

Inquiry into the delivery of vocational education and training in regional, rural, and remote Queensland

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Submission to

The Education, Employment and Training Committee

*Inquiry into the delivery of VET in regional, rural and
remote Queensland*

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submission

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Introduction

The Queensland Nurses and Midwives' Union (QNMU) thanks the *Education, Employment and Training Committee* for the opportunity to comment on the Inquiry into the delivery of VET in regional, rural and remote Queensland.

Nursing and midwifery is the largest occupational group in Queensland Health (QH) and one of the largest across the Queensland government. The QNMU is the principal health union in Queensland covering all classifications of workers that make up the nursing and midwifery workforce including registered nurses (RN), midwives, nurse practitioners (NP) enrolled nurses (EN) and assistants in nursing (AIN) who are employed in the public, private and not-for-profit health sectors including aged care.

Our more than 68,000 members work across a variety of settings from single person operations to large health and non-health institutions, and in a full range of classifications from entry level trainees to senior management. The vast majority of nurses and midwives in Queensland are members of the QNMU. As the Queensland state branch of the Australian Nursing and Midwifery Federation, the QNMU is the peak professional body for nurses and midwives in Queensland.

Through our submissions and other initiatives, the QNMU expresses our commitment to working in partnership with Aboriginal and Torres Strait Islander peoples to achieve health equity and ensure the voices of Aboriginal and Torres Strait Islander nurses and midwives are heard. The QNMU supports the Uluru Statement from the Heart and the call for a First Nations Voice enshrined in our Constitution. The QNMU acknowledges the lands on which we work and meet always was, and always will be, Aboriginal and Torres Strait Islander land.

Overview of the review

Queensland is currently experiencing a skills shortage in a number of key areas, with the health sector particularly facing major current and future workforce issues. This inquiry explicitly focusses on the public provision of VET services in regional, rural and remote locations, and also issues in the provision to training to Aboriginal and Torres Strait Islander people.

There are a number of issues which impact on the effective provision of services – for example the targeting of appropriate skills, the provision of local programs (both from private and public providers), the transition of participants from VET to Tertiary qualifications and the specific needs of Aboriginal and Torres Strait islander peoples. While these issues are ever present across the sector, they are more extreme in regional, rural and remote locations due, at least in part to factors of distance and low population which place constraints on the service provision of major training facilities challenging due to cost effectiveness considerations.

From a health perspective the current challenges in recruiting Aboriginal and Torres Strait Islander staff not only has an overall impact on health staffing but more importantly impacts the capacity for providing culturally safe health facilities for staff and patients, and thus the provision of quality health care.

In looking at challenges for the sector, the recent injection of major funding for the TAFE sector from the Commonwealth (under the Skills Initiative from the 2022 budget) and associated partnerships with State governments will facilitate, through Fee-Free TAFE places, increased skills in the sector. This also will provide an opportunity for the TAFE sector to focus on other challenges that have, to date, constrained delivery of training outcomes, preparing for its enhanced role into the future.

Recommendation

The QNMU recommends:

- That TAFE initiate discussions with Universities and peak bodies such as the QNMU to consider strategies through which issues such as career pathways and recognition of prior learning could be addressed.

Introduction

There is a current recognition of a major skills crisis in Australia with the health sector facing particular issues, exacerbated during the pandemic. Current and projected workforce issues are a major consideration in many areas, with Queensland Health, for example, currently developing a new workforce strategy. The VET sector plays a major role in the skills development pathway for the future workforce.

While the issues faced in regional, rural and remote Queensland may be similar to those faced overall, factors of low population and distance make these more extreme than in metropolitan areas. The focus on Aboriginal and Torres Strait Islander workforce is particularly important. The National Aboriginal Community Controlled Health sector faces extreme pressures with difficulties accessing staff, particularly Aboriginal and Torres Strait Islander health workers. These skills shortages also impact on the capacity for all health facilities to provide culturally safe workplaces and thus quality health outcomes.

The constraints on regional delivery of training also highlights the natural tension for the TAFE system between the delivery of quality VET education, balanced against the cost effectiveness of such services is likely to be an issue for TAFE. With smaller student numbers in regional, rural and remote areas accessing training it is far more difficult to operate in a cost-effective manner and provide a reasonable range of training options.

