



QUALIFICATION
REVIEW

CHC Mental Health and Alcohol and Other Drugs



HumanAbility





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Section One: Purpose, Methodology, Executive Summary

1.1 Executive Summary

The Functional Analysis Report for the mental health and alcohol and other drugs sectors provides an updated and comprehensive examination of workforce needs, qualification requirements, and training gaps to ensure alignment with current and emerging industry demands. This report supports the redevelopment of qualifications and training products under the *CHC Community Services Training Package* to better meet the complexities of the sectors' evolving roles, functions, and workforce requirements.

This analysis encompasses 5 qualifications, 7 skill sets, and associated units of competency, including the certificate IV and diploma levels in mental health, alcohol and other drugs, and mental health peer work. It identifies gaps in the current training structure and provides recommendations to ensure these qualifications remain relevant and accessible across diverse service settings, from urban centres to remote regions. The review focuses on aligning qualifications with emerging trends, workforce needs, and regulatory requirements while addressing gaps in competencies not currently reflected in the existing training products.

The functional analysis involved:

- **Desktop research:** Reviewing job descriptions, organisational structures, and legislative requirements to identify skills and competency gaps.
- **Stakeholder engagement:** Conducting interviews and workshops with employers, educators, workers, and policy makers across metropolitan, regional, and remote areas.
- **Workforce data analysis:** Analysing enrolment, completion, and RTO delivery data to highlight trends in training uptake and areas of concern.
- **Cross-project insights:** Incorporating findings from related projects and national strategies, including the *National Mental Health Workforce Strategy 2022-2032*.

The main issues raised during functional analysis interviews and desktop analysis included:

- **Workforce skills needs:**
 - Strong demand for trauma-informed care, dual-diagnosis capabilities, and culturally competent practice.
 - Increased focus on integrating lived experience and peer work models, which require tailored training approaches.
- **Qualification gaps:**
 - Limited opportunities and resources for industry to host vocational placements for learners hinders real-world skill application.
 - Current training products lack emphasis on emerging skills like social prescribing and harm minimisation.
- **Regional and remote challenges:**
 - Unequal access to training pathways exacerbates workforce shortages.
 - Retention of skilled workers in these areas remains a critical issue.

- **Training product limitations:**

- Units of competency are outdated and need to better reflect modern service delivery and regulatory changes.
- Principles of cultural safety and trauma-informed care are inconsistently applied.

The recommendations in this report are provisional and subject to further refinement based on upcoming consultations with RTOs. This critical next phase will ensure that proposed changes to qualifications and training products are practical, deliverable, and aligned with the needs of training providers and learners. Final recommendations will be shaped by the outcomes of these consultations, ensuring a balanced approach to industry relevance and implementation feasibility.

Provisional recommendations include:

- Increasing vocational placement hours and enhancing accessibility in rural and remote regions.
- Updating units of competency to reflect industry best practices and emerging skill requirements.
- Introducing clearer pathways and specialisations to meet diverse career needs.
- Strengthening training in key areas, such as trauma-informed care, motivational interviewing, and group facilitation.
- Developing professional development workshops for trainers and assessors to ensure effective delivery of updated qualifications.

The next phase of this qualification review involves consulting widely with RTOs and stakeholders to refine these recommendations. Once validated, the updated qualifications and skill sets will be finalised and rolled out to ensure the mental health and alcohol and other drugs workforce is well-equipped to meet the complex needs of clients and communities. This will help foster a resilient, capable workforce that is ready to adapt to the challenges of these interconnected sectors.

1.2 Purpose of a Functional Analysis

This functional analysis examines the roles, responsibilities, and skills required in the mental health and alcohol and other drugs sectors. It aims to align training programs and qualifications with current and emerging industry needs, providing a foundation for redeveloping qualifications to better prepare workers for the challenges and opportunities in these sectors.

The functional analysis focused on identifying key tasks, exploring industry trends, and highlighting essential competencies required for effective job performance. Particular attention was given to integrating practices such as trauma-informed care, cultural safety, and peer-led approaches, reflecting the evolving demands of the workforce.

By aligning training products with industry needs, this functional analysis supports the development of a skilled and sustainable workforce capable of meeting the complex and interconnected challenges faced by clients and communities. The findings from this activity will directly inform the redevelopment of qualifications, skill sets, and units of competency to enhance their relevance, accessibility, and impact.

1.3 Purpose of this report

The purpose of this report is to summarise the analysis that links roles, functions, and skills required for mental health and alcohol and other drugs sector workers with the *CHC Community Services Training Package*.

Intended audience and application of this report

This report is prepared to report the findings of this functional analysis and to inform the subsequent redevelopment of the training package components within the scope of this review project. It will also be used to inform internal and external stakeholders of HumanAbility in analysing the skills development needs of this industry.

Project overview

The primary objective of this project is to review the suite of Mental Health and Alcohol and Other Drugs qualifications, skill sets and associated units of competency within the *CHC Community Services Training Package*, with an aim of restructuring and redesigning these components to address current and future skill needs of these industry sectors. These components have been evaluated to:

- ensure that they are aligned with current industry needs and regulatory requirements
- facilitate clear and sustainable career pathways and specialisations to support existing and future growth in the industry
- enhance the relevance and applicability of training products, thereby increasing the industry's capacity to meet growing demand and evolving challenges
- determine skills and knowledge gaps not currently included in training products (internal training performed by employers).

Project Scope

This functional analysis informs the review of 50 separate training package components, comprising 5 qualifications, 7 skill sets and 38 units of competency. These include:

Qualifications

- [CHC43315 Certificate IV in Mental Health](#)
- [CHC43515 Certificate IV in Mental Health Peer Work](#)
- [CHC43215 Certificate IV in Alcohol and Other Drugs](#)
- [CHC53215 Diploma of Alcohol and Other Drugs](#)
- [CHC53315 Diploma of Mental Health](#)

Skill sets

- [CHCSS00092 Alcohol and Other Drugs Co-existing Needs Skill Set](#)
- [CHCSS00093 Alcohol and Other Drugs Skill Set](#)
- [CHCSS00102 Mental Health Co-existing Needs Skill Set](#)
- [CHCSS00103 Mental Health Peer Work Skill Set](#)

- [CHCSS00112 Suicide Bereavement Support Skill Set](#)
- [CHCSS00113 Crisis Support Skill Set](#)
- [CHCSS00138 Mental Health Assistance](#)

Refer Appendix 1.

1.4 Methodology

This research aimed to provide insights into the workforce skills requirements, job role structures, and organisation of roles within the mental health and alcohol and other drugs (AOD) sectors. By reviewing position descriptions and organisational structures, common qualifications and skills in demand within these sectors were identified. This analysis highlights trends in job responsibilities and structural frameworks, supporting future workforce planning and the development of updated training qualifications for these industries.

The research included:

- review of position descriptions for roles related to mental health and AOD sectors sourced from publicly accessible job advertisements
- analysing workforce skills requirements as outlined in these job advertisements
- examining organisational structures found on company websites and industry publications
- identifying emerging trends in the skills market and highlighting potential gaps in the current workforce
- analysis of National Centre for Vocational Education Research (NCVER) data relating to enrolments and completions of relevant qualifications and skill sets
- number of Registered Training Organisations (RTOs) with the relevant qualifications on their scope of registration
- vocational placement hours for units included in this review
- qualification packaging rules
- relevant frameworks and legislative requirements.

Position descriptions and job advertisements

From October to December 2024, a detailed review of 33 job advertisements was conducted to capture a snapshot of the roles and skill requirements within the mental health and alcohol and other drugs sectors during this period. These advertisements were sourced from a range of platforms, including:

- online job-seeking agencies, such as Seek, Indeed, CareerOne and Jora
- state government careers websites
- company-specific websites representing diverse organisational contexts.

This targeted review aimed to identify roles, responsibilities, skills, qualifications, and career pathways relevant to the workforce. It was particularly focused on emerging trends within the industry. The findings contribute to an understanding of industry demands, recognising that this dataset reflects only a defined period and therefore offers a momentary view of the job market.

The analysis covered:

- **Key roles and responsibilities:** Understanding the expectations for workers across various job functions within these sectors.
- **Skills and knowledge requirements:** Detailing the qualifications, certifications, and interpersonal competencies deemed essential by employers.
- **Preferred and required qualifications:** Highlighting trends in employer preferences for formal education, such as certificates or diplomas.
- **Emerging trends:** Observing shifts in job postings that might indicate new areas of demand or evolving industry priorities.
- **Career pathways:** Exploring potential progression opportunities within the workforce based on the roles and qualifications advertised.

Legislative Requirements

Key legislative factors affecting both the industry sectors and the delivery of training and skilling programs were considered at this initial phase of this review. These include workplace health and safety, mandatory reporting, privacy, and licensing requirements, such as Working with Children Checks, NDIS Worker Screening Checks, and First Aid certifications. The analysis also takes into account state-specific legal and ethical requirements, including those related to cultural safety and trauma-informed care. Additionally, this review incorporates guidance from national strategies, such as the National Mental Health Workforce Strategy 2022-2032, and insights from the Productivity Commission's reports on co-existing conditions and psychosocial supports. These frameworks provide critical alignment for addressing workforce development and sector needs in the mental health and alcohol and other drugs industries.

Cross-project research

Data gathered in the following concurrent HumanAbility projects informed this analysis:

- 25-004 Community Services Qualification Review
- 25-007 Case Management Review

Stakeholder interviews

To identify the current and emerging skill needs of the industry, HumanAbility conducted a series of employer and other stakeholder interviews. These interviews provided valuable insights into the mental health and alcohol and other drugs workforce and the practical roles, functions, and skill requirements of the sectors from an industry perspective. Employers discussed current roles, daily tasks, career pathways, and the specific challenges and competencies prioritised in different work environments, such as residential services, advocacy groups and clinical practices.

The findings from these interviews helped to clarify employer expectations and workforce needs, contributing to the definition of functions and sub-functions of mental health support workers, alcohol and other drugs support workers and related roles. This information will also inform workforce development and training activities, ensuring alignment with industry priorities. Ultimately, the data has

shaped recommendations for qualifications and other training package components to better support mental health, peer work, and alcohol and other drugs roles within the sector.

Consultation with Registered Training Organisations (RTOs)

While this report includes input from a broad range of stakeholders, consultation with RTOs is a critical next step in the review process. This phase will focus on gathering insights from training providers regarding the practicality, deliverability, and relevance of current qualifications and proposed changes. Their feedback will play a pivotal role in refining the qualifications and ensuring their successful implementation

Refer Appendix 2.

Section Two: Overview of Desktop Analysis

2.1 Industry overview

The mental health and alcohol and other drugs sectors address a wide range of community needs through diverse services and settings. These include residential rehabilitation centres, sobering-up units, community-based counselling services, outreach programs, and hospital-to-home transition programs. Specialist services also cater to specific populations, such as Aboriginal and Torres Strait Islander people and communities, and address comorbid conditions through integrated care. Providers in remote and regional areas face unique challenges, often requiring culturally tailored and flexible approaches to ensure appropriate and accessible care.

The workforce in these sectors comprises a variety of roles, from entry-level support workers and peer workers to specialised clinicians, case managers, and counsellors. Increasingly, organisations are integrating peer work and lived experience-led models into therapeutic, advocacy, and leadership roles, recognising their unique value in fostering trust and connection. Workers require a mix of technical and interpersonal skills, such as trauma-informed care, motivational interviewing, cultural competency, dual-diagnosis capability, and system navigation. Practical responsibilities, like assisting clients with appointments, navigating complex systems such as Centrelink and housing services, and facilitating group discussions or yarning circles, are also central to the role.

Emerging trends in the sector highlight a shift towards holistic and wraparound care models that address the complex interplay between mental health, substance use, and social determinants of health. Social prescribing has gained prominence as a way to connect clients with community support systems, tackling broader societal issues such as homelessness and corrections. These trends underscore the critical role the mental health and alcohol and other drugs sectors play in addressing the interconnected nature of health and social challenges.

Sectors and services

The mental health and alcohol and other drugs sectors within the community services field include numerous services and differing work environments in which roles are performed, and training products are utilised.

Refer Appendix 3.

- Mental Health Services
- Alcohol and Other Drugs (AOD) Services
- Education and Prevention Programs
- Youth Services
- Homelessness and Housing Support
- Indigenous and Culturally Specific Services
- Employment and Vocational Support
- Family and Domestic Violence Support

- Specialist Services
- Advocacy and Systemic Reform

The breadth of services and sectors encompassed within the mental health and alcohol and other drugs sectors highlights the diverse range of roles and opportunities available within this workforce. These roles span community outreach, psychosocial support, peer work, residential care, harm reduction, education, advocacy, and employment services, among others. Many services target specific populations, such as youth, Aboriginal and Torres Strait Islander peoples, culturally and linguistically diverse communities, and those facing housing instability or justice system involvement. Other services engage with a diverse range of individuals from multicultural communities.

This diversity presents significant opportunities for the workforce to specialise or transition across various roles and sectors. However, it also underscores a challenge: the existing qualifications that address the skills of this sector must address the competency requirements for an extensive variety of job types and service contexts. This qualification review must ensure that these credentials remain adaptable and relevant while meeting the specific skill demands of diverse roles, such as trauma-informed care, cultural competency, and dual diagnosis treatment. Addressing these aspects will be critical to supporting a well-prepared and sustainable workforce.

Key job titles and roles

The following list of job titles reflect the variety of roles available within the mental health and alcohol and other drugs sectors, ranging from direct client support to specialist clinical and advocacy positions. This list focusses on roles that relate to the qualifications and skill sets reviewed in this project and are generally undertaken by people with a vocational education, skill set or no formal qualification in this field.

Mental Health	
Mental health recovery worker	Supports individuals with severe mental illness in recovery and rehabilitation
Mental health support worker	Assists clients with psychosocial disabilities in achieving daily living and personal goals
Peer support worker/ Peer wellbeing navigator	Provides peer support and guidance for mental health recovery
Mental health case manager	Coordinates care and support for mental health clients
Psychosocial support worker	Provides tailored psychosocial support for mental health recovery
Social and emotional wellbeing worker	Provides holistic support, often in Aboriginal and/or Torres Strait Islander people and communities, integrating mental health, emotional resilience, cultural identity, and community wellbeing.
Aboriginal community liaison officer	Bridges service delivery to Aboriginal communities
Mental health outreach worker	Delivers mental health services directly in the community
Lived experience workforce lead	Coordinates and lead peer workforce initiatives
Cultural support worker	Provides culturally tailored support services
Alcohol and Other Drugs (AOD)	
AOD support worker	Provides assistance for individuals with substance use disorders
AOD case manager	Coordinates treatment plans and monitor progress for clients with AOD challenges
Needle exchange program coordinator (or harm reduction coordinator)	Oversees harm reduction efforts through needle exchange services

Sobering up unit support worker	Provides a safe space for individuals recovering from intoxication
Residential rehabilitation worker (or residential support worker)	Supports individuals in recovery-focused residential settings
AOD counsellor (alcohol and other drug counsellor)	Provides specialised support and interventions for individuals with alcohol and other drug-related challenges
Combined Roles (Mental Health and AOD)	
Dual diagnosis clinician/specialist	Addresses co-occurring mental health and substance use disorders
Community AOD and mental health worker	Provides holistic care for individuals with both AOD and mental health challenges
Social prescribing link worker (or social connection worker)	Connects clients with non-clinical resources to improve overall wellbeing
Counsellor	Provides therapeutic and emotional support
Broader or Related Roles	
Community mental health worker	Supports clients in community settings to achieve mental health goals
Family support worker (AOD and gambling)	Provides support to families impacted by AOD and gambling
Youth mental health worker	Supports young people with mental health needs
Forensic AOD and mental health worker	Works with clients involved in the justice system to address AOD and mental health challenges
Policy and advocacy specialist (lived experience)	Advocates for systemic change using lived experience insights
Volunteer coordinator	Manages peer and volunteer staff
Lived Experience and Peer Roles	
Peer worker (peer support worker)	Provides peer-based advocacy and support
Cultural support worker (Aboriginal community liaison officer)	Bridges service delivery to Aboriginal communities

Peer wellbeing navigator (lived experience educator)	Mentors and educate others using personal recovery experience
Specialised/Leadership Roles	
Training and development coordinator (lived experience)	Designs and implement training programs for peer workers
Peer workforce coordinator	Oversees and support the peer workforce within an organisation
Harm reduction coordinator (harm reduction officer)	Oversees harm reduction initiatives
Harm reduction specialist (needle and syringe program worker)	Provides support through needle exchange programs
Family support worker (family and carer support worker)	Supports families impacted by mental health or substance use
Administrative and Supportive Roles	
Intake and assessment worker (intake and assessment officer)	Assesses and coordinate client intake
Administration coordinator (client services coordinator)	Manages service-related administrative tasks

2.2 Analysis of Position Descriptions and Job Advertisements

A range of job advertisements and position descriptions were reviewed to support this project, providing a comprehensive understanding of the diverse roles and responsibilities in the mental health and alcohol and other drugs sectors. These roles include mental health support workers, AOD counsellors, peer support navigators, and others, each requiring distinct capabilities such as facilitating psychosocial recovery, implementing harm-reduction strategies, and providing case management support. The analysis revealed a consistent demand for technical expertise combined with strong interpersonal and cultural competence, underscoring the importance of holistic care in addressing client needs.

