

# *NRAS and the National Regulation of Social Work: Implications for social workers in non health settings*

## Introduction

For much of our history, the Australian Association of Social Workers (AASW) has strived to achieve registration and protection of title for professional social workers because we strongly believe this is the best way to enhance public safety and uphold safe and ethical practice.

The [National Registration and Accreditation Scheme \(NRAS\)](#) has been established since 2010 to oversee the regulation of qualifications, standards and practice for health practitioners in Australia. Initially in 2010, ten professions became regulated by nationally consistent legislation, followed by an

additional four professions joining the National Scheme in 2012, due to their existing partial regulation in some states or territories at that time.

This resulted in a serious fragmentation in practitioner regulation across Australia, with the exclusion from NRAS of a range of health and human service professions, including social work, who are as equally committed to professional standards and the protection of the public as those professions included in the National Scheme.

The following table shows a snapshot of the current fragmented regulation of comparable health and allied health professions in Australia:

Included in NRAS	Excluded from NRAS
<ul style="list-style-type: none"> <li>• Psychologists</li> <li>• Occupational Therapists</li> <li>• Physiotherapists</li> <li>• Chiropractors</li> <li>• Dental Practitioners</li> <li>• Medical Practitioners</li> <li>• Nurses and Midwives</li> <li>• Optometrists</li> <li>• Osteopaths</li> <li>• Pharmacists</li> <li>• Podiatrists</li> <li>• Aboriginal and Torres Strait Islander Health Practitioners</li> <li>• Chinese Medicine Practitioners</li> <li>• Medical Radiation Practitioners</li> </ul>	<ul style="list-style-type: none"> <li>• Social Workers</li> <li>• Speech Pathologists</li> <li>• Dietitians</li> <li>• Audiologists</li> <li>• Sonographers</li> <li>• Orthotic Prosthetists</li> <li>• Perfusionists</li> <li>• Exercise and Sports Scientists</li> </ul>

The AASW is committed to the same objectives as the NRAS, which include:

- To help keep the public safe by ensuring that only practitioners who are suitably trained and qualified to practice in a competent and ethical manner are registered

- To facilitate workforce mobility for practitioners
- To facilitate provision of high quality continuing education and training for practitioners
- To enable the continuous development of a flexible workforce.

Indeed, social work as a profession is equally committed to these objectives, and wants to see the ethical and practice standards of our profession upheld.

The NRAS is currently the only pathway for achieving statutory professional standards for health and some human service professions in Australia. If social work was included, the scheme would then cover all social workers, and enhance public safety for those people who use social work services.

This is why the AASW continues to pursue the inclusion of social work in NRAS.

### **Social workers in health and non health settings**

While social workers have a direct influence on the health and wellbeing of Australia's most vulnerable people every day, they undertake this work across a myriad of settings.

Regardless of the setting, social work typically situates its efforts within human rights and health promotion frameworks which relate health to people's broader physical, mental, social, political and environmental contexts.

In all settings, social work practice is directed towards improving the health and wellbeing outcomes for individuals, their families and the community.

Social workers work across the continuum of health care and in service settings such as community health, acute inpatient, rehabilitation, health promotion, mental health, end of life (palliative care) services, veterans' affairs, aged care and Aboriginal and Torres Strait Islander health. Social workers also practice outside the traditional health sector, in services such as asylum seeker and refugee centres, domestic and family violence services, youth services, disability services, homelessness services, child protection agencies, schools, prisons, and increasingly as self-employed practitioners.

Some social workers in non health settings have raised concerns about the inclusion of social work under a National Registration and Accreditation Scheme.

The AASW acknowledges the critical role of social work in community development and social change, and the pursuit for inclusion of social work in the NRAS does not invalidate the integrity or the importance of the social work role in non health settings. Inclusion in NRAS would not need to curtail or be at the expense of unique and innovative social work practice methods and practice settings.

Rather, our common goal is our collective commitment to professional standards. Social work as a profession, regardless of the setting in which social workers work, is committed to high standards, ethical practice and protection of the public. NRAS is currently the only system available in Australia to fulfil these commitments.

Many of our international social work colleagues in Europe, the UK and New Zealand have been successful in becoming registered as part of health and social care (UK) and community (NZ) schemes. In Australia we do not currently have similar options. Inclusion in the NRAS is currently the only means for achieving adequate regulation of professional standards for the social work profession. It would cover all social workers, and ensure public safety for all those people who use social work services, but would not alter or affect the methods and approaches of social work practice outside of the traditional health sector.

### **National registration is the safest way to protect vulnerable Australians**

All members of the social work profession in Australia would be best regulated within a single, national regulatory scheme. The argument for sectional regulation of social workers is unsound because of the mobility of the social work profession across the diverse areas of health and human services delivery. Sectional regulation could not guard against rogue practitioners freely taking up work in other sectors when they have professional misconduct findings against them.

Statutory regulation, that is, Registration and Accreditation through a scheme such as the National registration and Accreditation Scheme (NRAS) is primarily about providing protection for

clients and greater certainty for employers. A statutory model of regulation will provide a legally enforceable set of probity, qualification and practice standards for entry into the profession and maintenance of continuing professional development as a requirement for maintaining registration and accreditation. It will therefore provide members of the public with greater confidence that a person using the title 'social worker' is qualified and conforms to ethical practice.

Statutory registration and accreditation also provide a registration board with powers to investigate

complaints and legally enforceable penalties for practitioners who breach competency and ethical standards, including removal from the register of practitioners. This makes it less likely that a person engaging in incompetent or unethical practice will move to another position without detection.

The following table demonstrates how NRAS compares with sectional regulatory options (such as voluntary self-regulation or sectional application of a national code of conduct) on some of the most important measures which serve to mitigate the risk of harm to vulnerable Australians:

Requirements to ensure the safety of the public from incompetent, unethical and illegal practices	NRAS**	Voluntary self-regulation*	National Code of Conduct
Accreditation standards to ensure that only competent professionals enter the labour market	✓	✓	✗
Fitness to practice requirements including criminal checks and declarations of diminished intellectual or physical capacity are required prior to practice	✓	✗	✗
Accountability to a dedicated professional code of ethics	✓	✓	✗
Adherence to best practice professional standards including professional supervision requirements for all social workers	✓	✓	✗
Continuing professional education programs that ensure all social workers have contemporary expertise	✓	✓	✗
Regulations regarding recency of practice	✓	✗	✗
Provisional practice is available for workers requiring supervision to meet minimum practice standards	✓	✓	✗
The authority to remove incompetent or unethical practitioners from the workforce	✓	✗	✓

\*\*Covers all of the social work profession

\*Covers only one third of the current social work workforce

## The problem with the status quo

“(The current) situation risks clients being deceived or making assumptions about the qualifications, training, skills and ethical obligations of those represented as social workers. It also reinforces the public and media perception that anyone can do ‘social work’ ...<sup>1</sup>

Social workers’ influence over people’s lives means that professionalisation and scrutiny of the social

work profession on a national basis must be ensured. The penalties for maintaining the *status quo* would be felt directly and over long periods of time, by members of the public who are subject to sub-standard, unethical or unqualified practice.

The social work profession is ready to embrace a national regulatory framework for the benefit of its clients and the Australian community.

<sup>1</sup> Swain, P (2001). *Business Under New Management – lessons from Canada on regulation of the social work profession.*