Within the health sector some of the key factors faced in developing a health workforce include both entry into the VET system and then transition pathways between the VET and the tertiary systems as potentially future staff progress their training and careers. This could be an articulation pathway that begins with certificates for Assistants in Nursing¹, flows on to diplomas for Enrolled Nurses and then degree courses for Registered Nurses and Midwives. There is a level of interaction between such areas adding complexity to their resolution. For example, where there is progression from a TAFE to a tertiary qualification (such as from an Enrolled to Registered Nurse) the level of recognition of prior learning (RPL) from the initial qualification will impact on both the time studying for a Bachelor of Nursing and also the overall cost of training, potentially placing disincentives on such options for students.

These key issues are briefly overviewed below, as they are relevant to the questions raised across the inquiry. These comments will then be followed by a specific focus on the questions raised for formal comment.

Interestingly a recent initiative by the Commonwealth and State Government relates to Fee-Free TAFE in Queensland (The Hon Anastacia Palaszczuk MP, 2022) will enhance uptake of TAFE training. This initiative clearly recognises the importance of the TAFE sector in addressing skills shortages in the health sector and the impact that the cost of fees is a major constraint to enrolments. This is discussed further in response to Question 5 below.

Transition Pathways

It is important to have clear pathways to training, to both encourage students to commence a course where they see immediate and future career prospects but also to address a key role of TAFE in preparing students to be work ready and addressing skill needs in the economy. However, for these pathways to be sustainable, there needs to be a good link between training provided and employment opportunities as part of local, state and national workforce planning processes where consideration and planning around supply and demand issues is critical. We provide the following examples of issues with transition pathways currently experienced:

Pathways within a work environment - On completing a Diploma of Nursing through TAFE, new graduates are qualified to seek registration as an Enrolled Nurse (EN). ENs provide care to patients under the supervision of a Registered Nurse (RN). As there is a critical shortage of RNs, ENs may be limited in their role and job development as they do not have adequate supervision due to RN shortages.

Transition from Enrolled to Registered Nurse – moving from an 18 months course to the undertaking a three year degree course. Although universities suggest there are

¹ Or however titled, e.g. personal care workers who work under the delegation and supervision of a registered nurse.

options to reduce the study time and cost through recognition of prior learning (RPL) discussions suggest that this is limited and, in many cases, not available. This makes this transition prohibitive for many potential students.

Nurses in the aged care system – The recognised shortage of RNs and ENs in the aged care system also impacts on attracting and retaining Enrolled Nurses in that system. Without the required supervisory support, this places Enrolled Nurses and Assistants in Nursing (AIN) under additional pressure where they may not be adequately experienced or qualified to undertake tasks.

Further, there is a need to enhance the skills mix (i.e., proportion of RNs, ENs and AINs) within the aged care system as this has immediate implications on the level of care as well as longer term implications particularly in meeting the targeted levels of RNs in the system. The Australian Nurses and Midwives Federation (ANMF) regards an appropriate skill mix of RNs, ENs and AINs as 30%, 20% and 50% respectively (Peters, Marnie & Butler, 2021). Without adequate RNs in the aged care system it is likely to become increasingly difficult to recruit RNs as they will put their licence to practice at risk because they do not have the skill mix to delegate safely. The VET sector is a critical one to assist, especially to increase EN training and availability.

To address such issues, better communication, as part of broader workforce planning processes, between Registered Training Organisations (RTOs) and employers is needed – including placing some accountability on RTOs regarding targeted training for job readiness.

Recognition of Prior Learning (RPL)

The cost of training is recognised as a major constraint for people entering the VET sector. For example, undertaking a Diploma of Nursing can cost in excess of \$10,000 and requires studying for 18 months. While more recently the broadening of online courses does mean such study does not require relocation, it is still a major investment, and, given the major skills shortage in the health area, could be seen as an area for further consideration of measures like targeted government intervention for payment of course costs.

This is particularly an issue for ENs who, after working as an EN, may wish to upskill and study a Bachelor of Nursing to become a Registered Nurse. Many universities do have processes through which they make recognition of prior learning, but these have specific application processes and may not be available for all courses. Clear and consistent articulation pathways to facilitate career advancement are essential.