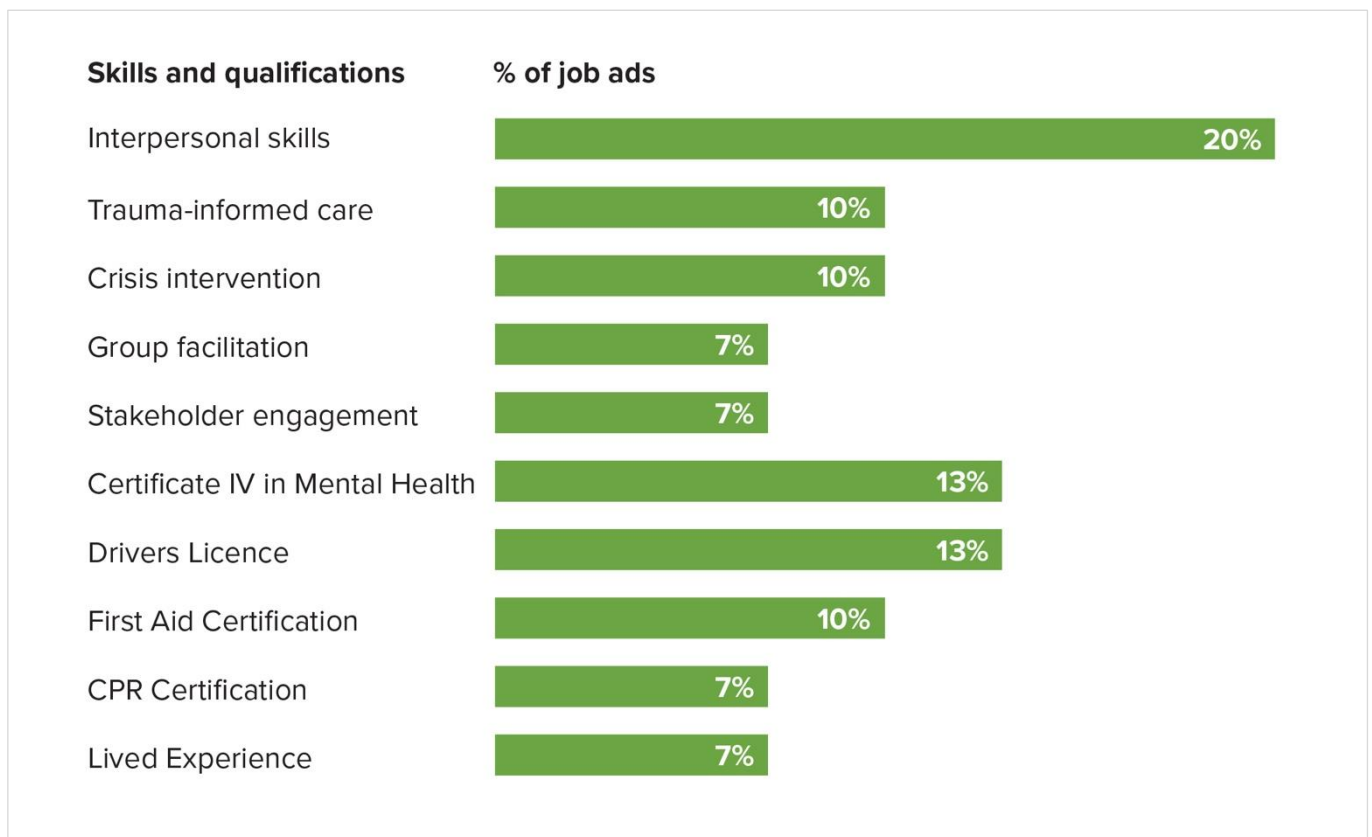
In addition, industry advertisements have highlighted the critical need for dual-diagnosis skills, particularly the ability to manage co-occurring mental health and substance use issues. Skills such as trauma-informed care, motivational interviewing, and understanding of systemic and structural challenges like homelessness, justice systems, and cultural contexts were commonly mentioned. The focus on trauma-informed care aligns with the industry's emphasis on creating safe, empowering environments for clients.

Specifically, key skills emphasised in the job advertisements included:

- Crisis intervention and de-escalation techniques – Effectively managing volatile or challenging situations to ensure safety.
- Case management and recovery planning – Supporting individuals to identify and achieve goals through structured planning and ongoing monitoring.
- Trauma-informed care – Providing support in a way that recognises and minimises re-traumatisation.
- Cultural competence – Particularly regarding Aboriginal and Torres Strait Islander people and communities and other culturally and linguistically diverse groups.
- Interpersonal and communication skills – Demonstrated ability to liaise with clients, families, and external service providers effectively.
- Group facilitation – Leading or co-facilitating group therapy sessions, workshops, or peer-led discussions.
- Harm minimisation – Knowledge and application of harm-reduction strategies, especially in alcohol and other drugs contexts.
- Organisational and administrative skills – Maintaining accurate records, scheduling appointments, and ensuring compliance with reporting requirements.
- Digital proficiency – Familiarity with using case management systems and data collection software.
- Medication assistance – Supporting clients in managing and administering prescribed medications safely.
- Empathy and understanding – Compassionate support for individuals experiencing mental health challenges or recovery journeys.
- Professional boundaries and ethics – Adhering to clear boundaries and ethical practices in all professional interactions.

- Problem-solving and resilience – Managing stress and uncertainty while providing support in demanding situations.
- Lived experience – Leveraging personal experience in mental health recovery or AOD contexts to provide peer support and foster hope.
- Independent living skill development – Assisting clients with personal care, financial management, and daily living tasks to enhance independence.
- Advocacy and community linkages – Helping clients navigate systems and connect with community resources.

The most frequently requested skills and qualifications from this sample of job advertisements are illustrated in the following charts:



Refer Appendix 4.

2.3 Training and educational pathways

Enrolments and completions

The most popular qualifications of those within the scope of this project, according to total enrolments across Australia in 2023 are the *CHC43315 Certificate IV in Mental Health* (12,774 enrolments nation-wide) and the *CHC53315 Diploma of Mental Health* (5,063 enrolments), both showing significant growth since 2018. Skill sets such as the *CHCSS00093 Alcohol and Other Drugs Skill Set* and the *CHCSS00113 Crisis Support Skill Set* also show strong enrolment growth, particularly in 2023, with 644 and 806 enrolments, respectively.

In contrast, enrolments in the *CHC53315 Diploma of Alcohol and Other Drugs* have steadily declined, dropping from 912 in 2018 to 553 in 2023. One reason for the drop in diploma enrolments compared to certificate IV enrolments might be the "FREE TAFE" programs across various jurisdictions that encourage enrolments into some certificate IV qualifications. This makes diplomas a more expensive and less accessible option, especially when the certificate IV qualification is sufficient to secure the desired employment.

“Free TAFE” funding by states and territories and federal schemes:

Qualification	Funding States
<i>CHC43315 Certificate IV in Mental Health</i>	Victoria, New South Wales, Western Australia, Queensland plus federal funding
<i>CHC43515 Certificate IV in Mental Health Peer Work</i>	Victoria, Queensland, Western Australia, plus federal funding
<i>CHC43215 Certificate IV in Alcohol and Other Drugs</i>	Victoria, New South Wales, Western Australia, plus federal funding
<i>CHC53215 Diploma of Alcohol and Other Drugs</i>	New South Wales
<i>CHC53315 Diploma of Mental Health</i>	New South Wales, Western Australia

The average completion rate across qualifications from 2018 to 2023 is approximately 18.3%. Skill sets, however, demonstrate a significantly higher completion rate, averaging 50.2%, reflecting their shorter duration and focused content. This disparity highlights a trend where students are more likely to complete skill sets than full qualifications, which could suggest they are more accessible or align more closely with immediate employment needs.

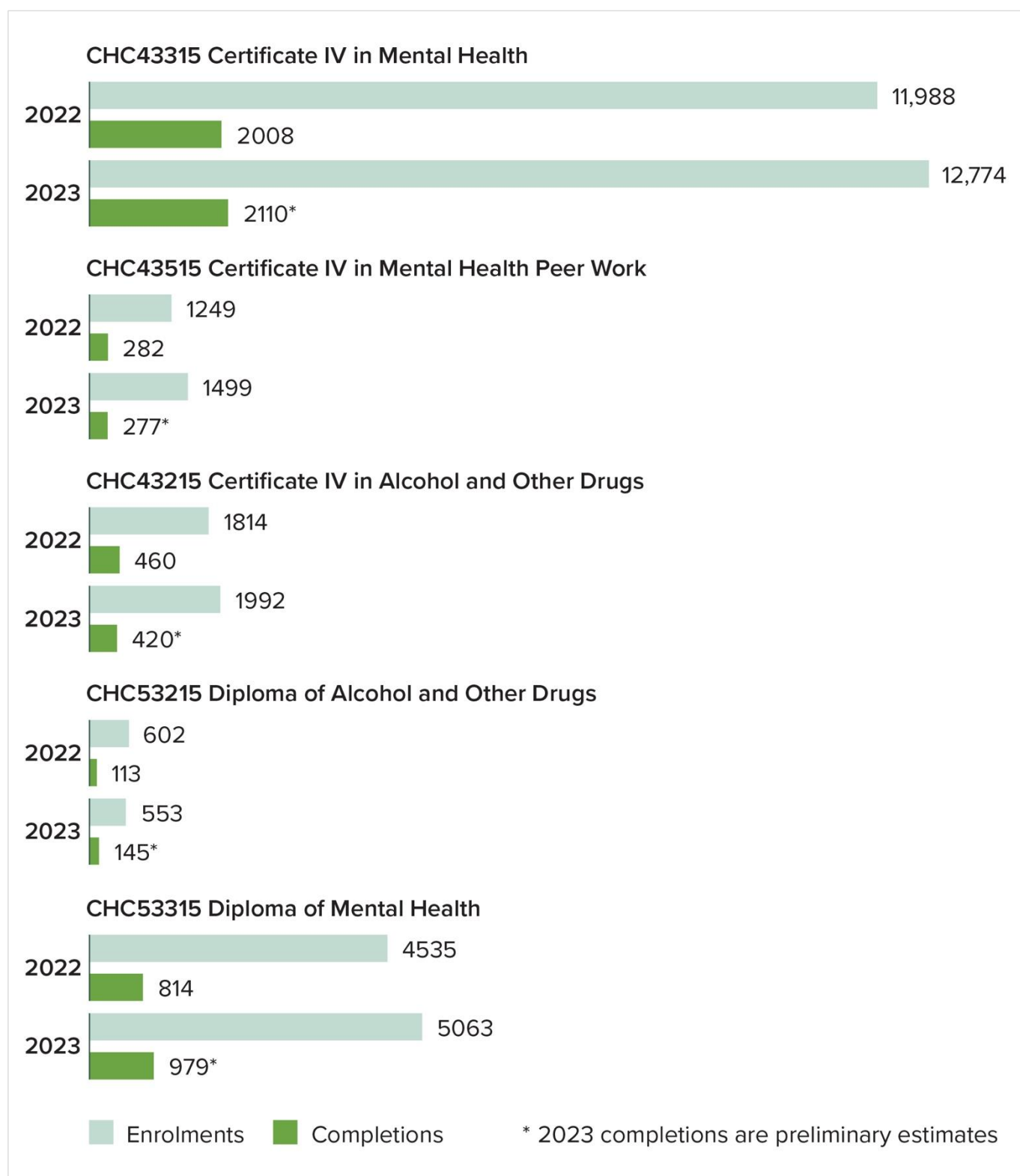
Summary of enrolments and completions for 2022 and 2023 is below, sourced from National Centre for Vocational Education Research (NCVER), 2023. Total VET Students and Courses, 2023.¹

Further detail relating to past years is provided in the appendices.

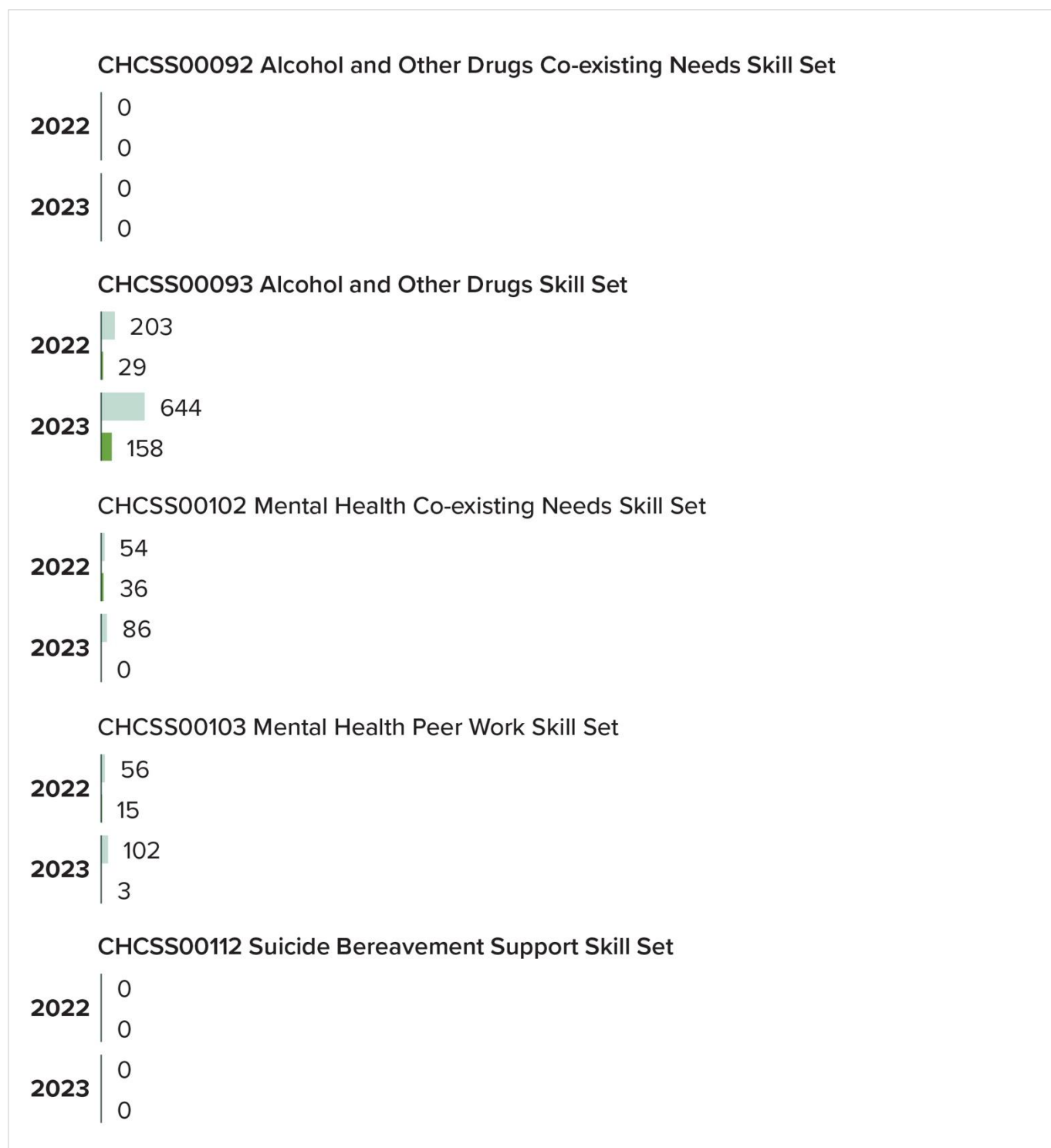
Refer Appendix 5.

¹ <https://www.ncver.edu.au/research-and-statistics/publications/all-publications/total-vet-students-and-courses-2023>

Enrolments and completions for qualifications



Enrolments and completions for skill sets





* Completion statistics provided for 2023 are considered “preliminary” and not yet fully substantiated.

Registered Training Organisations

At the time of writing, there are 348 Registered Training Organisations across Australia registered to deliver and assess the qualifications and skill sets addressed by this review.

Although many have the capacity to deliver these qualifications and skill sets, the actual number of organisations offering them is undetermined.

Refer Appendix 6.

Pathways

Interviews and desktop research were conducted to explore the educational pathways leading to certificate IV and diploma qualifications, as well as progression into Higher Education opportunities.

No formalised pathways exist that require the completion of one qualification before another can be achieved but an analysis of career pathways (see section 3.2 below) found that there are informal expectations, requirements and opportunities available for the mental health and alcohol and other drugs workforce to progress through differing levels of vocational and tertiary education programs. Some of these expectations differ from state to state. Given the complexity of Certificate IV qualifications in this field, they can present a barrier for individuals who find this level of education challenging. As a result, generic Certificate III qualifications in Community Services or Individual Support are often regarded as viable pathways for individuals seeking foundational skills and qualifications that can facilitate entry into the mental health and alcohol and other drugs sector.

2.4 Workforce demographics

The Mental Health (MH) and Alcohol and Other Drugs (AOD) workforce is a highly diverse and dynamic sector, encompassing a broad range of roles, from peer support workers with lived experience to advanced clinical specialists. This diversity is integral to the sector's ability to address complex and varied community needs, particularly in rural and remote settings.

Training and qualifications

Qualifications across the workforce range from Certificate IVs in Mental Health or Alcohol and Other Drugs to advanced diplomas and tertiary degrees. However, disparities in access to training and professional development persist:

- Rural and remote regions face acute challenges, with 35% of workers in these areas reporting difficulties accessing training opportunities.
- Peer workers, who play a growing role in the sector, often lack formal training pathways, limiting their career progression despite the critical value of their lived experience.
- Regional disparities are significant. Workforce shortages are most pronounced in remote areas, where vacancy rates for key roles in the MH and AOD sectors remain high, making service delivery challenges more difficult.

Workforce composition

Aboriginal and Torres Strait Islander peoples representation

Aboriginal and Torres Strait Islander workers play a critical role in providing culturally safe and sensitive care across Australia, particularly in remote and regional communities where their contributions are vital to addressing unique cultural needs. Despite this, systemic barriers, including limited access to leadership opportunities and culturally appropriate workplace support, continue to hinder their full participation in the sector. Nationally, Aboriginal and Torres Strait Islander workers represent a small but growing portion of the workforce, with higher representation in some regions, such as the Northern Territory (11%), compared to lower engagement levels in urban and other regional areas. This disparity highlights the need for targeted strategies to recruit, support, and retain First Nations workers across all parts of the country.

