

## The profession of social work and the unintended consequences of a two tiered system on workforce and service sustainability

The profession of social work continues to be unregistered in Australia through the National Registration and Accreditation Scheme (NRAS) operated by the Australian Health Practitioners Regulation Agency (AHPRA). There are some significant consequences for the profession, service delivery entities and the community, particularly vulnerable clients with whom social workers often work.



As the status and importance of NRAS evolves, it has come to light that there are many unintended consequences of this situation. Issues continue to emerge as the months pass and as professional registration gains a stronger hold on health and often welfare policy in Australia. This often occurs simply because even health bureaucracies assume that the social work profession is registered. A survey undertaken on behalf of the AASW by the Roy Morgan Company, showed that over 90% of a random selection of more than 18,000 Australians assumed that social workers could be prevented from practising if found guilty of a serious matter. It is therefore expected that many policy makers and bureaucrats would also not be aware of this, and so the unintended consequences of not registering social workers may not be taken into consideration as they write policy and regulation.

### Some recent examples of unintended consequences include:

- Health Workforce Australia's (HWA) decision to only include registered professions in the Health Professionals Prescribing Project. It is understandable that when considering a policy to extend prescribing of pharmaceutical products, governments would want to ensure that there are appropriate standards and an adequate complaints system in place for protecting the public. However, this decision means that social workers have become the only one of the five designated mental health professions not to be included in this project. This is likely to lead to a reduction in the mental health workforce as services commence without social workers due to them being excluded from performing these roles. This is a curious and awkward consequence as social workers continue to be included in the revamped National Practice Standards for the Mental Health Workforce.
- In Western Australia, recent tender documents for non-government mental health services determined that only AHPRA registered clinicians are eligible to provide services. This will severely limit the available workforce and eliminate one of the important and long standing professional groups, i.e. social workers
- In Queensland, social workers in 'fly in - fly out' positions in Indigenous communities have been told that paid supervision is only available for AHPRA registered professionals.

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## Some recent examples continued:

- A small but significant number of Medicare Locals indicate that only registered professionals can be 'members' of the company and many indicate that only registered professionals can provide services under some of the programs, including Access to Allied Psychological Services. Example: *The Hunter Medicare Local website indicates their membership is open to AHPRA registered professionals only: these membership guidelines technically exclude social workers. The funding guidelines for Medicare Locals show that they need to listen to their communities and have Community Advisory Committees etc. However, their decision to exclude social workers as members goes against these funding guidelines. Some social workers in the area have reported that the Hunter Medicare Local will not employ or engage Accredited Mental Health Social Workers in their counselling programs despite them being accredited with Medicare and being experienced clinicians working in the Area Health Service in the adult mental health sector. (Extract from AASW members email)*
- Deakin University advertises its Master of Clinical Governance for AHPRA registered professionals.
- In Queensland, the Health Department advertises jobs for social workers, psychologists, occupational therapists: but may indicate in the position description that only registered professionals can apply. This shows an ignorance of the professional landscape.
- Melbourne University Counselling Services recently advertised eligibility for its senior clinician role as 'registered with AHPRA'. This is despite there being a number of experienced, long-serving senior clinical social workers in their current workforce.
- It has been reported that the Research Advisory Board for the Australian Primary Health Care Research Institute is considering restricting new grant applications to AHPRA registered health professionals.
- The South Australian Department of Communities and Social Inclusion allocates \$900 per year to support continuing professional development for registered professionals. Again, this is despite many social workers occupying significant clinical service delivery positions.
- A program run by the Attorney General's Department in New South Wales called 'Work and Development Orders' (WDO) excludes social workers. This is a program specifically designed to assist people from marginal situations to discharge fines incurred in NSW through unpaid work and certain courses or treatments with approved organisations or practitioners. The orders are available to people from a range of disadvantaged categories or people experiencing acute economic hardship. For the purposes of a WDO, 'health practitioner' means a registered health professional (Work and Development Order Guidelines 2012). Clearly this program is hampered, and members of the public are disadvantaged by the non-inclusion of social workers who, arguably, are key professionals working in this sector.
- The Defence Community Organisation of the Department of Defence has recently allowed "human services professionals" to conduct social work assessments and write reports that are titled 'Defence Social Work Report'. This means unqualified people can be represented as 'social workers' and take this role away from qualified social workers.
- Queensland Health is offering Senior Clinical Research Fellowships up to AUD 850,000 per annum for five years, designed to "attract and retain researchers to Queensland who are international leaders in their field." The Rules document states to be eligible, candidates must "be a Clinician who is registered or eligible to be registered by the Australian Health Practitioner Regulation Authority (AHPRA) to practice in Australia". A small number of non-NRAS professionals have obtained these fellowships, however this is not the case in general.
- Windermere Foundation is awarding three Doctoral scholarships to 'support the professional development of Victorian health practitioners who will become future leaders in their profession', but the scholarships are only available to AHPRA registrants.
- In Western Australia, only registered health professions are authorised to witness documents such as Advanced Health Directives, Enduring Powers of Attorney and Enduring Powers of Guardianship, yet social workers are often the professionals engaged with people in relation to these issues, such as guardianship and future health treatment.

All of these examples will, if left unchecked, lead to further workforce shortages especially in rural and remote communities. This will occur as one of the key professions in the health care landscape is marginalised. The AASW and its members are being constantly informed of new ways in which the community will be disadvantaged by the non-inclusion of professional groups who are not registered. This is of particular concern where social workers practice in an area of health in which reform of the health sector is shifting focus from hospital to primary care and where social determinants are known to have an effect on health status and outcomes. Social workers are specifically trained and skilled in the social, community and family determinants of health status and outcomes. The exclusion of social workers via their non-inclusion in a national registration scheme will have a serious detrimental effect on the provision of workforce in Australia and consequently the reform of health services, particularly in the primary health care sector.

#### Potential consequences of non-registration:

- The omission of social workers from registration with the AHPRA has the major consequence of limiting service delivery options for people with health related issues. Access to social work services will be severely reduced if the social work profession is not registered.
- Social work is a key health service provider in hospitals and allied health related areas. Social work offers services which not only focus on the individual and their problems but focuses on the social, welfare, systemic, legal and structural issues impacting on the individual. They also play an important role in advocacy, liaison, referral, linkages and networking that other health professions do not address. Without these aspects of service delivery being included in the health package for individuals their health and wellbeing will be compromised.
- As an unregistered profession, Australian social workers may not have the same standing as their international colleagues when competing for jobs overseas and participating in international forums.
- Social workers are working in key welfare, legal and statutory areas which impact on the health, wellbeing and protection of children and adults. These areas generally do not employ other allied health professionals. Non-registration leaves these clients unprotected and without redress. Registration would give greater protection to clients who receive these services from social workers.
- For many years health services have included social workers and psychologists working alongside each other, providing similar services and doing joint group work. The consequence of non-registration for one of these professionals is that this is discriminatory and inequitable.