There are several approaches adopted across different universities (TAFE Courses Australia, 2023). For example, Deakin University has formally partnered with a number of TAFE providers to facilitate a smoother transition pathway in moving from

TAFE to Tertiary. A different approach is seen in Queensland's Griffith University which offers students a number of pathways to admission:

- Bridging and Preparatory Programs – These can include short courses in English and Maths before the formal course starts.
- Preparation – with the completion of a Certificate IV in Adult Tertiary Preparation there is guaranteed entry to *some* degree programs, but not all.
- Griffith College – links between some Diploma course completion and entry to associated degree programs.

However, within the QNMU, it is clear from members that there are frequent difficulties in accessing RPL for an Enrolled Nurse position moving to completing a Bachelor of Nursing, generally finding that as well as completing the 2 required qualifications, they had to complete all subjects and also make full payment for both courses. Clearly, more streamlined, standardised and efficient articulation processes are needed and will need the cooperation of government, educational organisations, employers and regulators.

While accessing RPL can be a smooth process where there is a formal agreed statement of RPL from a completed course, it clearly is far more difficult when there are not agreed processes, or the application is relying on a claim of demonstrated experience. This is also more difficult when there is a longer time gap between the two periods of study.

Given the future needs for increased training of staff for the health sector, formal discussions between TAFE and Universities (and regulators such as the Australian Nursing and Midwifery Accreditation Council [ANMAC] and the Australian Skills Quality Authority [ASQA]), particularly those offering courses available to those studying from regional, rural and remote locations, should be progressed to identify possible strategies, to aid in PRL for students transitioning into tertiary study.

Internet Availability

One of the changes that occurred during COVID-19 was a move to greater online learning options. While online study options does make courses more available for those studying in regional, rural and remote areas, effective study does require high quality internet – not always available in regional areas. While this can be addressed by the provision of locations for available internet (either through libraries or at locations provided by TAFE or other providers) it does impose a limitation of those studying online, along with the lost benefits of more flexible communications both between students and staff and between students, which are important to the learning experience.

These issues relevant to the public provision of VET will be included in the discussion under the specific questions, below.

1. The role of public providers in VET delivery in rural, remote and regional Queensland

In the current skills crisis, workforce issues are increasingly coming to attention in fields such as health and education, with shortages more extreme in regional, rural and remote locations. The VET sector provides important training with the capacity to contribute to the resolution of these issues.

This Inquiry is focussing on the role of public providers in VET delivery (TAFE and other Government providers) in rural, remote and regional Queensland. It is firstly useful to consider VET delivery between public and private providers. According to data from the Department of Employment, Small Business and Training (Department of Employment, Small Business and Training, 2022), there are some differences in enrolment demographics from public and private providers.

While higher levels of student enrolment for private providers were observed, this difference does appear to have reduced over time. For example, in 2017/18 public enrolments were 53.4% the number of private enrolments, with this increasing to 71.8% in 2021/2. For Indigenous students the increase was lesser with the shift moving from 44.5% to 53.5%.

With regard to regional participation with public providers, overview data (Figure 1 below) shows the predominance of enrolments in South East Queensland and metropolitan areas. However, when Aboriginal and Torres Strait Islander students are profiled, the highest density of enrolment is in Far North Queensland. With such trends an overarching consideration must be the maintenance of quality and targeted training outcomes. Figure 2 provides more detail on this for Aboriginal and Torres Strait Islander students in Far North Queensland. While there has been a decrease in “General Education and Training” and also “Primary Industry” there has been some increase in both the “Health” and “Community Services” areas.

Figure 1 TAFE and other Government providers – student count by Queensland regions for (a) All students, and (b) Aboriginal and Torres Strait Islander students.

(a)