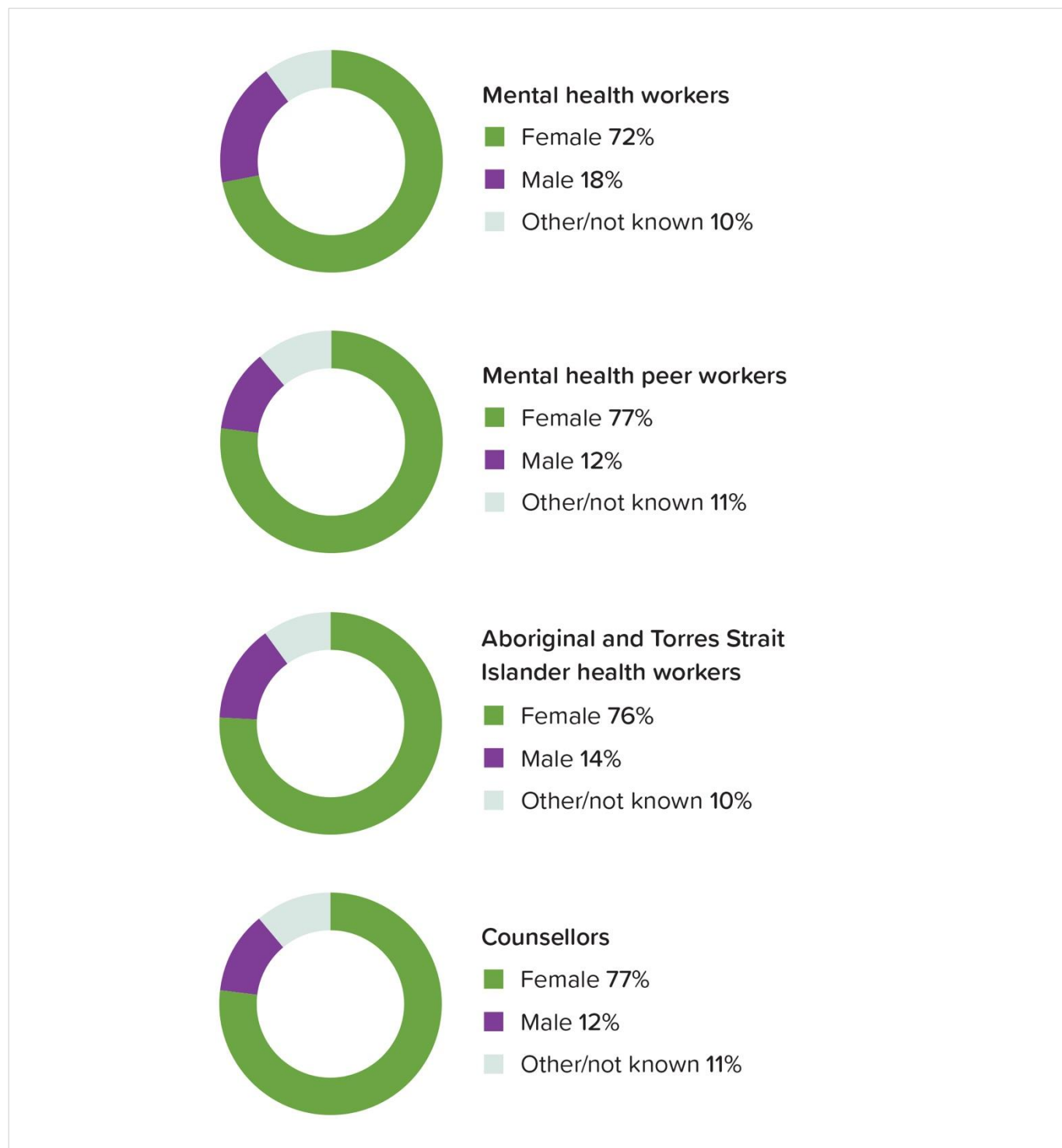
"We see a high demand for First Nations workers, but systemic barriers make it hard to attract and retain them, particularly in leadership roles."

Gender and age diversity

The MH and AOD workforce is predominantly female, with women making up approximately 70% of the sector nationally. 72% of mental health workers and 77% of mental health peer workers identify as female. (*Acil Allen Consulting. Mental health workforce – Labour market analysis: 2023*). The workforce also skews older, with a high proportion of workers aged 45 years and over, raising concerns about succession planning and sustainability. This is consistent with broader trends in the community services sector, where women account for over 80% of the workforce according to HumanAbility's Workforce Plan 2024 highlighting the sector's continued reliance on female-dominated roles.

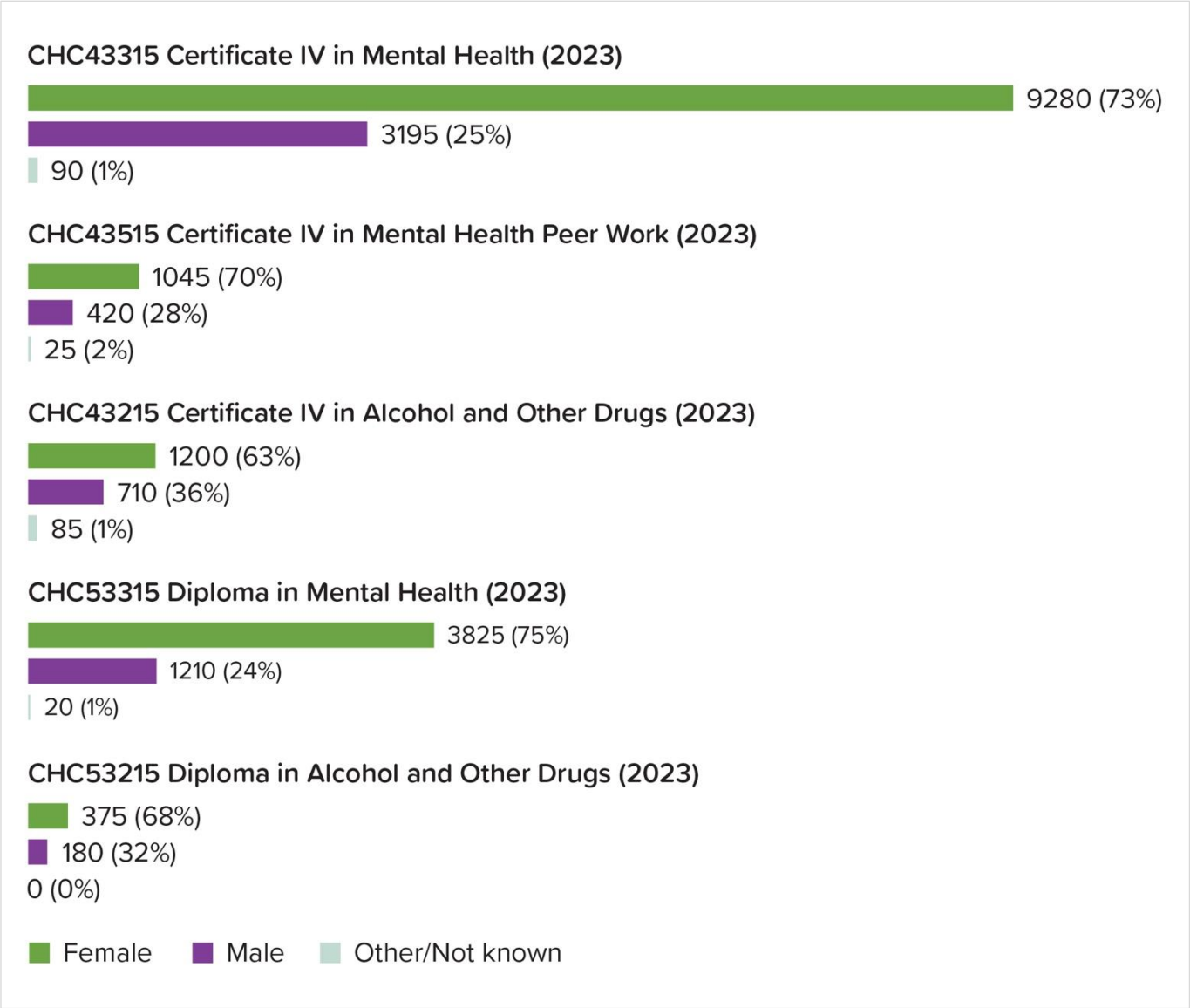
The gender distribution within the mental health and related sectors workforce shows a significantly higher representation of females across all categories. This trend is mirrored by the numbers of Aboriginal and Torres Strait Islander health workers working in these sectors.

Gender representation in the Mental Health and Allied Workforce



Women consistently form the majority of enrolments across all qualifications in mental health, peer work, and alcohol and other drugs in 2022, with percentages ranging from 63% to 75%. These statistics reflect national workforce patterns.

Enrolments by gender for qualifications (2023)



Enrolments by gender for skill sets (2023)

CHCSS00093 Alcohol and Other Drugs Skill Set

■ 465 (72%)

■ 165 (26%)

■ 10 (2%)

CHCSS00102 Mental Health Co-existing Needs Skill Set

■ 60 (71%)

■ 20 (23%)

■ 5 (6%)

CHCSS00103 Mental Health Peer Work Skill Set

■ 65 (62%)

■ 40 (38%)

0 (0%)

CHCSS00113 Crisis Support Skill Set

■ 615 (76%)

■ 190 (23%)

■ 5 (1%)

■ Female ■ Male ■ Other/Not known

2.5 Industry demand and growth areas

The mental health and alcohol and other drugs sectors are experiencing significant growth. The employment projections described in the *National Mental Health Workforce Strategy 2022-2032* for the Mental Health and AOD sectors highlight steady growth across key occupations. For example, welfare support workers are expected to grow from 80,300 in 2023 to 96,300 by 2033, marking a 19.9% increase over ten years. This reflects the rising demand for welfare services to address diverse community needs. Similarly, the demand for counselling services is expected to increase 15% over the next five years². This growth is driven by several critical factors:

1. **Complex client needs:** The complexity of client presentations is increasing, with many individuals requiring support for both mental health and substance use concerns. This has elevated the demand for professionals with dual-diagnosis expertise, enabling them to address these intersecting issues effectively. Multidisciplinary approaches are becoming fundamental to navigating and managing such complexities, ensuring that care is holistic and tailored. Other issues that are commonly associated with mental health and alcohol and other drugs concerns include family violence, poverty, homelessness and suicide ideation.
2. **Evolving workforce roles:** Workforce expectations are shifting beyond traditional peer work to encompass roles such as policy advocacy, system navigation, and social prescribing. The latter aims to address broader social conditions by connecting clients with community-based supports that go beyond clinical settings. These evolving roles reflect a growing need for professionals who can advocate for systemic change, guide clients through complex systems, and enhance social connectedness.
3. **Regional and remote needs:** Rural and remote areas face acute workforce shortages, requiring innovative training and service delivery models. These areas experience unique challenges, such as geographic isolation and limited access to resources, which require adaptive approaches to meet community needs effectively.
4. **Integrated service models:** There is a strong push towards integrated care models where mental health and alcohol and other drugs interventions are delivered collaboratively. Such models aim to reduce fragmented service delivery, promoting seamless care and improving outcomes for clients. This approach necessitates coordination across services and disciplines, reinforcing the importance of shared knowledge and collaborative practices.
5. **Policy and regulatory developments:** The sector is increasingly shaped by policies that prioritise emerging practices such as trauma-informed care, cultural competence, and peer-led initiatives. These priorities reflect broader societal shifts, recognising the importance of culturally safe, inclusive, and client-centred care. Training and workforce development must align with these regulatory and policy-driven expectations, ensuring that practitioners are well-equipped to meet the evolving needs of their communities.

These factors underscore the necessity for training programs and qualifications to evolve, ensuring they remain relevant and responsive to the dynamic demands of the sector. Workforce development efforts

² *National Mental Health Workforce Strategy 2022-2032*

must focus on fostering skills in cultural safety, trauma-informed practices, interdisciplinary collaboration, and system navigation to support a sustainable and effective workforce.

2.6 Licensing and regulatory requirements

The mental health and alcohol and other drugs workforce operates with minimal formal licensing and regulatory requirements. However, the majority of the workforce, including team leaders and managers at the organisations interviewed, are required to meet certain checks and hold specific certificates to perform their roles effectively. These include:

- A valid driver's licence
- Current First Aid certification
- A national police check
- A Working with Children Check (WCCC) for those engaging directly or indirectly with individuals under 18 years old
- National Disability Insurance Scheme (NDIS) Worker Check for those interacting directly or indirectly with individuals with disabilities or working within organisations funded by the NDIS.

Section Three: Overview of Interviews and Workshop Outcomes

3.1 Current workforce requirements

Interviews, focus groups, and workshops involving approximately 55 individuals, including employers, government representatives, peak bodies, coordinators, and workers in the mental health and alcohol and other drugs (MHAOD) sectors, provided rich insights into the skills and knowledge essential for workers in the industry. These discussions highlighted existing training gaps and informed recommendations for improving future qualifications to better meet sector needs.

"The Certificate IV gives a good foundation, but I don't think it actually gives practice skills. It doesn't give that intense practice...you cannot learn them from a book, and you need to reflect a lot on your own experiences to develop your practice."

Trauma-informed care	<p>Importance: Essential for all roles, recognising and responding to trauma appropriately across therapeutic and community settings.</p> <p>Key Elements: Understanding trauma responses, applying compassionate inquiry, and integrating trauma awareness into every interaction.</p>
Professional boundaries and ethical practice	<p>Importance: Critical for ensuring safe and professional client-worker relationships.</p> <p>Key Challenges: Maintaining boundaries while leveraging lived experience or working within communities that are closely connected; managing self-disclosure effectively.</p>
Crisis management and de-escalation	<p>Importance: Increasing aggression and complexity in the sector demand crisis resolution skills.</p> <p>Skills Required: De-escalation techniques, situational awareness, and handling emergencies such as overdoses.</p>
Cultural competency and inclusivity	<p>Importance: Vital for working with Aboriginal, CALD, and other marginalised communities.</p> <p>Key Skills: Cultural safety, historical awareness, and strategies for intersectional service delivery.</p>
Peer work and lived experience	<p>Importance: Lived experience is a cornerstone for client engagement and systemic reform.</p> <p>Key skills: Intentional disclosure, advocacy, and navigating systemic challenges.</p>

	Challenges: “Peer drift” (drifting from peer support principles toward clinical or traditional roles); stigma against lived experience workers.
Digital literacy and technological skills	Importance: Increasing reliance on telehealth, case management systems, and AI tools. Training gap: Insufficient emphasis on digital competencies in current qualifications.
Group facilitation and therapeutic techniques	Importance: Group-based interventions are cost-effective and widely employed. Skills needed: Facilitating group dynamics, using tools like motivational interviewing, and managing educational sessions.
Administrative and documentation skills	Importance: Accurate record-keeping ensures compliance and continuity of care. Key competencies: Writing case notes, handling client data, and adhering to governance standards.
System navigation and interagency collaboration	Importance: Essential for effective case management and service delivery. Skills needed: Understanding justice, housing, and healthcare systems; building referral networks.

Training gaps and needs

Modernisation of core units	Outdated qualifications fail to reflect current industry demands.
Specialisation and flexibility	Growing need for qualifications offering electives in dual-diagnosis, Indigenous community support, and skills and knowledge in addressing a range of co-existing challenges such as domestic violence, eating disorders, perinatal mental health and addiction.
Practical training and placements	Current placement hours are insufficient to build competency.
Reflective practice and resilience	Helps prevent burnout and supports emotional well-being.
Language and terminology	Outdated terms perpetuate stigma.

Emerging workforce needs

Integrated peer work principles	Avoid peer drift, enhance intentional peer support, and develop systemic advocacy skills.
Technology and AI integration	Use AI-assisted tools in case management and telehealth.
Comprehensive system knowledge	Understand how mental health and AOD services intersect with justice, housing, and community systems
Sustainability and retention	Foster resilience and establish leadership pathways to address challenges of burnout and high turnover.

"The qualifications give a theoretical understanding, but we're constantly having to upskill new employees on practical things like de-escalation techniques, trauma-informed care, or navigating complex systems."

Recommendations for qualification redevelopment

- Embed core competencies: Trauma-informed care, cultural competency, and harm reduction must be central to all qualifications.
- Expand placement hours: Increase structured, meaningful placement opportunities.
- Incorporate reflective practice: Include reflective and self-care practices as core training components.
- Streamline compliance units: Consolidate overlapping legislative content to create space for practical training.
- Introduce modular pathways: Allow learners to specialise in areas such as dual-diagnosis or peer leadership.
- Enhance digital literacy training: Prepare workers for emerging technologies and telehealth practices.

"If we're serious about preparing workers, the qualifications need to include units on group facilitation, harm reduction, and navigating complex care systems."

3.2 Career Pathways

Interviews and desktop research were conducted to explore the career pathways leading to Certificate IV and Diploma qualifications, as well as progression into Higher Education opportunities.

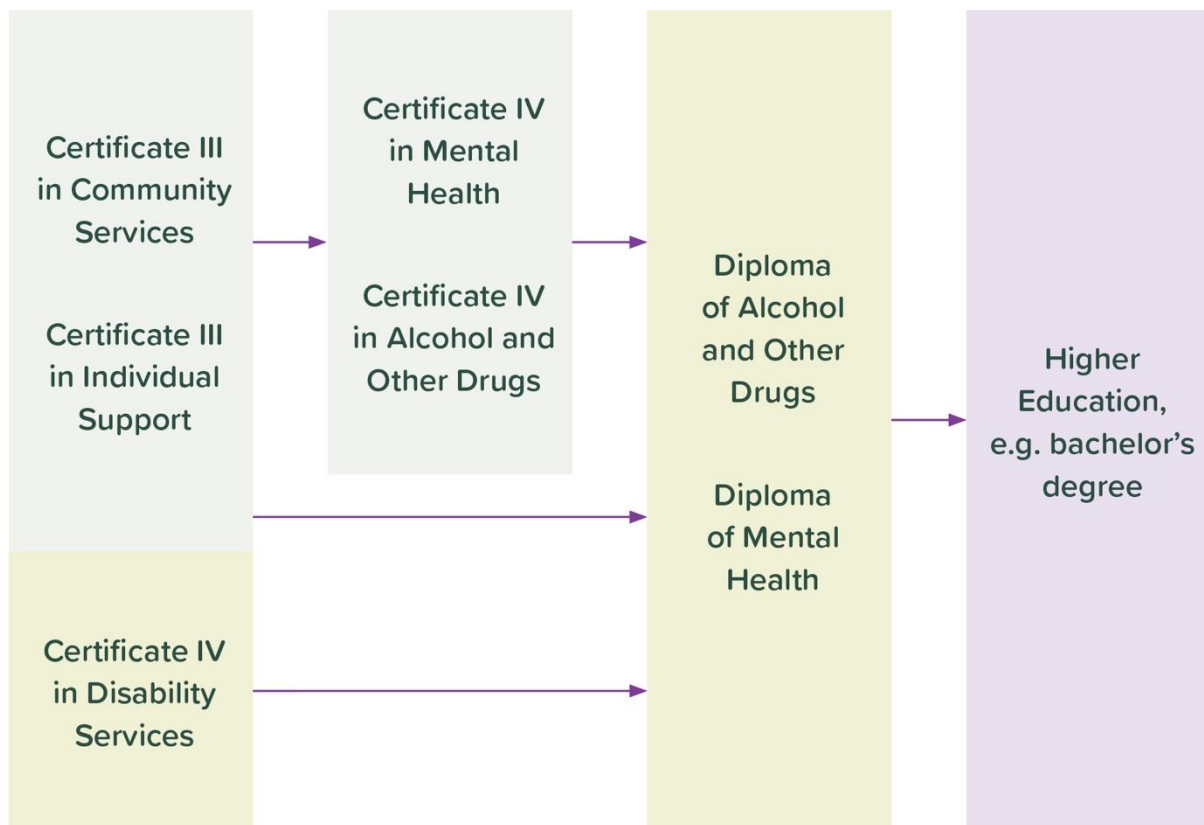
Career pathways in the mental health and alcohol and other drugs sectors are diverse, offering opportunities for progression and specialisation across various roles and settings. However, these pathways are not mandatory, consistently defined, or widely recognised, which can create confusion for those entering or already working in the industry. Many entry-level workers enter these sectors without formal qualifications, with some organisations requiring only completion of mandatory courses such as

the *CHCSS00093 Alcohol and Other Drugs Skill Set*, the *NDIS Introduction to Disability* or similar courses. Others may start with practical experience and on-the-job training before pursuing formal education. Some organisations set a minimum qualification requirement, such as a *Certificate III in Community Services* or similar, to ensure basic knowledge and skills alignment with organisational needs. For many workers looking to advance in the sector, the complexity of Certificate IV qualifications can be a barrier, particularly for those with limited prior education or formal study experience. As a result, some individuals opt for Certificate III qualifications in Community Services or Individual Support as a more accessible entry point before progressing to higher-level qualifications.

