginal and Torres Strait Islander Health Worker without being registered, you just can't be called a practitioner.
- NATSIHWA suggests that as the Peak Body, it be given time to collect views from its members to ensure accuracy of information.

HWA's assessment of this workforce P27:

Is the DEEWR occupation skill shortages report a public document and where can it be obtained.

Existing workforce position assessment scale – Green no current perceived shortage:

- There is Certificate 11 in Qld and is this consistent around the states.
- Recruitment: Some regional areas have recruited to positions advertised as Advanced Health Workers at the Trainee level, due to a shortage of applicants that hold the Cert 1V qualification, ie Qld and could be in other state structures.
- Trainee Health Workers have 18 months to obtain Cert 111 PHC to keep the position and often have to travel for block study for either one or two weeks away from home base.

How does Aboriginal and Torres Strait Islander Health Workers compare with other health occupations - P33:

- We suggest that the ATSIHWs and the ATSIHPs be separated into each of the two tables. Table 18 should be for the ATSIHPs and the non-registered health occupations include the ATSIHWs.

NATSIHWA has developed the Aboriginal and Torres Strait Islander Health Worker Professional Practice Framework which is a document written to provide a better understanding of the important work of ATSIHWs within the Health System. The workforce is specific to the Aboriginal and Torres Strait Islander population and plays a critical role in providing care at the primary health care level, in a culturally safe environment. The Jenny Mason reports that the capacity of this workforce requires building to address the health needs of Aboriginal and Torres Strait Islander peoples.

There are a number of titles for the ATSHW such as Hospital Liaison Officers, Family Health Workers, Chronic Disease workers who may not have reported their status as an Aboriginal Health Worker or a Torres Strait Islander Health Worker and this could impact on the data collected for this report.

NATSIHWA supports the NACCHO Ten Point Plan about Investing in Health Futures for generational change particularly in regards to building a sustainable workforce that meets the needs of Aboriginal and Torres Strait Islander people at the primary health care levels.

NATSIHWA would like the opportunity to distribute similar documents to its members in a timely manner to obtain a more informed view for reporting purposes.

Prepared by: Tricia Elarde, Senior Policy Officer, NATSIHWA  
[seniorpolicyofficer@natsihwa.org.au](mailto:seniorpolicyofficer@natsihwa.org.au)  
Ph: 02 6221 9227