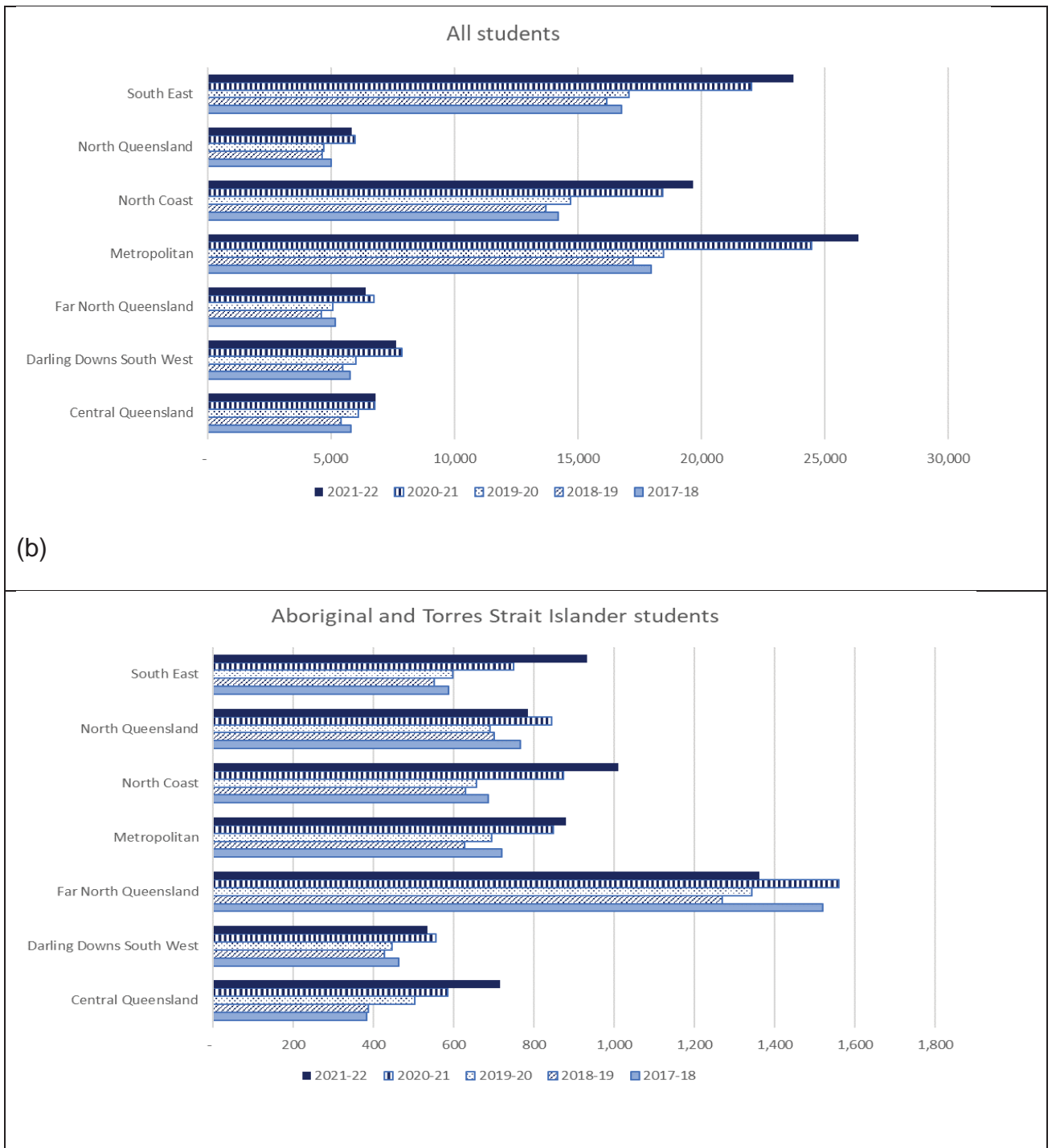
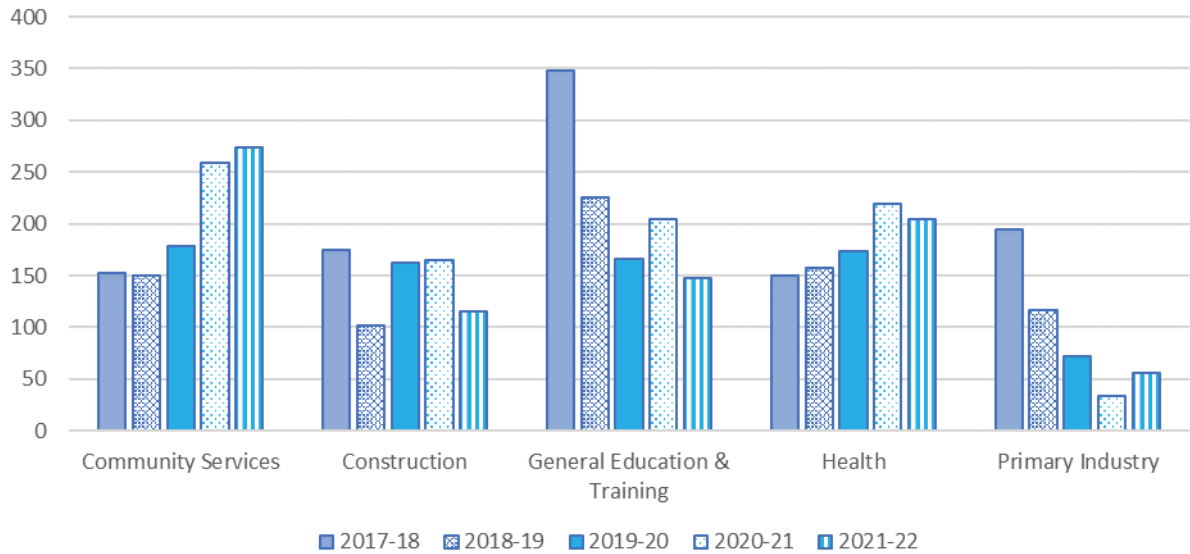