For those who pursue qualifications, Certificate IV or Diploma-level education can lead to roles such as support workers, peer workers, or outreach coordinators. These vocational pathways often serve as a bridge for individuals aspiring to higher education, enabling them to gain entry into university programs. Many use these qualifications as a stepping stone to become professional clinicians, such as social workers, counsellors, or other related occupations, while continuing to gain practical experience in the field. However, the lack of a nationally standardised framework for career progression often results in talented workers leaving the sector before reaching leadership roles, as they struggle to identify or access opportunities for advancement.

"The lack of clear career pathways means that many talented workers leave the sector before reaching leadership roles."

These sectors also support workers looking to specialise or advance into management, policy development, or training roles. Continuous learning is encouraged through professional development and micro-credentialing opportunities. Furthermore, with increasing demand for multidisciplinary skills, dual-sector training in mental health and AOD equips workers with the competencies needed for more complex roles, fostering career progression and adaptability within the evolving mental health and alcohol and other drugs industry.



Several employers described how individuals in the industry progress through formal qualifications. This progression often begins with a Certificate III in a related field, which serves as a foundation for a *Certificate IV in Mental Health or Alcohol and Other Drugs* qualification, or in some cases, directly to a Diploma. Both pathways create opportunities for further study, including university-level qualifications. However, the *Certificate IV in Mental Health Peer Work* is less commonly associated with these pathways and is frequently pursued as a standalone qualification.

Currently, no university-level qualification is dedicated to peer work in the mental health or alcohol and other drugs sectors, which limits the upward mobility of learners in these roles. Furthermore, the *CHC43515 Certificate IV in Mental Health Peer Work* is narrowly focused on entry-level peer work positions, which restricts learners' awareness of the diverse opportunities within the lived-experience workforce. To better align with the evolving needs of the sector, the qualification should expand its scope to introduce learners to a broader range of roles and pathways, empowering them to explore advanced opportunities in areas such as policy development, management, or specialty practice.

3.3 Emerging trends

The mental health and alcohol and other drugs sectors are witnessing significant evolution, driven by societal changes and shifts in policy. Integration between mental health and alcohol and other drugs services has emerged as a critical trend, reflecting the high prevalence of comorbidities among clients. Dual-diagnosis capability is increasingly prioritised, with professionals expected to address both mental health and substance use issues simultaneously rather than in isolation.

Another trend is the growing importance of lived experience roles, which are transitioning from peer support-focused positions to encompass a broader range of roles, including advocacy, policy development, and leadership. This is evident in initiatives aiming to professionalise lived experience work and embed it in organisational structures.

"For peer workers, the Certificate IV in Mental Health Peer Work has been a game-changer. It validates their experience and gives them the tools to operate in professional environments."

The growth of social prescribing, which links clients to community resources for non-medical needs, reflects a shift toward holistic, client-centred care.

Given the complex and often sensitive nature of mental health and alcohol and other drugs training, delivery approaches must be carefully designed to mitigate potential emotional triggers for learners and workers. This need extends beyond peer work qualifications, requiring tailored support mechanisms and trauma-informed teaching practices to ensure a safe and effective learning environment.

3.4 Regional and Remote Challenges

Service delivery in regional and remote areas faces unique challenges, particularly due to workforce shortages and the lack of training infrastructure. Many rural organisations struggle to attract and retain qualified staff, exacerbated by the absence of face-to-face training options and limited placement opportunities. The transient nature of regional workforces further complicates workforce stability, impacting service continuity and client outcomes. It also affects the availability of opportunities for mandatory work placement relating to achieving qualifications in mental health and AOD, and the appropriate supervision required of learners during these placements.

"The further you go up into north Queensland, the less you have. There's a real imbalance... and I look at what's going on in Victoria, and they seem to be ahead of us in providing services and workforce integration."

Cultural competency is another critical issue in regional areas, especially when providing services to Aboriginal and Torres Strait Islander people and communities. Workers often lack training in culturally safe practices, creating barriers to effective engagement. Additionally, logistical challenges like vast distances between communities and available services, limited transportation options, and unreliable internet connectivity hinder both service delivery and professional development. The Social and Emotional Wellbeing (SEWB) model plays a vital role in addressing these challenges, particularly in

Aboriginal and Torres Strait Islander people and communities, by integrating culturally safe, holistic support that combines mental health, cultural identity, and community wellbeing. Expanding the SEWB workforce and embedding its principles in service delivery could improve engagement, workforce retention, and health outcomes in regional and remote areas.

3.5 Training gaps

Employers frequently cited gaps in vocational qualifications related to practical skills and real-world applicability. Dual-diagnosis training is identified as a critical deficit, with many professionals lacking the integrated skills needed to address concurrent mental health and substance use issues. There is also a noted gap in foundational skills, such as de-escalation techniques and trauma-informed care, which are essential for managing complex client presentations.

"There's no doubt the training is useful, but when people get into the field, they often say they weren't fully prepared for the intensity of the work or the specific challenges of working with co-occurring conditions."

Employers also highlighted the need for training that better aligns with the diverse systems workers interact with, including justice, housing, and health services. A lack of focus on the broader systemic context in existing training products leaves workers ill-prepared to navigate these interfaces effectively. Additionally, the absence of clear vocational outcomes and role-specific competencies in certain qualifications has led to confusion and unmet workforce needs.

"We've seen an improvement in the general knowledge of graduates, but critical skills like cultural safety, group facilitation, and harm minimisation are often underdeveloped."

3.6 Specialised skills and niche roles

The workforce is increasingly required to possess specialised skills tailored to specific contexts, such as harm reduction in needle exchange programs or health-focused interventions in bloodborne virus prevention. In lived experience roles, skills in boundary-setting and professional advocacy are becoming essential as these positions expand beyond peer support into areas like research and policy-making.

Emerging niche roles include link workers in social prescribing, who connect clients with community resources to improve social determinants of health, and transitional support workers in hospital-to-home programs, who facilitate a person's reintegration into the community after they have been discharged from other services.

The need for cultural competency in working with Aboriginal and Torres Strait Islander people and communities remains a significant focus, particularly in remote areas.

"Trauma-informed care isn't just a buzzword; it's critical to understanding our clients' needs, but the training doesn't go far enough in equipping workers to practice this effectively."

3.7 Technology and digital competencies

Digital literacy is increasingly essential across the mental health and alcohol and other drugs sectors, with workers expected to navigate client management systems, conduct virtual consultations, and manage case notes electronically. The shift to online and hybrid training models has amplified the need for trainers and students alike to be proficient in digital tools, particularly in remote areas where face-to-face training is limited.

"As we move towards more telehealth and digital case management, workers need to be trained in these platforms to stay effective."

Employers also emphasise the importance of leveraging technology to improve client engagement and service delivery. For instance, assistive technologies and digital tools are now used to support capacity-building among clients with psychosocial disabilities. Despite these advancements, inconsistent internet connectivity in regional and remote areas remains a significant barrier to adopting technology-driven solutions.

3.8 Sector challenges

Key challenges identified through stakeholder interviews and workshops highlight the pressing issues impacting the mental health and alcohol and other drugs workforce and their training needs.

Description	Challenge
Regional and remote challenges	<ul style="list-style-type: none">• Barriers to accessing training and professional development in isolated areas.• Higher operational costs and logistical difficulties for service delivery in remote communities.• Limited housing and other social supports, impacting both clients and workers.
Training and education	<ul style="list-style-type: none">• Mismatch between training content and the practical skills required in the field, including co-occurring condition management and trauma-informed care.• Insufficient vocational placement hours for real-world application of skills.• Limited access to training for workers in remote areas due to infrastructure challenges• Demand for entry level qualifications at a lower and more accessible AQF level.
Emerging needs and trends	<ul style="list-style-type: none">• Growing need for skills in digital literacy, telehealth, and social prescribing.• Demand for updated qualifications addressing integrated care for mental health and substance use challenges.• Increasing recognition of peer-led approaches and the need for specialised training for lived experience workers.• Greater utilisation of skill sets to enable time-poor staff to upskill or transition into new roles without committing to a full qualification.

	<ul style="list-style-type: none"> • Skill sets being used to build workforce capacity, providing foundational knowledge for supporting clients with mental health and AOD challenges.
Compliance and regulation	<ul style="list-style-type: none"> • Increasing complexity of compliance requirements, including heavy regulatory burdens. • Discrepancies between state-level and national-level licensing and reporting requirements. • Challenges in maintaining alignment with updated frameworks like trauma-informed and culturally safe practices.
Workforce attraction and retention	<ul style="list-style-type: none"> • Difficulties in recruiting and retaining qualified professionals, especially in regional and remote areas. • High turnover rates due to burnout, low wages, and limited career advancement opportunities. • Shortage of First Nations workers and challenges faced by culturally diverse workers in predominantly white workplaces. • Lack of flexible pathways and support for lived experience workers entering the workforce.
Workload and resources	<ul style="list-style-type: none"> • Overburdened staff, particularly in regional and remote services, where resources are scarce. • High demand for mental health and substance use services exacerbating workforce stress.
Funding challenges	<ul style="list-style-type: none"> • Strict limitations on funding usage, leading to operational constraints. • Reliance on short-term grants, limiting sustainability for long-term projects.

Section Four: Mapping to Qualifications

4.1 Functions and Subfunctions analysis

The analysis of job roles and tasks described by interviewees, job advertisements, and position descriptions shows that many of the **broad functions** (key responsibilities or areas of work) and more specific subfunctions (component tasks or specialised activities within those areas) performed by the workforce are covered by existing units of competency. However, not all roles and tasks are fully addressed. For example, units like *CHCMHS002 Establish self-directed recovery relationships*, *CHCMHS003 Provide recovery oriented mental health services*, and *CHCMHS011 Assess and promote social, emotional and physical wellbeing* match tasks such as goal setting, recovery planning, and community collaboration performed by mental health recovery workers. Despite this, there are gaps and areas where the coverage is only partial. Some roles, especially those involving integrated care or practices like trauma-informed approaches, do not have strong unit alignment. In addition, some tasks may need more specific or customised units to handle challenges such as cultural sensitivity or dual-diagnosis support. There is also overlap between some units, making it difficult to distinguish between the unique tasks of different roles.

The next stage of the mental health, alcohol, and other drugs qualification review will be critical in addressing these gaps. It will focus on identifying units that need modification to better reflect the scope of practice, recognising gaps in the current units that require the development of new content, and exploring the potential restructuring of qualifications to provide clearer pathways and address industry needs. This review will ensure that training products are fit for purpose and aligned with workforce demands and national strategies, as outlined in the project's objectives and methodology.

Refer Appendix 7.

4.2 Analysis of required skills and knowledge mapped to existing training package components

The alignment of workforce needs in the mental health, alcohol, and other drugs sectors with current training package components was evaluated by analysing stakeholder feedback, job functions, and emerging trends. The following chart highlights the strengths and gaps in the existing training framework, assessing how effectively the current qualifications and skill sets equip the workforce to meet sector-specific skill requirements.

Refer Appendix 8.

Summary of Workforce Needs mapped to Training Package Components

Trauma-informed care	<i>CHCMHS007 Work effectively in trauma-informed care</i> <i>CHCMHS005 Provide services to people with co-existing mental health and alcohol and other drugs issues</i>	Covers basic principles but lacks advanced practical training for complex trauma scenarios in diverse settings.
Dual diagnosis skills	<i>CHCMHS005 Provide services to people with co-existing mental health and alcohol and other drugs issues</i> <i>CHCAOD004 Assess needs of clients with alcohol and other drugs issues</i>	Theoretical alignment is strong; practical integration of mental health and AOD care requires enhancement.
Professional boundaries and ethics	<i>CHCLEG001 Work legally and ethically</i> <i>CHCMHS002 Establish self-directed recovery relationships</i>	Foundational coverage, but additional focus needed for challenges in peer roles and intentional disclosure practices.
Cultural competency and safety	<i>CHCDIV002 Promote Aboriginal and/or Torres Strait Islander cultural safety</i> <i>CHCMHS011 Assess and promote social, emotional and physical wellbeing</i>	Foundational content included, practical application for Aboriginal and Torres Strait Islander peoples contexts is insufficient.
Harm reduction strategies	<i>CHCAOD001 Work in an alcohol and other drugs context</i> <i>CHCAOD007 Develop strategies for alcohol and other drugs relapse prevention and management</i>	Provides foundational knowledge but lacks depth in harm reduction for high-risk settings like needle exchanges.

Motivational interviewing	<i>CHCCCS014 Provide brief interventions</i> <i>CHCGRP002 Plan and conduct group activities</i>	Basic skills covered; advanced facilitation techniques and group dynamic management need more emphasis.
Crisis management	<i>CHCCCS019 Recognise and respond to crisis situations</i> <i>CHCCCS003 Increase the safety of individuals at risk of suicide</i>	Addresses foundational crisis response but lacks advanced de-escalation strategies for volatile non-clinical contexts.
Digital literacy	<i>Not explicitly covered</i>	Significant gap in training for digital tools, case management systems, and telehealth platforms.
System navigation	<i>CHCMHS004 Work collaboratively with the care network and other services</i> <i>CHCPRP001 Develop and maintain networks and collaborative partnerships</i>	Theoretical alignment is present; more practical tools for navigating complex systems like housing and healthcare needed.
Lived experience integration	<i>CHCPWK001 Apply peer work practices in the mental health sector</i> <i>CHCPWK003 Apply lived experience in mental health peer work</i>	Strong foundational coverage but needs focus on peer drift, stigma management, and intentional lived experience use. “Peer worker” is a term not commonly used in the AOD sector, so units appearing in AOD qualifications could instead refer to lived experience workers or specialists
Case management	<i>CHCMHS002 Establish self-directed recovery relationships</i> <i>CHCAOD006 Provide interventions for people with alcohol and other drugs issues</i>	Well-covered theoretically, but practical application of individualised recovery planning requires strengthening.
Group facilitation	<i>CHCGRP002 Plan and conduct group activities</i> <i>CHCGRP004 Deliver structured programs</i>	Core skills included but insufficient focus on managing complex group dynamics in therapeutic settings.

Skill Sets:

- The CHCSS00092 Alcohol and Other Drugs Co-existing Needs Skill Set is underutilised, showing no completions in recent data. Expanding its relevance to include advanced dual-diagnosis skills could increase uptake and value.
- The CHCSS00103 Mental Health Peer Work Skill Set provides foundational coverage for peer work but lacks customisation for AOD contexts. Note: “peer work” could be replaced with “lived experience work” or similar for the AOD workforce.

Completion Trends:

- Declining completions for the CHC53215 Diploma of Alcohol and Other Drugs may reflect a lack of perceived value or alignment with career progression opportunities. Consider revising to emphasise advanced practice skills.

Placement Hours:

- The standard 80 hours for practical placements is insufficient to develop competency in the skills needed to undertake work in this sector. Expanding the placement requirements, in particular for trauma-informed care and peer work, may better support the skill development in these areas.

Emerging Trends:

- Increased use of telehealth and digital tools highlights a critical need for units focusing on digital literacy and technology for modern service delivery.
- Expansion of peer-led roles and lived experience integration drives the demand for targeted support and leadership pathways for these workers.
- Growth in social prescribing and harm minimisation strategies underscores the need for training in these innovative approaches.
- Development of integrated care models calls for enhanced collaboration between mental health and alcohol and other drugs services.
- Increased reliance on digital literacy, telehealth, and AI tools demonstrates the need for specialised training in emerging technologies.
- Greater focus on advanced crisis management and system navigation highlights the importance of equipping workers with practical tools for complex care scenarios.

4.3 Vocational placement hours

Many stakeholders view placement hours as vital for ensuring practical skill development, especially in roles requiring relational and therapeutic expertise, like trauma-informed care and peer support. However, concerns were raised about the adequacy and implementation of these hours. Some argued that 80 hours is insufficient for developing the complex skills required, particularly in peer work, where practice and reflective learning are critical. Conversely, others highlighted challenges in finding suitable placements, particularly in rural areas, where opportunities are limited, and organisations often lack the resources to support trainees. Employers expressed hesitation to hire candidates without practical experience, even with formal qualifications, underscoring the importance of placements. There was also

a call for more structured, supervised, and impactful placement experiences, as some placements were described as poorly aligned with the learning objectives, reducing their value.

"The biggest issue with placements is finding meaningful opportunities. Too often, students are given administrative tasks instead of real client-facing experience."

Four components under review (*CHC43315 Certificate IV in Mental Health*, *CHC53315 Diploma of Mental Health*, *CHC43515 Certificate IV in Mental Health Peer Work* and *CHCSS00102 Mental Health Co-existing Needs Skill Set*) have core units explicitly requiring minimum placement hours. However, the assessment criteria for several commonly selected elective units stipulate that learners must demonstrate skills and knowledge in a real workplace setting rather than a simulated environment. For instance, units such as *CHCCCS003 Increase the safety of individuals at risk of suicide* and *CHCCCS019 Recognise and respond to crisis situations* require practical engagement with real-world scenarios, including direct interaction with people in need. Furthermore, units like *CHCAOD004 Assess needs of clients with alcohol and other drugs issues* and *CHCAOD009 Develop and review individual alcohol and other drugs treatment plans* demand evidence of applied skills, often necessitating supervised activities within a workplace.

