



Australian Association of Social Workers

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Katy Gallagher
Chair, Australian Health Workforce Ministerial Council
PO Box 2089
Woden ACT 2606

17 July 2009

National Registration and Accreditation Scheme: Health Practitioner Regulation National Law 2009 Exposure Draft

Dear Minister Gallagher,

The Australian Association of Social Workers (AASW) is the professional body representing professional social workers in Australia. It is also the accrediting body for all tertiary social work programs in Australia and for the assessment of overseas qualified social workers.

Given that social work is not part of the National Registration and Accreditation Scheme, this will not be a lengthy submission. We are disappointed that social work has not been included among the professions to be registered, and we would welcome the opportunity to pursue registration in the future. In addition, this submission will focus on the areas where the registration of some health professions needs to take account of the non-registered professions.

Six Definitions

Health profession

The definition of 'health profession' should be consistent with more a common legal definition of profession, and not rely on the National Registration and Accreditation Scheme to inform the definition.

1. Those ten professions being registered in this stage should be referred to as '**registered professions**', and the four to follow on as '**to be registered professions**'. Professions not part of the scheme should be listed under a heading of **non-registered professions**.

Health service

The AASW would like to draw attention to the omission of social work from the list of roles in the health services. The AASW is disappointed that the Exposure Draft does not allow for the inclusion of social workers, a key profession in the allied health workforce. Social workers practice in hospitals, in community settings and in private practice. Their omission from the definition is a major weakness.



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The Exposure Draft is inconsistent with previous expositions of the health workforce, notably the *National Practice Standards for the Mental Health Workforce* (2002) which is endorsed by the Australian Health Ministers' Advisory Council. The lack of consistency would create confusion for patients and the community, other professional disciplines and those that train the future health workforce. It should be remedied by amending the definition section as outlined above and in the amendments below:

2. Other professions should be specifically identified, rather than subsumed in the definition of '*health service*', and their definition should be in accordance with other legal definitions of profession and consistent with other health workforce policies.
3. The list of other professions should include 'social worker', as these professionals are a key element of primary health care in hospitals, aged care facilities, community health centres, mental health services, and private practice.

The decision to register some, but not all professions means that different standards will be in place for different professions. Some will be managed by Boards of Registration, some by self-funded professional associations. Patients will be unclear of these differences, causing unnecessary confusion.

Division 2: 152

A centralised patient complaint and referral service should be informed of the role of non-registered professions within the health service, so that patients can be referred on appropriately to self-regulated professional associations in the event of complaints about professionals in non-registered professions.

This section is silent on complaints about professionals outside of the registered professions. This creates uncertainty with patients, who will not necessarily be aware of which professions are registered.

4. A section should be added to the this part of the legislation to say that the National Agency must have information about health professions outside of the National Registration and Accreditation Scheme's own procedures, so that the experience for patients is as simple as possible.

Registration of Social Work

Social workers practice side by side with regulated professions, but patients remain unsure of the level of protection offered by different professions in the public health system, in community or private practice settings. The AASW regulates the practice for social workers who choose to be members according to standards that are largely equal to those proposed in the exposure



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draft. However, these standards can only be applied to social workers who choose to become members of the AASW.

For example, the AASW Code of Ethics currently requires that its members address suspected or confirmed professional misconduct, incompetence, unethical behaviour or negligence by a colleague through the appropriate channels. However, as membership of the AASW is optional, the inclusion of social workers in the National Registration and Accreditation Scheme would significantly strengthen this standard and offer the public a much greater level of protection under the *Mandatory Reporting of Registrants* regime outlined in the Exposure Draft.

In addition, social work clients are among the most vulnerable in the community. Many are facing abnormal or crisis situations, such as divorce, illness, entry into aged care, or mourning the death of loved ones. This means that clients of social workers may not be in a position to:

- Make necessary enquiries about the qualifications and training of the practitioner;
- Assess the standard or appropriateness of the qualification; or
- Identify whether the practitioner is a member of a professional body and subject to an ethical code of practice.

Many governments, including those in the United Kingdom, Ireland, New Zealand, Canada, and the United States have recognised the need to register the practice of Social Work. The inclusion of social workers in an Australian system, and the protection of the title of social workers, would help to protect the interests, physical safety and mental wellbeing of the clients of social work services by:

- Preventing unqualified practitioners from calling themselves social workers, and leading clients or employers to believe that they are properly trained and qualified;
- Ensuring that all social workers are bound by common standards and dispute mechanisms, not only those who chose to join their professional association; and,
- Providing the public with certainty that social work professional standards meet their expectations.

In particular, children in the health system who may be at risk of abuse and neglect are referred to health service social workers for further assessment. Social workers play a critical role in deciding when to make a referral to statutory child protection and wellbeing services, and so mistakes and malpractice in this area put the wellbeing and lives of children at risk.



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Under the current regime, the AASW performs many elements of self-regulation, designed to ensure protection for patients and clients. These measures include:

- The formulation of social work practice standards, ensuring skills, knowledge and values necessary for good practice are clearly expressed and communicated to members and their employers;
- Accreditation of all schools of social work, ensuring that all graduates have high standards of knowledge and skills, and have at least 980 hours of field placements in social work settings, managed by experienced social workers who are AASW members;
- Accreditation of AASW members for eligibility for private practice under the Better Access program and the Enhanced Primary Care program, on behalf of the Department of Health and Ageing;
- Curriculum standards, requiring all Schools of Social Work to ensure that all their graduates meet minimum standards in the areas of mental health, child protection, cross-cultural practice and working with Indigenous communities;
- Continuing Professional Education, to ensure that all members develop their skills and keep abreast of new approaches; and,
- Imposing sanctions for negligent practice through the national ethics panels and adherence to the AASW code of ethics.

Although self-regulation has been highly effective for AASW members, we remain concerned about the regulation of non-members. Membership of the AASW is voluntary, and the AASW can only investigate the conduct of its own members.

Additionally, only members of the AASW are bound to the AASW Code of Ethics. Non-members cannot be held accountable to it for the standards of their individual practice. This arrangement does not provide the public with strong protection from low practice standards.

Inclusion of the social work profession in the National Registration and Accreditation Scheme would eliminate these issues by protecting registration of title, ensuring professional certification and providing a statutory obligation to investigate or sanction social workers who engage in negligent or unethical conduct where appropriate. As with other regulated health professions, and is the case for many social workers to choose to be AASW members, social workers would be required to access, at their own cost, supervision and training as part of their professional development.



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The AASW therefore recommends that the Exposure Draft be amended to include social workers in the proposed scheme at a later stage. This would greatly benefit health consumers and ensure that clients are more adequately protected from risk.

In addition to the specific recommendations above, the AASW recommends:

1. Extension of the National Registration and Accreditation Scheme to include social workers eligible for membership of the AASW, either in the second or a later phase of the scheme;
2. Health services employing social workers to require membership of the AASW, as a form of self-registration of the profession, if social work remains unregistered;
3. Legislation to protect the title of social worker, so the public can have confidence in the training and skills of those who use the title; and
4. Strategies in the development of future health policies to ensure that the unregistered health professions receive equal treatment to the registered ones.

Yours sincerely,

Kandie Allen-Kelly
Chief Executive Officer
Australian Association of Social Workers

Professor Bob Lonne
National President
Australian Association of Social Workers