Figure 2 TAFE and other Government providers in Far North Queensland – student count for Aboriginal and Torres Strait Islander students by selected industry areas.

FNQ public providers - student count
Aboriginal & Torres Strait Islander students



In looking at completions these follow a relatively similar pattern, with, over this time period, a slight decline particularly in the early years of COVID-19. While there are a broad range of training options offered by TAFE and other Government providers, from the health perspective these largely provide training for positions as an Enrolled Nurse or Aboriginal and Torres Strait Islander Health Worker. The table below summarises the study requirements of these 2 courses (TAFE Queensland, 2023a), and highlights the significant commitment and cost of both courses. It is noted that the salary range for an Enrolled Nurse ranges from \$49,832 – 52,421, and Nursing Assistants (or however titled) from \$45,937 - \$48,927, not including any additional penalty rates (Australian Nursing & Midwifery Federation, 2022):

<p>Diploma of Nursing</p> <ul style="list-style-type: none"> • On Campus or Online, 18 months • \$23,505 full fee, \$12,605 concession – unless subsidised • Career option - Enrolled Nurse 	<p>Certificate IV in Aboriginal and Torres Strait Islander Primary Health Care</p> <ul style="list-style-type: none"> • On campus study at FNQ TAFE • Full fee, \$9 550 – unless subsidised • Career options – community care worker
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Thus, while there is a good availability of course provision by TAFE, further enrolments are desirable, particularly in regional areas and by Aboriginal and Torres Strait Islander peoples.

2. The major barriers to the provision of localised and place-based VET, and priority areas and cohorts in Queensland

Given the low population across regional, rural and remote communities in Queensland, the capacity for the provision of localised and place-based VET training will be limited. One way to increase some access is to facilitate quality internet access for potential students, supporting greater uptake of online study options.

The overall satellite model, where a major TAFE centre provider establishes links to smaller regional centres by providing internet access and facilitating online study may not be possible to service all communities, with a more realistic option being to reduce the distance for students to the nearest centre through which they can access training.

A potential concern with some provision to small centres could be through private RTOs providing targeted courses to a smaller community. The challenge in this is whether these courses are appropriate for all participants and whether they are well linked to potential skills development and real employment opportunities. This does raise the issue of market failure – for example, is it viable for a private RTO to set up a commercial business in a small regional/remote location, and can this business provide appropriate and quality training catering to the diverse needs of a limited participant supply. This does suggest, where there is a need for a significant supply of trained staff in regional, rural and remote locations, that this will not be an economically viable market opportunity, and there may be a need at some level for government intervention. The recent Government Fee-Free TAFE initiative is a good first step in this area.

3. Existing programs that might assist in reducing barriers or supporting priority cohorts in accessing localised and place-based VET

The Certificate 3 Guarantee

One positive program that the QNMU has had involvement in is the Certificate 3 Guarantee (TAFE Queensland, 2023b). In this program eligible applicants can gain support to complete a first qualification (generally a Certificate III).

The Certificate 3 Guarantee supports eligible individuals to complete their first post-school certificate III qualification. There are a range of very positive aspects to this program, that also address some of the issues raised above.

Students can select the Registered Training Organisation (RTO) they want to work with from an approved list by the Department of Small Business Employment and Training (the Department) after initial applications and assessment. In the assessment process the Department works to support partnerships between Community Based

Organisations (CBO) and RTOs. This facilitates placed-based activities but importantly also adds a very practical outcomes-focussed perspective to the initiative.