"When placements are too short, people miss out on the chance to really build their confidence and practice what they've learned. It makes it harder for them to transition smoothly into the workforce."

While these requirements are not tied to specific minimum hours, they underscore the importance of real-world practice for competency. This reflects a broader need for robust placement opportunities to bridge theoretical knowledge and applied skills, highlighting systemic challenges such as securing appropriate placements, ensuring sufficient supervision, and addressing inequities in rural or regional access to suitable workplaces. These issues are particularly relevant when analysing the adequacy and consistency of practical training across these qualifications.

Refer Appendix 9.

4.4 Qualification Packaging Rules and Units

The qualifications under review reveal a varied structure in the number and nature of elective units available, which impacts their relevance to workforce needs.

<i>CHC43315 Certificate IV in Mental Health</i>	11 core and 4 elective (15 units)
<i>CHC43515 Certificate IV in Mental Health Peer Work</i>	8 core and 7 elective (15 units).
<i>CHC43215 Certificate IV in Alcohol and Other Drugs</i>	12 core and 5 elective (17 units)
<i>CHC53215 Diploma of Alcohol and Other Drugs</i>	16 core and 6 elective (22 units).
<i>CHC53315 Diploma of Mental Health</i>	15 core and 5 elective (20 units)

Some qualifications, like the *CHC53315 Diploma of Mental Health*, offer fewer elective options that are better aligned with the industry's needs. However, others, such as the *CHC43215 Certificate IV in Alcohol and Other Drugs*, present a wider elective bank, but stakeholders have expressed concerns about the relevance of some of these options. A focused approach to elective options may better meet industry and learner needs.

Refer Appendix 10.

Section Five: Recommendations and next steps

5.1: Recommendations for qualification enhancements

This functional analysis for the mental health, alcohol, and other drugs sectors has highlighted several key themes and priorities for consideration in redeveloping the structure and content of these Training Package components.

Key priorities for qualification redevelopment

- Trauma-responsive care
 - Embed trauma-informed and trauma-aware practices in all qualifications.
- Cultural competency
 - Include cultural safety, especially tailored for First Nations peoples, culturally diverse communities, and those with lived experience.
- Harm reduction
 - Strengthen harm minimisation strategies across all qualifications to reflect contemporary practices.
- Reflective practice and self-care:
 - Incorporate modules emphasising reflective practice and self-care as core components.
- Workplace simulations and placements:
 - Expand and refine workplace simulations.
 - Increase and contextualise vocational placement hours to reflect real-world scenarios.
- Specialised streams:
 - Introduce distinct streams or specialisations, such as AOD lived experience specialists, and consumer-focused and carer-focused mental health peer worker pathways.
 - Integrate emerging models like peer-led and lived experience-focused approaches.
- Contemporary, person-centred language:
 - Replace terms like “crisis” with industry-preferred terminology.
 - Use inclusive and non-stigmatising language throughout training materials.
- Skills focus:
 - Emphasise dual-diagnosis capabilities, social prescribing, and integrated care models.
 - Enhance skills in group facilitation, system navigation, and co-occurring condition management.
- Alignment with current practices:
 - Update units like “*CHCMHS003 Provide recovery-oriented mental health services*” to core where relevant.
 - Ensure practical, context-relevant delivery methods for telehealth and digital platforms.

- Diversity and inclusion:
 - Ensure qualifications support workforce diversity, including Aboriginal and Torres Strait Islander peoples and those with lived experience.
 - Develop resources for underrepresented groups to enhance participation in training and employment pathways.
- Professional identity:
 - Reinforce the unique identity of peer workers as a distinct vocational role.
- Digital competency:
 - Enhance references to skills required to work with digital platforms, including telehealth, AI-based case note systems and other digital-based recordkeeping systems

Recommendations for changes to Qualifications, Skill Sets and Units of Competency

CHC43315 Certificate IV in Mental Health

Change	Units
Expand focus on trauma-informed care and cultural safety to ensure practical and theoretical understanding	Several relevant units
Review placement hours to better align with real-world requirements	Where relevant
Review terminology for appropriateness	<i>CHCMHS002 Establish self-directed recovery relationships</i> (“promote the recovery approach”) <i>CHCMHS003 Provide recovery oriented mental health services</i> (“deliver a range of recovery strategies”) <i>CHCMHS004 Work collaboratively with the care network and other services</i> (“work with supporters and services”)
Change “client” and “individual” to “person”	All units
Review units to add digital skills where appropriate	Where relevant

Review units to ensure cultural sensitivity and trauma-informed care in supporting bereaved individuals and families	<i>CHCCCS018 Provide suicide bereavement support</i>
Expand performance evidence section in core units	Core units
Add a range of current approaches and frameworks to knowledge evidence	<i>CHCMHS005 Provide services to people with co-existing mental health and alcohol and other drugs issues</i> <i>CHCMHS007 Work effectively in trauma informed care</i>
Review for inclusion of references to interpersonal and domestic violence	All units
Replace “issues” with “challenges”	Where relevant
Retitle	Several units, e.g. <i>CHCMHS008 Promote and facilitate self advocacy</i> (suggested “develop person’s self advocacy skills”)
Review terminology for appropriateness	All units e.g. <i>CHCMHS011 Assess and promote social, emotional and physical wellbeing</i> (Include references to “support” rather than “assess”)
Replace superseded units	Core and elective
Consider adding to core	<i>CHCPRP003 Reflect on and improve own professional practice</i> <i>HLTWHS006 Manage personal stressors in the work environment</i>
Consider adding to elective bank	<i>CHCMHS001 Work with people with mental health issues</i> <i>CHCPRT001 Identify and respond to children and young people at risk</i> <i>CHCGRP002 Plan and conduct group activities</i> <i>CHCSOH013 Work with people experiencing or at risk of homelessness</i>

Consider removing from elective bank	<p><i>CHCAOD005 Provide alcohol and other drugs withdrawal services</i></p> <p><i>CHCEDU002 Plan health promotion and community intervention</i></p> <p><i>CHCEDU005 Work with clients to identify financial literacy education needs</i></p> <p><i>CHCEDU007 Provide group education on consumer credit and debt</i></p> <p><i>CHCEDU009 Provide parenting, health and well-being education</i></p> <p><i>CHCFAM010 Provide intervention support to families</i></p> <p><i>CHCMGT001 Develop, implement and review quality framework</i></p> <p><i>CHCPOL001 Contribute to the review and development of policies</i></p> <p><i>HLTAID013 Provide First Aid in remote or isolated site</i></p> <p><i>HLTAID014 Provide Advanced First Aid</i></p>
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CHC43515 Certificate IV in Mental Health Peer Work

Change	Units
Expand focus on trauma-informed care and cultural safety to ensure practical and theoretical understanding	Several relevant units
Review placement hours to better align with real-world requirements	Where relevant
Explore inclusion of more advanced units on peer leadership and advocacy to support career progression	Where relevant
Expand focus on ethical boundaries and the use of lived experience narratives	Throughout peer work specific units
Explore inclusion of micro-credential options for specialisations	

Review units to add digital skills	Where relevant
Integrate content addressing lived experience in AOD contexts alongside mental health	Where relevant
Separate consumer peer worker and carer peer worker skills into separate qualification streams: e.g. Certificate IV in Mental Health Peer Work (Carers) and Certificate IV in Mental Health Peer Work (Consumers)	At qualification level
Enhance advanced de-escalation skills	<i>CHCCCS019 Recognise and respond to crisis situations</i>
Review units requiring assessment of direct interaction with clients to accommodate working with digital platforms, e.g. telehealth and other services, where direct engagement skills are difficult to observe and assess	Where relevant
Review units for duplication and consider merging	<i>CHCPWK001 Apply peer work practices in the mental health sector</i> <i>CHCPWK002 Contribute to the continuous improvement of mental health services for consumers and carers</i> <i>CHCPWK003 Apply lived experience in mental health peer work</i>
Review terminology for appropriateness	<i>CHCMHS011 Assess and promote social, emotional and physical wellbeing (consider using “support” instead of “assess”</i> <i>CHCCCS019 Recognise and respond to crisis situations (review use of “crisis”)</i>
Change “client” and “individual” to “person”	All units
Add a range of current approaches and frameworks to knowledge evidence	<i>CHCMHS007 Work effectively in trauma informed care</i> <i>CHCPWK001 Apply peer work practices in the mental health sector</i>

Review all units for inclusion of references to interpersonal and domestic violence	All units
Replace “issues” with “challenges”	Where appropriate
Replace superseded units	Where appropriate
Consider adding to core	<p><i>CHCLEG001 Work legally and ethically</i></p> <p><i>CHCPRP003 Reflect on and improve own professional practice</i></p> <p><i>CHCMHS003 Provide recovery oriented mental health services</i></p>
Consider adding to elective bank	<p><i>CHCPRP001 Develop and maintain networks and collaborative partnerships</i></p> <p><i>CHCPRP003 Reflect on and improve own professional practice</i></p> <p><i>CHCLEG001 Work legally and ethically</i></p> <p><i>HLTAAP001 Recognise healthy body systems</i></p>
Consider removing from elective bank (not used in past 5 years)	<p><i>CHCCCS025 Support relationships with carers and families</i></p> <p><i>CHCCCS027 Visit client residence</i></p> <p><i>CHCCDE001 Support community participation in planning processes</i></p> <p><i>CHCCDE002 Develop and implement community programs</i></p> <p><i>CHCCDE004 Implement participation and engagement strategies</i></p> <p><i>CHCCDE006 Work to empower Aboriginal and/or Torres Strait Islander communities</i></p> <p><i>CHCCDE007 Develop and provide community projects</i></p> <p><i>CHCCDE008 Support community action</i></p> <p><i>CHCDEV002 Analyse impacts of sociological factors on clients in community work and services</i></p> <p><i>CHCEDU011 Work with parents or carers of very young children</i></p> <p><i>CHCGRP004 Deliver structured programs</i></p> <p><i>CHCMHS006 Facilitate the recovery process with the person, family and carers</i></p> <p><i>CHCPOL001 Contribute to the review and development of policies</i></p> <p><i>CHCSET001 Work with forced migrants</i></p>

	<p><i>CHCSET002 Undertake bicultural work with forced migrants in Australia</i></p> <p><i>CHCSOH002 Manage and maintain tenancy agreements and services</i></p> <p><i>CHCYTH011 Work effectively with young people and their families</i></p> <p><i>BSBINM201 Process and maintain workplace information</i></p> <p><i>BSBRES401 Analyse and present research information</i></p>
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CHC43215 Certificate IV in Alcohol and Other Drugs

Change	Units
Expand focus on trauma-informed care and cultural safety to ensure practical and theoretical understanding	Where relevant
Review placement hours to better align with real-world requirements	Where relevant
Review terminology for appropriateness	All units
Change “client” and “individual” to “person”	Where relevant
Include dual-diagnosis management, including practical approaches to co-occurring mental health and substance use issues	Where relevant
Review units to add digital skills	Where relevant
Review harm minimisation strategies to ensure alignment with emerging best practices	Where relevant
Add a range of current approaches and frameworks to knowledge evidence	<i>CHCAOD001 Work in an alcohol and other drugs context</i>
Review all units for inclusion of references to interpersonal and domestic violence	All units
Replace “issues” with “challenges”	Where relevant
Replace superseded units listed in elective bank	Where relevant
Consider adding to core	<i>CHCCCS003 Increase the safety of individuals at risk of suicide</i> <i>CHCGRP002 Plan and conduct group activities</i> <i>CHCMHS007 Work effectively in trauma informed care</i>

	<i>CHCPRP003 Reflect on and improve own professional practice</i>
Consider adding to elective bank	<i>CHCCSM012 Coordinate complex case requirements</i> <i>CHCMHS011 Assess and promote social, emotional and physical wellbeing</i> <i>HLTWHS003 Maintain work health and safety</i>
Consider removing from elective bank (not used in past 5 years)	<i>CHCAGE001 Facilitate the empowerment of older people</i> <i>CHCCCS001 Address the needs of people with chronic disease</i> <i>CHCCCS018 Provide suicide bereavement support</i> <i>CHCCCS023 Support independence and wellbeing</i> <i>CHCCCS027 Visit client residence</i> <i>CHCCDE004 Implement participation and engagement strategies</i> <i>CHCCDE006 Work to empower Aboriginal and/or Torres Strait Islander communities</i> <i>CHCCDE007 Develop and provide community projects</i> <i>CHCDIS007 Facilitate the empowerment of people with disability</i> <i>CHCDIS008 Facilitate community participation and social inclusion</i> <i>CHCEDU001 Provide community focused promotion and prevention strategies</i> <i>CHCEDU002 Plan health promotion and community intervention</i> <i>CHCEDU005 Work with clients to identify financial literacy education needs</i> <i>CHCEDU006 Improve clients' fundamental financial literacy skills</i> <i>CHCEDU007 Provide group education on consumer credit and debt</i> <i>CHCEDU008 Share health information</i> <i>CHCEDU009 Provide parenting, health and well-being education</i> <i>CHCFAM003 Support people to improve relationships</i> <i>CHCFAM010 Provide intervention support to families</i>

	<i>CHCGRP003 Plan, facilitate and review psycho-educational groups</i>
	<i>CHCGRP004 Deliver structured programs</i>
	<i>CHCLLN001 Respond to client language, literacy and numeracy needs</i>
	<i>CHCPRT002 Support the rights and safety of children and young people</i>
	<i>CHCSET001 Work with forced migrants</i>
	<i>CHCSET002 Undertake bicultural work with forced migrants in Australia</i>
	<i>CHCYTH011 Work effectively with young people and their families</i>
	<i>HLTAAP001 Recognise healthy body systems</i>
	<i>HLTHPS006 Assist clients with medication</i>
	<i>HLTHPS010 Interpret and use information about nutrition and diet</i>
	<i>HLTOHC001 Recognise and respond to oral health issues</i>
	<i>HLTOHC002 Inform and support patients and groups about oral health</i>
	<i>HLTOHC003 Apply and manage use of basic oral health products</i>
	<i>HLTOHC004 Provide or assist with oral hygiene</i>
	<i>BSBINM201 Process and maintain workplace information</i>

CHC53215 Diploma of Alcohol and Other Drugs

Change	Units
Expand focus on trauma-informed care and cultural safety to ensure practical and theoretical understanding	Where relevant
Review placement hours to better align with real-world requirements	Where relevant
Ensure unit requiring placement hours have practical skill application requirements	Where relevant
Increase focus on group facilitation and social prescribing approaches	Where relevant
Review terminology for appropriateness	All units
Change “client” and “individual” to “person”	All units
Add current approaches and frameworks to knowledge evidence	Where relevant
Review all units for inclusion of references to interpersonal and domestic violence	Where relevant
Replace “issues” with “challenges”	All units
Review units to add digital skills	Where relevant
Replace superseded units	Where relevant
Consider adding to core	<i>CHCMHS013 Implement trauma informed care</i>
Consider removing from core	<i>HLTAID011 Provide first aid</i>
Consider adding to elective bank	<i>CHCCCS019 Recognise and respond to crisis situations</i> <i>HLTAID011 Provide first aid</i>
Consider removing from elective bank	<i>CHCCDE006 Work to empower Aboriginal and/or Torres Strait Islander communities</i>

	<p><i>CHCINM001 Meet statutory and organisation information requirements</i></p> <p><i>CHCLLN001 Respond to client language, literacy and numeracy needs</i></p> <p><i>CHCMGT001 Develop, implement and review quality framework</i></p> <p><i>CHCMGT002 Manage partnership agreements with service providers</i></p> <p><i>CHCMHS004 Work collaboratively with the care network and other services</i></p> <p><i>CHCMHS012 Provide support to develop wellness plans and advanced directives</i></p> <p><i>CHCSOH002 Manage and maintain tenancy agreements and services</i></p> <p><i>CHCSOH008 Manage head lease</i></p> <p><i>CHCSOH009 Develop quality systems in line with registration standards</i></p> <p><i>CHCVOL003 Recruit, induct and support volunteers</i></p> <p><i>HLTAID014 Provide advanced first aid</i></p> <p><i>HLTHPS006 Assist clients with medication</i></p> <p><i>HLTHPS010 Interpret and use information about nutrition and diet</i></p> <p><i>HLTOHC001 Recognise and respond to oral health issues</i></p> <p><i>HLTOHC002 Inform and support patients and groups about oral health</i></p> <p><i>HLTOHC003 Apply and manage use of basic oral health products</i></p> <p><i>HLTOHC004 Provide or assist with oral hygiene</i></p> <p><i>BSBFIM501 Manage budgets and financial plans</i></p>
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CHC53315 Diploma of Mental Health

Change	Units
Expand focus on trauma-informed care and cultural safety to ensure practical and theoretical understanding	Where relevant

Add focus on system navigation	Where relevant
Review placement hours to better align with real-world requirements	Where relevant
Review terminology for appropriateness	All units
Change “client” and “individual” to “person”	All units
Review units to add digital skills	Where relevant
Add current approaches and frameworks to knowledge evidence of several units, including motivational interviewing, complex care coordination, acceptance commitment therapy	Where relevant
Review all units for inclusion of references to interpersonal and domestic violence	All units
Replace “issues” with “challenges”	All units
Replace superseded units	Where relevant
Consider adding to core (issues raised by employers)	<i>CHCMHS007 Work effectively in trauma informed care</i>
Consider adding to elective bank (often delivered as part of this qualification)	<i>CHCCCS003 Increase the safety of individuals at risk of suicide</i> <i>CHCCSM005 Develop, facilitate and review all aspects of case management</i> <i>CHCDEV001 Confirm client developmental status</i> <i>CHCLEG001 Work legally and ethically</i> <i>CHCMHS001 Work with people with mental health issues</i>

	<p><i>CHCPRP001 Develop and maintain networks and collaborative partnerships</i></p> <p><i>HLTENN009 Implement and monitor care for a person with mental health conditions</i></p>
Consider adding to elective bank (to meet stated needs of employers)	<i>Peer work units</i>
Consider removing from elective bank (not used in past 5 years)	<p><i>CHCAOD003 Provide needle and syringe services</i></p> <p><i>CHCINM001 Meet statutory and organisation information requirements</i></p> <p><i>BSBFIM501 Manage budgets and financial plans</i></p> <p><i>CHCSOH002 Manage and maintain tenancy agreements and services</i></p> <p><i>CHCSOH008 Manage head lease</i></p> <p><i>CHCSOH009 Develop quality systems in line with registration standards</i></p> <p><i>CHCVOL003 Recruit, induct and support volunteers</i></p>

CHCSS00092 Alcohol and Other Drugs Co-existing Needs Skill Set

- Has not been used for the past 5 years
- All 4 units are current
- Language and terminology in all units will be reviewed
- Industry will be consulted to determine whether to delete
- If not to delete, include trauma informed and dual diagnosis skills

CHCSS00093 Alcohol and Other Drugs Skill Set

- 1,840 enrolments in 2023
- Listed by Victorian government as a minimum requirement for the AOD workforce
- All 4 units are current
- Introduce practical harm minimisation techniques and the role of peer support in AOD settings
- Language and terminology in all units will be reviewed.

CHCSS00102 Mental Health Co-existing Needs Skill Set

- 260 enrolments in 2023
- All 4 units are current

- Language and terminology in all units will be reviewed
- CHCMHS011 Assess and promote social, emotional and physical wellbeing is expected to be modified to replace the term “assess” with “support”
- Include guidance on culturally safe practices for working with Aboriginal and Torres Strait Islander people

CHCSS00103 Mental Health Peer Work Skill Set

- 150 enrolments in 2023
- All 3 units are current
- Language and terminology in all units will be reviewed
- Expand focus on ethical boundaries and the use of lived experience narratives

CHCSS00112 Suicide Bereavement Support Skill Set

- Has not been used for the past 5 years
- All 4 units are current
- Exact duplicate of CHCSS00113 Crisis Support Skill Set
- Language and terminology in all units will be reviewed
- Industry will be consulted to determine whether to delete
- If not deleting, ensure integration of cultural sensitivity and trauma-informed care in supporting bereaved individuals and families.

CHCSS00113 Crisis Support Skill Set

- 805 enrolments in 2023
- All 3 units are current
- Language and terminology in all units will be reviewed
- Strengthen practical crisis intervention techniques, with specific attention to suicide prevention and de-escalation

CHCSS00138 Mental Health Assistance

- Has not been used for the past 5 years
- Both units are current
- Language and terminology in all units will be reviewed
- Industry will be consulted to determine whether to delete

Companion Volume Implementation Guide

Include explanation and examples where assessment of skills appearing in several units within the one qualification or skill set can be mapped to avoid having to deliver and reassess the same skills and knowledge several times.

5.2 Next steps

The next phase involves targeted consultations with Registered Training Organisations to refine proposed qualification changes and ensure their practical deliverability. Insights gathered through workshops, virtual forums and industry surveys have been integral in shaping the approach to finalising qualifications, skill sets and units of competency.

Importantly, validation by the technical committee overseeing this review will be required before the suggested revisions are made public. The committee's feedback will guide the drafting of the revised training products, ensuring alignment with sector needs and strategic priorities. Professional development workshops will be designed to upskill trainers and assessors on new content, emphasising the need to integrate lived experience frameworks and flexible delivery modes to address the needs of regional and remote workforces. These steps will result in a comprehensive submission for Skills Ministers' endorsement, paving the way for the updated qualifications to be implemented across Australia.

Appendices

Appendix 1: Training Package Components

Qualifications

- [CHC43315 Certificate IV in Mental Health](#)
- [CHC43515 Certificate IV in Mental Health Peer Work](#)
- [CHC43215 Certificate IV in Alcohol and Other Drugs](#)
- [CHC53215 Diploma of Alcohol and Other Drugs](#)
- [CHC53315 Diploma of Mental Health](#)

Skill sets

- [CHCSS00092 Alcohol and Other Drugs Co-existing Needs Skill Set](#)
- [CHCSS00093 Alcohol and Other Drugs Skill Set](#)
- [CHCSS00102 Mental Health Co-existing Needs Skill Set](#)
- [CHCSS00103 Mental Health Peer Work Skill Set](#)
- [CHCSS00112 Suicide Bereavement Support Skill Set](#)
- [CHCSS00113 Crisis Support Skill Set](#)
- [CHCSS00138 Mental Health Assistance](#)

Units of competency

- [CHCAOD001 Work in an alcohol and other drugs context](#)
- [CHCAOD002 Work with clients who are intoxicated](#)
- [CHCAOD003 Provide needle and syringe services](#)
- [CHCAOD004 Assess needs of clients with alcohol and other drugs issues](#)
- [CHCAOD005 Provide alcohol and other drugs withdrawal services](#)
- [CHCAOD006 Provide interventions for people with alcohol and other drugs issues](#)
- [CHCAOD007 Develop strategies for alcohol and other drugs relapse prevention and management](#)
- [CHCAOD008 Provide advanced interventions to meet the needs of clients with alcohol and other drugs issues](#)
- [CHCAOD009 Develop and review individual alcohol and other drugs treatment plans](#)
- [CHCCCS003 Increase the safety of individuals at risk of suicide](#)
- [CHCCCS014 Provide brief interventions](#)
- [CHCCCS017 Provide loss and grief support](#)
- [CHCCCS018 Provide suicide bereavement support](#)
- [CHCCCS019 Recognise and respond to crisis situations](#)
- [CHCCCS028 Provide client-centred support to people in crisis](#)

- [CHCCOM006 Establish and manage client relationships](#)
- [CHCEDU001 Provide community focused health promotion and prevention strategies](#)
- [CHCEDU008 Share health information](#)
- [CHCMHS001 Work with people with mental health issues](#)
- [CHCMHS002 Establish self-directed recovery relationships](#)
- [CHCMHS003 Provide recovery oriented mental health services](#)
- [CHCMHS004 Work collaboratively with the care network and other services](#)
- [CHCMHS005 Provide services to people with co-existing mental health and alcohol and other drugs issues](#)
- [CHCMHS006 Facilitate the recovery process with the person, family and carers](#)
- [CHCMHS007 Work effectively in trauma informed care](#)
- [CHCMHS008 Promote and facilitate self advocacy](#)
- [CHCMHS009 Provide early intervention, health prevention and promotion programs](#)
- [CHCMHS010 Implement recovery oriented approaches to complexity](#)
- [CHCMHS011 Assess and promote social, emotional and physical wellbeing](#)
- [CHCMHS012 Provide support to develop wellness plans and advanced directives](#)
- [CHCMHS013 Implement trauma informed care](#)
- [CHCPRP002 Collaborate in professional practice](#)
- [CHCPWK001 Apply peer work practices in the mental health sector](#)
- [CHCPWK002 Contribute to the continuous improvement of mental health services](#)
- [CHCPWK003 Apply lived experience in mental health peer work](#)
- [CHCPWK004 Work effectively in consumer mental health peer work](#)
- [CHCPWK005 Work effectively with carers as a mental health peer worker](#)
- [CHCPWK006 Promote and conduct mental health peer work](#)

Appendix 2: Organisations interviewed

Arches Foundation (QLD)

CAAPS Aboriginal Corporation (NT)

Carbal Medical Services (QLD)

Charles Darwin University (NT)

Communify (QLD)

Consumers of Mental Health WA (WA)

Cyrenian House (WA)

Department of Health Mental Health, Alcohol and Other Drugs Branch (NT)

Drug and Alcohol Services SA (SA)

Employee at Hire Up (VIC)

GenU (VIC)

Goldbridge (QLD)

Hawkeye Consultancy (QLD)

Insight: Centre for Alcohol and Other Drug Training and Workforce Development (QLD)

LaTrobe Community Health Service (VIC)

Life Without Barriers (SA)

Life Without Barriers (VIC)

Lived Experience Australia (NSW)

Lives Lived Well (QLD)

Mental Health First Aid International (VIC)

Mind Australia (SA)

Mulgrave Complete Care (QLD)

Odyssey House (VIC)

Orygen (VIC)

Palmerston (WA)

Primary & Community Care Services Ltd (QLD)

Queensland Centre for Mental Health Learning (QLD)

Queensland Network of Alcohol and Other Drugs Agencies (QNADA) (QLD)

Reach Out (NSW)

RUAH Community Services (WA)

Salvation Army (WA)

Self Help Addiction Resource Centre (VIC)

St Vincent de Paul Society QLD (QLD)

Substance Misuse Limestone Coast (SA)

Sunrise Coordination Services (SA)

Turning Point (VIC)

Wesley Mission Queensland (QLD)

WHOS Treatment Services (QLD)

Government and Peak Body Consultation

An information and discussion session was conducted to gather information from State, Territory, and Federal Government Departments and State and Territory Mental Health Commissions

Tasmanian Department of Health (TAS)

Mental Health Commission of NSW (NSW)

Mental Health Commission of WA (WA)

Office for Mental Health and Wellbeing ACT (ACT)

Queensland Mental Health Commission (QLD)

Tasmanian Centre for Mental Health Service Innovation (TAS)

Appendix 3: List of Services and Sectors

Mental Health Services

- **Community Mental Health Services:**
 - Psychosocial support
 - Counselling
 - Case management
 - Community outreach
- **Residential Mental Health Services:**
 - Transitional care
 - Supported accommodation
 - Long-term care for individuals with complex mental health needs
- **Hospital-Based Mental Health Services:**
 - Mental health inpatient units
 - Discharge planning and post-hospitalisation support
- **Peer Support Services:**
 - Mental health peer work in inpatient and community settings
 - Peer advocacy and support groups

Alcohol and Other Drugs (AOD) Services

- **Rehabilitation and Withdrawal Services:**
 - Residential rehabilitation centres
 - Non-residential detox and withdrawal programs
- **Counselling and Support:**
 - Outpatient counselling
 - Brief intervention and harm reduction programs
- **Needle and Syringe Programs (NSP):**
 - Harm minimisation services
 - Education on safe substance use practices
- **Court Diversion and Justice Programs:**
 - Supporting individuals through alternative sentencing programs
 - Counselling and rehabilitation for drug-related offenders

Family and Domestic Violence Support

- **Crisis and Emergency Accommodation:**
 - Support for individuals and families escaping violence
 - Trauma-informed care in shelters and crisis centres
- **Counselling and Advocacy Services:**

- Addressing co-occurring mental health and AOD issues

Youth Services

- **Youth Outreach Programs:**
 - Addressing AOD issues in young people
 - Mental health support for at-risk youth
- **Youth Residential Services:**
 - Support for homeless or at-risk youth with mental health and AOD challenges

Indigenous and Culturally Specific Services

- **Aboriginal and Torres Strait Islander Health Services:**
 - Social and emotional wellbeing programs
 - Culturally informed AOD and mental health support
- **Multicultural and CALD Services:**
 - Support tailored to culturally and linguistically diverse communities

Homelessness and Housing Support

- **Homelessness Outreach Services:**
 - Crisis intervention
 - Long-term housing solutions with mental health and AOD support
- **Housing Stability Programs:**
 - Supporting tenants to maintain housing
 - Addressing barriers like mental health or substance use

Education and Prevention Programs

- **Community Education Initiatives:**
 - Public awareness campaigns on mental health and AOD issues
 - Training for community leaders and organisations
- **School-Based Programs:**
 - Education on substance use and mental health for students and teachers

Employment and Vocational Support

- **Job Placement and Training Programs:**
 - Support for individuals recovering from AOD or mental health issues to find employment
- **Social Enterprises:**
 - Opportunities in community-led businesses that support recovery and well-being

Specialist Services

- **Dual Diagnosis Programs:**

- Integrated care for co-occurring mental health and substance use disorders
- Family Support Services:
 - Support for families affected by a loved one's mental health or AOD issues

Advocacy and Systemic Reform

- Policy and Advocacy Organisations:
 - Lived experience advisory roles
 - Contributions to policy development and systemic change
- Consumer and Carer Representation:
 - Ensuring the voices of service users inform organisational practices and policies

Appendix 4: Job Advertisements

Sample of advertisements and job descriptions relating to mental health work, mental health peer work and alcohol and other drugs work.

Job Title	Employer	Job Functions/Tasks	Key Skills Required	Qualifications/Licences/Certifications
Mental health support worker	Anglicare	Participate in programs to develop daily living skills, facilitate integration into the community, liaise with families and external providers.	Empathy, interpersonal skills	<i>Certificate IV in Mental Health, Disability, or Individual Support; First Aid</i>
Mental health recovery worker	Anglicare	Provide psychosocial rehabilitation and recovery planning, assist with transitioning clients to independent living, maintain client-centred support.	Case management skills, interpersonal skills	Tertiary qualifications in Psychology, Social Work, or Nursing; <i>Certificate IV in Mental Health</i>
Support worker mental health	Agency Representing Various Organisations	Provide care for individuals with disabilities and mental health conditions, manage de-escalation, assist with daily living activities.	Behavioural management skills, flexible availability	First Aid, CPR
Mental health support worker	Autistic Vision Australia	Assist with life management tasks, support daily routines, provide emotional and practical support, manage documentation.	Organisational skills, communication skills, experience in residential support	First Aid, ABN
Mental health support worker	Brave Mind Social Services	Provide person-centred support, assist with NDIS goals, deliver case notes, emotional and practical support.	Understanding of NDIS goals, interpersonal skills	Tertiary qualifications or relevant experience; First Aid, CPR

Peer wellbeing navigator	Wellways Australia Limited	Offer peer support and care planning, facilitate group sessions, support engagement with clinical services.	Lived experience, interpersonal skills, group facilitation	Certificate IV/Diploma in Mental Health or AOD; driver's licence
Alcohol and other drugs support worker	Carbal Medical Services	Assist individuals with addiction issues, deliver culturally sensitive services, provide referrals and maintain records.	Cultural sensitivity, strong communication skills	Certificate III/IV in Aboriginal Primary Health Care or AOD
Alcohol and other drugs worker residential	Ted Noffs Foundation	Support young people in a residential drug and alcohol program, supervise daily activities, facilitate group sessions.	Experience with youth in AOD settings, interpersonal skills	NSW Working with Children Check, First Aid
Mental health support worker	Primacy Care Australia	Support participants in accessing the community, maintain relationships, and manage appointments.	Time management, interpersonal skills	NDIS worker Screening Check, First Aid/CPR, driver's licence
Team leader lived experience workforce	South West Healthcare	Ensure lived experience perspectives are central to operations, engage stakeholders, develop workforce strategies.	Stakeholder engagement, leadership, communication	Lived experience, understanding of peer work principles
Aod/drug & alcohol counsellor	International Health and Medical Services	Assess and manage substance use clients, deliver individual counselling, and facilitate SMART recovery groups.	Counselling, SMART recovery facilitation, communication skills	Counselling, SMART recovery facilitation, communication skills
Support worker	Drug and Alcohol Services Australia Ltd	Deliver care in a therapeutic community, support treatment plans, facilitate daily living tasks.	Therapeutic care, treatment plan implementation, daily living support	Therapeutic care, treatment plan implementation, daily living support

Peer support worker	Neami National Limited	Provide intentional peer support and promote empowerment, handle intake interviews, conduct partnership work.	Interpersonal skills, lived experience, advocacy	Certificate IV in Mental Health, driver's licence
Peer worker – alcohol and other drugs	EACH	Facilitate AOD recovery groups, provide one-on-one support, mentor peer trainees, contribute to program culture.	Trauma-informed care, mentoring, group facilitation	Trauma-informed care, mentoring, group facilitation
Mental health and disability support workers	Epic Support Services	Provide support for people with brain disorders, assist with daily tasks, capacity building, community access.	Experience with Autism Spectrum Disorder, capacity-building skills	Certificate IV in Mental Health or Disability Support
Mental health support worker	Insight Mental Health	Deliver essential services for individuals with disabilities, align services with NDIS goals, provide tailored consultation.	Strong interpersonal skills, service coordination	Tertiary qualifications in Social Sciences or relevant experience
Mental health support workers	Alacrity Health	Offer trauma-informed 1:1 support, build independent living skills, maintain case notes, and participate in development activities.	Trauma-informed care, independent living skill development	<i>Certificate IV in Mental Health, AOD, or Peer Support; NDIS Worker Screening Check</i>
Aod support worker	Uniting	Provide counselling for AOD withdrawal, assist with individual treatment plans, facilitate group work.	Group facilitation, harm minimisation knowledge	Certificate IV in Alcohol and Other Drugs
Aboriginal mental health worker	Broome Regional Aboriginal Medical Services	Deliver SEWB programs, provide counselling and case management, culturally sensitive service delivery.	Experience in SEWB programs, cultural competence	Certificate IV in Aboriginal Primary Health Care; AHPRA registration

Prevention officer	Hope Community Services	Advance AOD prevention strategies, liaise with stakeholders, maintain records, and develop promotional strategies.	Stakeholder engagement, report writing, communication skills	Experience in AOD prevention; First Aid certification
Aod tenancy and support worker	Self-Help Addiction Resource Centre	Support day-to-day operations of recovery housing, conduct intake assessments, manage tenancy tasks.	Tenancy management, intake assessment	Tertiary qualifications in health or social sciences (preferred)
Aod community service worker	WHOS	Assess clients for residential treatment services, deliver therapeutic interventions, support group facilitation.	Group facilitation, therapeutic intervention skills	Certificate IV in AOD or higher
Mental health support worker	Magnus Health Pty Ltd	Assist participants with high-intensity needs, provide personal care, medication management, and implement behaviour strategies.	Crisis intervention, medication management, behavioural strategies	<i>Certificate III in Individual Support</i> ; Blue Card; NDIS Worker Screening Check
Family/carers peer worker older persons mental health service	Langford Support Services	Support families in mental health recovery through trauma-informed principles and human rights awareness.	Crisis intervention, flexibility, strong communication	<i>Certificate III in Individual Support</i> ; trauma-informed care; National Police Check
Complex support worker	Langford Support Services	Provide individualised and flexible support to people with complex needs, handle crisis intervention.	Crisis intervention, flexibility, strong communication	<i>Certificate III in Individual Support</i> ; trauma-informed care; National Police Check
Mental health support worker	Melbourne Health and Care Services	Deliver high-quality support to participants with diverse mental health conditions, assist with daily living.	Interpersonal skills, time management	Experience in mental health support, driver's licence

Female mental health support worker	Conscious Care Group	Support NDIS participants with mental health conditions, manage medication and behaviour strategies.	Medication management, trauma-informed care	Certificate IV in Mental Health, driver's licence
Mental health support worker	Richmond Futures, Hobart	Provide high-quality care to participants with psychosocial disabilities, build independent living skills.	Experience with NDIS, skill-building	Certificate IV in Mental Health or Disability Support
Support worker	Interact Australia	Assist with community participation, skill-building, vocational preparation, and record-keeping.	Communication, vocational preparation skills	<i>Certificate IV in Mental Health or Disability</i> ; understanding of NDIS principles
Mental health and disability support worker (female support staff)	Hope Circle, Perth	Collaborate with staff to enhance participant goals, assist with community and social engagement.	Leadership, stakeholder engagement, communication	Lived experience, program management