While the student does make a contribution to their training there is a subsidy, agreed by the Department, that reduces this cost. The level of this government contribution relates to a number of factors related to identified government priorities, including:

- The importance of the selected training, for example training that aligns with important industry and economic needs will hold a higher priority.
- A higher subsidy will be paid to support disadvantaged (concessional) learners.
- Training in identified country and remote areas of Queensland will also attract a higher subsidy.

The clear links between the RTOs and outcome-based activities is very important in moving students from training to job ready. Under this program there is also a formal loop assessing the training completions through their program, adding an important accountability aspect.

The Certificate 3 Guarantee program also has a strong focus on supporting socioeconomically disadvantaged groups, and often associated with this, prioritises activities in regional and remote areas of Queensland, thus also adding opportunities for students who may find it very difficult to enter the VET system.

Under the new Fee-Free TAFE program being run in 2023 this program will be able to cover the full costs of training for approved applicants, adding to its capacity to enhance training outcomes, increasing the skilling outcomes from the program.

One of the remaining issues, common across most areas considered, are issues with RPL. After completing initial training, with a Certificate III being an entry level qualification, it is desirable for people to further develop their skills and qualifications. We provide the following case study as an example:

Member case example

Consider an Enrolled Nurse who has extensive experience in the position for 15 years. This nurse recognises that she is at a point where she wishes to upskill, thus leaving a paid position, or studying part time, to undertake a nursing degree in the tertiary system.

Past evidence indicates that she is unlikely to receive any RPL, even though she has worked in the health system for 15 years. This means that there will be no reduction in either cost of enrolment or the length of time required to study.

Such as scenario represents a significant disincentive against an Enrolled Nurse making this step – a step that would require a significant student contribution given they are moving to a three-year degree course and would need to support themselves and potentially their family during this study. Even moving to part-time

employment would result in financial loss (wages), decreased superannuation contributions and long service leave entitlements.

4. Examples of successful localised VET models and how learnings might be applied in other locations

Aspects raised in the above response may also be relevant here.

5. Opportunities for the Department of Employment, Small Business and Training to facilitate improvements in these areas

In the federal budget in October 2022 the Honourable Jason Clare MP, Minister for Education and the Honourable Brendan O'Connor MP, Minister for Skills and Training announced a new funding commitment for university and VET places (The Hon Jason Clare, MP, 2022). Associated with this initiative the Honourable Anastacia Palaszczuk, Premier and Minister for the Olympics, announced a \$200 million partnership, supporting 37,000 Fee-Free TAFE and VET places for 2023 (The Hon Anastacia Palaszczuk MP, 2022). These funding commitments place TAFE at the centre of the delivery of VET services. The capacity for 180,000 Fee-Free places in 2023, will go some way to relieve the significant pressure of predicted workforce shortages by encouraging student enrolments thereby, meeting future workforce requirements.

This initiative provides TAFE Queensland with an opportunity. It will, through the Fee-Free option, be able to encourage the uptake of TAFE places in areas of significant skills shortage, as well as address infrastructure issues to enhance student learning experiences. address and refine many of the other challenges being raised regarding VET training in Queensland. And in parallel it will be able to focus on addressing a number of constraints identified above.

Areas of focus which would support enhanced outcomes, in particular in delivering future staff for the health sector include:

- Consultation with tertiary bodies to develop approaches for the recognition of prior learning associated with initial TAFE qualifications and/or extensive experience in the sector, with this formally recognised in course offerings.
- Enhancing formal linkages between training and career paths. This could include follow-up post-graduate outcome reporting of outcomes.
- Encouragement of qualifications, for example there would be benefits in linking training associated with the completion of combined qualifications – for example

linking a Certificate III in Aboriginal and Torres Strait Islander Primary Health Care – or encouraging local people in communities to complete a first qualification, particularly during the period of Fee-Free TAFE.

- For those working in aged care, incentives for staff to complete a Certificate in Aged Care would be welcome and timely. While this could currently be facilitated through the period of Fee-Free TAFE, in the longer term, employers could also be encouraged to support such training through “grow your own” programs.
- To encourage greater awareness of the regional working environment, consideration be given to encourage, with support, students to undertake placements in regional areas. In the longer term a greater understanding of regional communities may encourage more city-based students to consider post-graduation regional employment.

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