Appendix 5: Enrolment and Completion data

Qualifications enrolments	2018	2019	2020	2021	2022	2023
CHC43315 Certificate IV in Mental Health	6204	7527	9634	12410	11988	12774
CHC43515 Certificate IV in Mental Health Peer Work	703	718	1057	1222	1249	1499
CHC43215 Certificate IV in Alcohol and Other Drugs	1939	1726	1619	1906	1814	1992
CHC53215 Diploma of Alcohol and Other Drugs	912	865	772	706	602	553
CHC53315 Diploma of Mental Health	2266	2703	2812	4000	4535	5063
Skill Sets – enrolments	2018	2019	2020	2021	2022	2023
CHCSS00092 Alcohol and Other Drugs Co-existing Needs Skill Set	2	0	0	0	0	0
CHCSS00093 Alcohol and Other Drugs Skill Set	8	44	2	0	203	644
CHCSS00102 Mental Health Co-existing Needs Skill Set	12	20	1	52	54	86
CHCSS00103 Mental Health Peer Work Skill Set	1	0	30	76	56	102
CHCSS00112 Suicide Bereavement Support Skill Set	0	0	0	0	0	0
CHCSS00113 Crisis Support Skill Set	0	0	0	0	0	806
CHCSS00138 Mental Health Assistance	0	0	0	0	0	0
Qualifications – Completions	2018	2019	2020	2021	2022	2023
CHC43315 Certificate IV in Mental Health	1219	1347	1047	1696	2008	2110
CHC43515 Certificate IV in Mental Health Peer Work	171	167	180	238	282	277

CHC43215 Certificate IV in Alcohol and Other Drugs	542	458	364	472	460	420
CHC53215 Diploma of Alcohol and Other Drugs	130	134	98	103	113	145
CHC53315 Diploma of Mental Health	287	326	317	558	814	979
Skill Sets – Completions	2018	2019	2020	2021	2022	2023
CHCSS00092 Alcohol and Other Drugs Co-existing Needs Skill Set	2	0	0	0	0	0
CHCSS00093 Alcohol and Other Drugs Skill Set	10	30	0	0	29	158
CHCSS00102 Mental Health Co-existing Needs Skill Set	13	16	0	4	36	0
CHCSS00112 Suicide Bereavement Support Skill Set	0	0	0	0	0	0
CHCSS00103 Mental Health Peer Work Skill Set	4	0	49	62	15	3
CHCSS00113 Crisis Support Skill Set	0	0	0	0	0	664
CHCSS00138 Mental Health Assistance	0	0	0	0	0	0

Note: Completion statistics provided for 2023 are considered “preliminary” and not yet fully substantiated. (National Centre for Vocational Education Research (NCVER), 2023. Total VET Students and Courses, 2023. Available at: <https://www.ncver.edu.au/research-and-statistics/publications/all-publications/total-vet-students-and-courses-2023>)

Appendix 6: Registered Training Organisations

Registered Training Organisations with the Mental Health and Alcohol and Other Drugs qualifications on their scope of registration.

Qualification	Total	NSW	VIC	QLD	SA	WA	TAS	NT	ACT
<u>CHC43315 Certificate IV in Mental Health</u>	47	7	27	5	0	4	1	2	1
<u>CHC43515 Certificate IV in Mental Health Peer Work</u>	285	98	95	47	16	12	7	5	5
<u>CHC43215 Certificate IV in Alcohol and Other Drugs</u>	38	6	14	8	3	4	1	2	0
<u>CHC53215 Diploma of Alcohol and Other Drugs</u>	22	3	11	3	0	2	1	1	1
<u>CHC53315 Diploma of Mental Health</u>	68	20	30	9	3	6	0	0	0
Total		134	177	72	22	28	10	10	7

Appendix 7: Key job roles, functions and sub functions

These job titles and related job functions reflect the variety of roles available within the Mental Health and Alcohol and Other Drugs sectors, ranging from direct client support to specialist clinical and advocacy positions. This list focusses on roles that relate to the qualifications and skill sets reviewed in this project and are generally undertaken by people with a vocational education, skill set or no formal qualification in this field.

Roles	Function performed	Sub functions	Relevant units of competency
Mental Health			
Mental health recovery worker	Support individuals with severe mental illness in recovery and rehabilitation	Goal setting, recovery planning, life skills development, community participation, medication management, crisis management, maintaining safe environments, accurate record-keeping, collaborating with other service providers.	<i>CHCMHS002 Establish self-directed recovery relationships</i> <i>CHCMHS003 Provide recovery oriented mental health services</i> <i>CHCMHS004 Work collaboratively with the care network and other services</i> <i>CHCMHS008 Promote and facilitate self-advocacy</i> <i>CHCMHS011 Assess and promote social emotional and physical wellbeing</i>
Mental health support worker	Assist clients with psychosocial disabilities in achieving daily living and personal goals	Personal care, community access, meal preparation, transport, support plan implementation, medication management, liaison with families and providers, accurate record-keeping.	<i>CHCMHS001 Work with people with mental health issues</i> <i>CHCMHS003 Provide recovery oriented mental health services</i> <i>CHCMHS008 Promote and facilitate self-advocacy</i> <i>CHCMHS011 Assess and promote social emotional and physical wellbeing</i> <i>HLTWHS001 Participate in workplace health and safety</i>

Roles	Function performed	Sub functions	Relevant units of competency
Peer wellbeing navigator	Provide peer support and guidance for mental health recovery	Intentional peer support, service navigation, care planning, group facilitation, capacity building, engagement with clinical supports, fostering empowerment.	<i>CHCPWK001 Apply peer work practices in the mental health sector</i> <i>CHCPWK003 Apply lived experience in mental health peer work</i> <i>CHCMHS008 Promote and facilitate self-advocacy</i> <i>CHCMHS011 Assess and promote social emotional and physical wellbeing</i> <i>CHCMHS007 Work effectively in trauma informed care</i>
Mental health case manager	Coordinate care and support for mental health clients	Developing individualised care plans, connecting clients with resources, monitoring progress, and collaborating with stakeholders.	<i>CHCMHS002 Establish self-directed recovery relationships</i> <i>CHCMHS004 Work collaboratively with the care network and other services</i> <i>CHCMHS005 Provide services to people with co-existing mental health and alcohol and other drugs issues</i> <i>CHCPRP001 Develop and maintain networks and collaborative partnerships</i>
Psychosocial support worker	Provide tailored psychosocial support for mental health recovery	Assisting with daily tasks, managing social interactions, and building life skills.	<i>CHCMHS003 Provide recovery oriented mental health services</i> <i>CHCMHS008 Promote and facilitate self-advocacy</i> <i>CHCMHS011 Assess and promote social emotional and physical wellbeing</i> <i>CHCADV001 Facilitate the interests and rights of clients</i> <i>CHCMHS007 Work effectively in trauma informed care</i>

Roles	Function performed	Sub functions	Relevant units of competency
Social and emotional wellbeing worker	Provides mental health, cultural identify and wellbeing support, in Aboriginal and/or Torres Strait Islander people and communities	Supporting people with mental health issues, grief and trauma recovery, facilitating community wellbeing programs, connecting people to services, advocating for culturally responsive care, delivering mental health education	<p><i>CHCMHS011 Assess and promote social, emotional, and physical wellbeing</i></p> <p><i>CHCDIV002 Promote Aboriginal and/or Torres Strait Islander cultural safety</i></p> <p><i>CHCLEG001 Work legally and ethically</i></p> <p><i>CHCMHS002 Establish self-directed recovery relationships</i></p> <p><i>CHCMHS004 Work collaboratively with the care network and other services</i></p> <p><i>CHCMHS005 Provide services to people with co-existing mental health and alcohol and other drugs issues</i></p> <p><i>CHCMHS007 Work effectively in trauma informed care</i></p>
Aboriginal community liaison officer	Bridge service delivery to Aboriginal communities	Case management, cultural advocacy, community engagement, referral pathways, and cultural sensitivity.	<p><i>CHCDIV002 Promote Aboriginal and/or Torres Strait Islander cultural safety</i></p> <p><i>CHCMHS004 Work collaboratively with the care network and other services</i></p> <p><i>CHCMHS006 Facilitate the recovery process with the person, family and carers</i></p> <p><i>CHCMHS007 Work effectively in trauma informed care</i></p>
Mental health outreach worker	Deliver mental health services directly in the community	Home visits, crisis intervention, connecting clients to services, advocacy, and support for daily activities.	<p><i>CHCMHS004 Work collaboratively with the care network and other services</i></p> <p><i>CHCMHS007 Work effectively in trauma informed care</i></p> <p><i>CHCMHS011 Assess and promote social emotional and physical wellbeing</i></p> <p><i>CHCCCS019 Recognise and respond to crisis situations</i></p>

Roles	Function performed	Sub functions	Relevant units of competency
Lived experience workforce lead	Coordinate and lead peer workforce initiatives	Mentorship, professional development for peers, integrating lived experience perspectives in service delivery.	<i>CHCPWK001 Apply peer work practices in the mental health sector</i> <i>CHCPWK003 Apply lived experience in mental health peer work</i> <i>CHCPWK005 Work effectively with carers as a mental health peer worker</i> <i>CHCPOL001 Contribute to the review and development of policies</i>
Cultural support worker	Provide culturally tailored support services	Advocacy, education, community engagement, and direct support.	<i>CHCDIV002 Promote Aboriginal and/or Torres Strait Islander cultural safety</i> <i>CHCMHS006 Facilitate the recovery process with the person family and carers</i> <i>CHCMHS008 Promote and facilitate self-advocacy</i>

Roles	Function performed	Sub functions	Relevant units of competency
Alcohol and Other Drugs (AOD)			
AOD support worker	Provide assistance for individuals with substance use disorders	Assisting with harm reduction strategies, referrals, practical support, education, and counselling.	<i>CHCAOD001 Work in an alcohol and other drugs context</i> <i>CHCAOD002 Work with clients who are intoxicated</i> <i>CHCAOD004 Assess needs of clients with alcohol and other drugs issues</i> <i>CHCAOD006 Provide interventions for people with alcohol and other drugs issues</i>
AOD case manager	Coordinate treatment plans and monitor progress for clients with AOD challenges	Assessment, treatment planning, referrals, and case note management.	<i>CHCAOD004 Assess needs of clients with alcohol and other drugs issues</i> <i>CHCAOD006 Provide interventions for people with alcohol and other drugs issues</i> <i>CHCMHS005 Provide services to people with co-existing mental health and alcohol and other drugs issues</i> <i>CHCMGT001 Develop implement and review quality framework</i>
Needle exchange program coordinator (or harm reduction coordinator)	Oversee harm reduction efforts through needle exchange services	Distribution of clean supplies, harm reduction education, and community outreach.	<i>CHCAOD001 Work in an alcohol and other drugs context</i> <i>CHCAOD008 Provide advanced interventions to meet the needs of clients with alcohol and other drugs issues</i> <i>CHCAOD009 Develop and review individual alcohol and other drugs treatment plans</i>
Sobering up unit support worker	Provide a safe space for individuals recovering from intoxication	Monitoring health, ensuring safety, providing basic care, and supporting transitions to further care.	<i>CHCAOD002 Work with clients who are intoxicated</i> <i>CHCAOD005 Provide alcohol and other drugs withdrawal services</i> <i>HLTWHS001 Participate in workplace health and safety</i>

Roles	Function performed	Sub functions	Relevant units of competency
Residential rehabilitation worker (or residential support worker)	Support individuals in recovery-focused residential settings	Group facilitation, daily task supervision, therapeutic interventions, household management.	<i>CHCMHS003 Provide recovery oriented mental health services</i> <i>CHCAOD006 Provide interventions for people with alcohol and other drugs issues</i> <i>CHCMHS007 Work effectively in trauma informed care</i> <i>CHCADV001 Facilitate the interests and rights of clients</i>
AOD counsellor	Provide specialised support and interventions for individuals with alcohol and other drug-related challenges.	Counselling, developing treatment plans, relapse prevention strategies, harm reduction education, and facilitating individual or group therapy sessions.	<i>CHCAOD001 Work in an alcohol and other drugs context</i> <i>CHCAOD006 Provide interventions for people with alcohol and other drugs issues</i> <i>CHCAOD008 Provide advanced interventions to meet the needs of clients with alcohol and other drugs issues</i> <i>CHCCSL001 Establish and confirm the counselling relationship</i>

Roles	Function performed	Sub functions	Relevant units of competency
Combined Roles (Mental Health and AOD)			
Dual diagnosis clinician/specialist	Address co-occurring mental health and substance use disorders	Assessment, integrated care planning, therapeutic interventions, case management.	<i>CHCMHS005 Provide services to people with co-existing mental health and alcohol and other drugs issues</i> <i>CHCMHS007 Work effectively in trauma informed care</i> <i>CHCAOD006 Provide interventions for people with alcohol and other drugs issues</i> <i>CHCCCS004 Assess co-existing needs</i>
Community AOD and mental health worker	Provide holistic care for individuals with both AOD and mental health challenges	Supporting harm reduction, mental health interventions, community referrals, and client engagement.	<i>CHCMHS005 Provide services to people with co-existing mental health and alcohol and other drugs issues</i> <i>CHCMHS011 Assess and promote social emotional and physical wellbeing</i> <i>CHCAOD006 Provide interventions for people with alcohol and other drugs issues</i> <i>CHCMHS004 Work collaboratively with the care network and other services</i>
Social prescribing link worker (or social connection worker)	Connect clients with non-clinical resources to improve overall wellbeing	Referrals to community programs, social activities, and support networks.	<i>CHCMHS011 Assess and promote social emotional and physical wellbeing</i> <i>CHCEDU001 Provide community focused health promotion and prevention strategies</i> <i>CHCCCS004 Assess co-existing needs</i>

Roles	Function performed	Sub functions	Relevant units of competency
Counsellor	Provide therapeutic and emotional support	Provide therapeutic and emotional support	<p><i>CHCCSL001 Establish and confirm the counselling relationship</i></p> <p><i>CHCCSL002 Apply specialist interpersonal and counselling interview skills</i></p> <p><i>CHCCSL003 Facilitate the counselling relationship and process</i></p> <p><i>CHCCCS017 Provide loss and grief support</i></p> <p><i>CHCMHS011 Assess and promote social, emotional, and physical wellbeing</i></p> <p><i>CHCAOD006 Provide interventions for people with alcohol and other drugs issues</i></p> <p><i>CHCCCS004 Assess co-existing needs</i></p> <p><i>CHCAOD008 Provide advanced interventions to meet the needs of clients with alcohol and other drugs issues</i></p>
Broader or Related Roles			
Community mental health worker	Support clients in community settings to achieve mental health goals	Case management, advocacy, community engagement, and group work facilitation.	<p><i>CHCMHS001 Work with people with mental health issues</i></p> <p><i>CHCMHS004 Work collaboratively with the care network and other services</i></p> <p><i>CHCCCS004 Assess co-existing needs</i></p>
Family support worker (AOD and gambling)	Provide support to families impacted by AOD and gambling	Counselling, educational sessions, family mediation, and support planning.	<p><i>CHCAOD005 Provide alcohol and other drugs withdrawal services</i></p> <p><i>CHCCCS004 Assess co-existing needs</i></p> <p><i>CHCCSL001 Establish and confirm the counselling relationship</i></p>

Roles	Function performed	Sub functions	Relevant units of competency
Youth mental health worker	Support young people with mental health needs	Crisis intervention, skills development, peer support, and advocacy.	<i>CHCMHS003 Provide recovery oriented mental health services</i> <i>CHCMHS011 Assess and promote social emotional and physical wellbeing</i> <i>CHCCCS019 Recognise and respond to crisis situations</i> <i>CHCMHS008 Promote and facilitate self-advocacy</i>
Forensic AOD and mental health worker	Work with clients involved in the justice system to address AOD and mental health challenges	Risk assessment, treatment planning, harm reduction, and advocacy.	<i>CHCMHS005 Provide services to people with co-existing mental health and alcohol and other drugs issues</i> <i>CHCAOD004 Assess needs of clients with alcohol and other drugs issues</i> <i>CHCMHS007 Work effectively in trauma informed care</i> <i>CHCCCS020 Respond effectively to behaviours of concern</i>
Policy and advocacy specialist (lived experience)	Advocate for systemic change using lived experience insights	Policy development, stakeholder engagement, public speaking, and mentorship.	<i>CHCPOL001 Contribute to the review and development of policies</i> <i>CHCADV005 Provide systems advocacy services</i> <i>CHCCOM003 Develop workplace communication strategies</i> <i>CHCPWK002 Contribute to the continuous improvement of mental health services for consumers and carers</i>
Volunteer coordinator	Manage peer and volunteer staff	Recruitment, training, mentorship, and resource allocation.	<i>CHCGRP001 Support group activities</i> <i>CHCGRP002 Plan and conduct group activities</i> <i>CHCPRP001 Develop and maintain networks and collaborative partnerships</i> <i>CHCMGT001 Develop implement and review quality framework</i>

Roles	Function performed	Sub functions	Relevant units of competency
Lived Experience and Peer Roles			
Peer worker (peer support worker)	Provide peer-based advocacy and support	Group facilitation, recovery sharing, fostering empowerment.	<i>CHCPWK001 Apply peer work practices in the mental health sector</i> <i>CHCPWK003 Apply lived experience in mental health peer work</i> <i>CHCMHS008 Promote and facilitate self-advocacy</i>
Cultural support worker (Aboriginal community liaison officer)	Bridge service delivery to Aboriginal communities	Advocacy, cultural sensitivity, community engagement.	<i>CHCDIV002 Promote Aboriginal and/or Torres Strait Islander cultural safety</i> <i>CHCMHS006 Facilitate the recovery process with the person family and carers</i> <i>CHCMHS008 Promote and facilitate self-advocacy</i>
Peer wellbeing navigator (lived experience educator)	Mentor and educate others using personal recovery experience	Capacity building, care navigation, group facilitation.	<i>CHCPWK001 Apply peer work practices in the mental health sector</i> <i>CHCPWK003 Apply lived experience in mental health peer work</i> <i>CHCMHS011 Assess and promote social emotional and physical wellbeing</i> <i>CHCPWK002 Contribute to the continuous improvement of mental health services for consumers and carers</i>
Specialised/Leadership Roles			
Training and development coordinator (lived experience)	Design and implement training programs for peer workers	Curriculum development, facilitation, and capacity building.	<i>CHCPRP003 Reflect on and improve own professional practice</i> <i>CHCPOL001 Contribute to the review and development of policies</i> <i>CHCCOM003 Develop workplace communication strategies</i> <i>CHCPWK005 Work effectively with carers as a mental health peer worker</i>

Roles	Function performed	Sub functions	Relevant units of competency
Peer workforce coordinator	Oversee and support the peer workforce within an organisation.	Oversee and support the peer workforce within an organisation.	<i>CHCPWK004 Work effectively in consumer mental health peer work</i> <i>CHCPWK005 Work effectively with carers as a mental health peer worker</i> <i>CHCMGT001 Develop implement and review quality framework</i>
Harm reduction coordinator (harm reduction officer)	Oversee harm reduction initiatives	Distribution of supplies, harm reduction education, community outreach.	<i>CHCAOD001 Work in an alcohol and other drugs context</i> <i>CHCAOD008 Provide advanced interventions to meet the needs of clients with alcohol and other drugs issues</i> <i>CHCCCS020 Respond effectively to behaviours of concern</i>
Harm reduction specialist (needle and syringe program worker)	Provide support through needle exchange programs	Clean supply distribution, harm minimisation, overdose response education.	<i>CHCAOD001 Work in an alcohol and other drugs context</i> <i>CHCAOD009 Develop and review individual alcohol and other drugs treatment plans</i> <i>CHCAOD006 Provide interventions for people with alcohol and other drugs issues</i>
Family support worker (family and carer support worker)	Support families impacted by mental health or substance use	Counselling, family mediation, educational sessions.	<i>CHCCCS004 Assess co-existing needs</i> <i>CHCCCS017 Provide loss and grief support</i> <i>CHCADV001 Facilitate the interests and rights of clients</i>

Roles	Function performed	Sub functions	Relevant units of competency
Administrative and Supportive Roles			
Intake and assessment worker (intake and assessment officer)	Assess and coordinate client intake	Screening, initial assessment, service referrals	<i>CHCCCS004 Assess co-existing needs</i> <i>CHCMHS004 Work collaboratively with the care network and other services</i> <i>CHCAOD004 Assess needs of clients with alcohol and other drugs issues</i>
Administration coordinator (client services coordinator)	Manage service-related administrative tasks	Data entry, client tracking, staff scheduling	<i>CHCCOM003 Develop workplace communication strategies</i> <i>CHCLEG001 Work legally and ethically</i> <i>CHCGRP001 Support group activities</i>

Appendix 8: Workforce Skills Aligned to Existing Training Package Components

Workforce Needs	Related Units/Skill Sets	Comments on Gaps or Alignment
Trauma-informed care	<i>CHCMHS007 Work effectively in trauma-informed care</i> <i>CHCMHS005 Provide services to people with co-existing mental health and AOD issues</i>	Well-represented in foundational concepts but lacks depth in practical, case-based trauma response strategies. Relevant to recovery workers and peer roles, especially those supporting clients with complex trauma histories. Needs integration of advanced trauma-informed frameworks tailored to diverse settings.
Dual diagnosis skills	<i>CHCMHS005 Provide services to people with co-existing mental health and AOD issues</i> <i>CHCAOD004 Assess needs of clients with AOD issues</i>	Adequate coverage of co-existing needs in theory, but practical examples for managing integrated care are limited. Highly relevant for dual-diagnosis specialists and clinicians handling both mental health and AOD issues. Additional cross-disciplinary scenarios needed to address the intersectionality of client challenges.
Professional boundaries and ethics	<i>CHCLEG001 Work legally and ethically</i> <i>CHCMHS002 Establish self-directed recovery relationships</i>	Core units provide foundational knowledge, but specific challenges in peer work (e.g., managing boundaries while sharing lived experience) require additional practical application. These skills are crucial for peer support roles and other client-facing roles that navigate sensitive personal disclosures.
Cultural competency (first nations)	<i>CHCDIV002 Promote Aboriginal and/or Torres Strait Islander peoples cultural safety</i> <i>CHCMHS011 Assess and promote social, emotional, and physical wellbeing</i>	Aligns with foundational principles but lacks practical applications such as creating culturally tailored care plans. Relevant for roles engaging with Aboriginal and Torres Strait Islander people and communities. Enhanced focus on culturally specific tools and practices is required.
Harm reduction strategies	<i>CHCAOD001 Work in an AOD context</i> <i>CHCAOD007 Develop strategies for AOD</i>	Includes fundamental harm reduction concepts, but deeper training in high-risk settings like needle exchange programs is needed. Relevant for harm reduction workers

	<i>relapse prevention and management</i>	and coordinators working in outreach or crisis intervention contexts.
Motivational interviewing and facilitation	<i>CHCCCS014 Provide brief interventions</i> <i>CHCGRP002 Plan and conduct group activities</i>	Provides a base for motivational interviewing and group facilitation but lacks advanced facilitation training for managing group dynamics in therapeutic or high-risk settings. Crucial for counsellors, group facilitators, and roles in residential rehabilitation environments.
Crisis management and de-escalation	<i>CHCCCS019 Recognise and respond to crisis situations</i> <i>CHCCCS003 Increase the safety of individuals at risk of suicide</i>	Foundational crisis response skills are well-covered, but advanced de-escalation techniques, especially for volatile non-clinical settings, are missing. Highly relevant for crisis support workers and residential rehabilitation staff managing high-pressure situations.
Digital literacy and technology	<i>No dedicated unit identified</i>	Not represented in the current training package, creating a significant gap. Skills in case management software, telehealth tools, and digital documentation are increasingly critical. These gaps impact case managers, outreach workers, and others using technology for service delivery.
System navigation and collaboration	<i>CHCMHS004 Work collaboratively with the care network and other services</i> <i>CHCPRP001 Develop and maintain networks and collaborative partnerships</i>	Aligns well with theoretical knowledge but lacks practical tools for navigating complex systems like housing, healthcare, and justice. Relevant for outreach workers and case managers who support clients through system complexities. Practical simulation exercises or case studies could enhance competency.
Lived experience integration	<i>CHCPWK001 Apply peer work practices in the mental health sector</i> <i>CHCPWK003 Apply lived experience in mental health peer work</i>	Peer roles are supported but require more emphasis on challenges such as "peer drift," intentional disclosure, and stigma management. Relevant to peer work roles in both mental health and AOD contexts. Expanded training on using lived experience intentionally and ethically is needed.

Case management and recovery planning	<i>CHCMHS002 Establish self-directed recovery relationships</i> <i>CHCAOD006 Provide interventions for people with AOD issues</i>	Theoretical frameworks are strong, but graduates often lack consistency in practical application. Relevant for case managers and recovery-focused roles, where tailored client care plans are essential. Increased focus on implementing individualised recovery plans is recommended.
Group dynamics and facilitation	<i>CHCGRP002 Plan and conduct group activities</i> <i>CHCGRP004 Deliver structured programs</i>	Training on group facilitation is present but does not adequately address managing complex group dynamics, particularly in therapeutic settings. Relevant for facilitators in residential programs or community settings. Advanced training in facilitation strategies would strengthen workforce readiness.

Appendix 9: Placement Hours

A list of placement hours for each relevant unit within this review and how these mandate placements for each qualification and skill set

Units with mandatory placement hours	Hours
<i>CHCCCS028 Provide client-centred support to people in crisis</i>	50
<i>CHCCSM013 Facilitate and review case management</i>	100
<i>CHCDEV005 Analyse impacts of sociological factors on people in community work and services</i>	100
<i>CHCMHS002 Establish self-directed recovery relationships</i>	80
<i>CHCMHS003 Provide recovery oriented mental health services</i>	80
<i>CHCMHS004 Work collaboratively with the care network and other services</i>	80
<i>CHCMHS010 Implement recovery oriented approaches to complexity</i>	160
<i>CHCPAS004 Provide pastoral and spiritual care</i>	100
<i>CHCPRT027 Work collaboratively to maintain an environment safe for children and young people</i>	120
<i>CHCVOL001 Be an effective volunteer</i>	20
<i>CHCVOL002 Lead volunteer teams</i>	30

Qualifications and skill sets with core units that have mandatory placement hours

CHC43315 Certificate IV in Mental Health

- CHCMHS002 Establish self-directed recovery relationships: 80 hours
- CHCMHS003 Provide recovery oriented mental health services: 80 hours
- CHCMHS004 Work collaboratively with the care network and other services: 80 hours

CHC53315 Diploma of Mental Health

- CHCMHS002 Establish self-directed recovery relationships: 80 hours
- CHCMHS003 Provide recovery oriented mental health services: 80 hours
- CHCMHS004 Work collaboratively with the care network and other services: 80 hours
- CHCMHS010 Implement recovery oriented approaches to complexity: 160 hours

CHCSS00102 Mental Health Co-existing Needs Skill Set

- CHCMHS004 Work collaboratively with the care network and other services: 80 hours
- CHCMHS010 Implement recovery oriented approaches to complexity: 160 hours

Appendix 10: Qualification Packaging Rules and Units

Full qualification rules are available on training.gov.au. The following table presents the core and available elective units in each qualification and skill set (to determine previously established essential skills).

Qualification / Skill Set	Units
CHC43315 <i>Certificate IV in Mental Health</i>	<p>11 core and 4 elective units.</p> <p>Core units are:</p> <ul style="list-style-type: none"> • CHCDIV001 Work with diverse people • CHCDIV002 Promote Aboriginal and/or Torres Strait Islander cultural safety • CHCLEG001 Work legally and ethically • CHCMHS002 Establish self-directed recovery relationships • CHCMHS003 Provide recovery oriented mental health services • CHCMHS004 Work collaboratively with the care network and other services • CHCMHS005 Provide services to people with co-existing mental health and alcohol and other drugs issues • CHCMHS007 Work effectively in trauma informed care • CHCMHS008 Promote and facilitate self advocacy • CHCMHS011 Assess and promote social, emotional and physical wellbeing • HLTWHS001 Participate in workplace health and safety <p>Elective units are:</p> <ul style="list-style-type: none"> • CHCADV001 Facilitate the interests and rights of clients • CHCAOD001 Work in an alcohol and other drugs context • CHCAOD002 Work with clients who are intoxicated • CHCAOD004 Assess needs of clients with alcohol and other drugs issues • CHCAOD005 Provide alcohol and other drugs withdrawal services • CHCAOD006 Provide interventions for people with alcohol and other drugs issues • CHCCCS003 Increase the safety of individuals at risk of suicide • CHCCCS004 Assess co-existing needs • CHCCCS007 Develop and implement service programs • CHCCCS009 Facilitate responsible behaviour • CHCCCS014 Provide brief interventions • CHCCCS017 Provide loss and grief support • CHCCCS018 Provide suicide bereavement support

	<ul style="list-style-type: none"> • CHCCCS019 Recognise and respond to crisis situations • CHCCCS020 Respond effectively to behaviours of concern • CHCCOM002 Use communication to build relationships • CHCDFV001 Recognise and respond appropriately to domestic and family violence • CHCEDU001 Provide community focused health promotion and prevention strategies • CHCEDU002 Plan health promotion and community intervention • CHCEDU005 Work with clients to identify financial literacy education needs • CHCEDU006 Improve clients' fundamental financial literacy skills • CHCEDU007 Provide group education on consumer credit and debt • CHCEDU008 Share health information • CHCEDU009 Provide parenting, health and well-being education • CHCFAM010 Provide intervention support to families • CHCMGT001 Develop, implement and review quality framework • CHCMHS006 Facilitate the recovery process with the person, family and carers • CHCPOL001 Contribute to the review and development of policies • CHCPRP001 Develop and maintain networks and collaborative partnerships • CHCPRP003 Reflect on and improve own professional practice • HLTAAP001 Recognise healthy body systems • HLTAID011 Provide First Aid • HLTAID013 Provide First Aid in remote or isolated site • HLTAID014 Provide Advanced First Aid • HLTHPS006 Assist clients with medication • HLTHPS010 Interpret and use information about nutrition and diet • HLTOHC004 Provide or assist with oral hygiene • HLTWHS006 Manage personal stressors in the work environment
<p><i>CHC43515</i> <i>Certificate IV in</i> <i>Mental Health</i> <i>Peer Work</i></p>	<p>8 core and 7 elective units.</p> <p>Core units are:</p> <ul style="list-style-type: none"> • CHCDIV001 Work with diverse people • CHCMHS007 Work effectively in trauma informed care • CHCMHS008 Promote and facilitate self advocacy • CHCMHS011 Assess and promote social, emotional and physical wellbeing • CHCPWK001 Apply peer work practices in the mental health sector • CHCPWK002 Contribute to the continuous improvement of mental health services

- CHCPWK003 Apply lived experience in mental health peer work
- HLTWHS001 Participate in workplace health and safety

Elective units are:

- CHCPWK004 Work effectively in consumer mental health peer work
- CHCPWK005 Work effectively with carers as a mental health peer worker
- CHCADV001 Facilitate the interests and rights of clients
- CHCADV002 Provide advocacy and representation services
- CHCADV005 Provide systems advocacy services
- CHCAGE001 Facilitate the empowerment of older people
- CHCAGE005 Provide support to people living with dementia
- CHCAOD001 Work in an alcohol and other drugs context
- CHCCCS001 Address the needs of people with chronic disease
- CHCCCS003 Increase the safety of individuals at risk of suicide
- CHCCCS017 Provide loss and grief support
- CHCCCS019 Recognise and respond to crisis situations
- CHCCCS020 Respond effectively to behaviours of concern
- CHCCCS023 Support independence and wellbeing
- CHCCCS025 Support relationships with carers and families
- CHCCCS027 Visit client residence
- CHCCDE001 Support community participation in planning processes
- CHCCDE002 Develop and implement community programs
- CHCCDE004 Implement participation and engagement strategies
- CHCCDE006 Work to empower Aboriginal and/or Torres Strait Islander communities
- CHCCDE007 Develop and provide community projects
- CHCCDE008 Support community action
- CHCDEV002 Analyse impacts of sociological factors on clients in community work and services
- CHCDIS007 Facilitate the empowerment of people with disability
- CHCDIS008 Facilitate community participation and social inclusion
- CHCDIV002 Promote Aboriginal and/or Torres Strait Islander cultural safety
- CHCEDU011 Work with parents or carers of very young children
- CHCGRP001 Support group activities
- CHCGRP002 Plan and conduct group activities
- CHCGRP004 Deliver structured programs
- CHCLEG001 Work legally and ethically

	<ul style="list-style-type: none"> • CHCMHS002 Establish self-directed recovery relationships • CHCMHS003 Provide recovery oriented mental health services • CHCMHS004 Work collaboratively with the care network and other services • CHCMHS005 Provide services to people with co-existing mental health and alcohol and other drugs issues • CHCMHS006 Facilitate the recovery process with the person, family and carers • CHCPOL001 Contribute to the review and development of policies • CHCPRP001 Develop and maintain networks and collaborative partnerships • CHCSET001 Work with forced migrants • CHCSET002 Undertake bicultural work with forced migrants in Australia • CHCSOH001 Work with people experiencing or at risk of homelessness • CHCSOH002 Manage and maintain tenancy agreements and services • CHCYTH003 Support young people to create opportunities in their lives • CHCYTH011 Work effectively with young people and their families • HLTWHS006 Manage personal stressors in the work environment • BSBCMM401 Make a presentation • BSBINM201 Process and maintain workplace information • BSBRES401 Analyse and present research information • BSBWOR204 Use business technology • TAEDEL401A Plan, organise and deliver group-based learning • TAEDEL402A Plan, organise and facilitate learning in the workplace • TAEDES401A Design and develop learning programs
<p><i>CHC43215</i> <i>Certificate IV in</i> <i>Alcohol and</i> <i>Other Drugs</i></p>	<p>12 core and 5 elective units.</p> <p>Core units are:</p> <ul style="list-style-type: none"> • CHCAOD001 Work in an alcohol and other drugs context • CHCAOD004 Assess needs of clients with alcohol and other drugs issues • CHCAOD006 Provide interventions for people with alcohol and other drugs issues • CHCAOD009 Develop and review individual alcohol and other drugs treatment plans • CHCCCS004 Assess co-existing needs • CHCCCS014 Provide brief interventions • CHCCOM002 Use communication to build relationships • CHCDIV001 Work with diverse people • CHCLEG001 Work legally and ethically • CHCMHS001 Work with people with mental health issues

- CHCPRP001 Develop and maintain networks and collaborative partnerships
- HLTAID011 Provide first aid

Elective units are:

- CHCADV001 Facilitate the interests and rights of clients
- CHCAGE001 Facilitate the empowerment of older people
- CHCAOD002 Work with clients who are intoxicated
- CHCAOD003 Provide needle and syringe services
- CHCAOD005 Provide alcohol and other drugs withdrawal services
- CHCCCS001 Address the needs of people with chronic disease
- CHCCCS003 Increase the safety of individuals at risk of suicide
- CHCCCS006 Facilitate individual service planning and delivery
- CHCCCS009 Facilitate responsible behaviour
- CHCCCS017 Provide loss and grief support
- CHCCCS018 Provide suicide bereavement support
- CHCCCS019 Recognise and respond to crisis situations
- CHCCCS023 Support independence and wellbeing
- CHCCCS027 Visit client residence
- CHCCDE002 Develop and implement community programs
- CHCCDE004 Implement participation and engagement strategies
- CHCCDE006 Work to empower Aboriginal and/or Torres Strait Islander communities
- CHCCDE007 Develop and provide community projects
- CHCCSM004 Coordinate complex case requirements
- CHCDFV001 Recognise and respond appropriately to domestic and family violence
- CHCDIS007 Facilitate the empowerment of people with disability
- CHCDIS008 Facilitate community participation and social inclusion
- CHCDIV002 Promote Aboriginal and/or Torres Strait Islander cultural safety
- CHCEDU001 Provide community focused promotion and prevention strategies
- CHCEDU002 Plan health promotion and community intervention
- CHCEDU005 Work with clients to identify financial literacy education needs
- CHCEDU006 Improve clients' fundamental financial literacy skills
- CHCEDU007 Provide group education on consumer credit and debt
- CHCEDU008 Share health information
- CHCEDU009 Provide parenting, health and well-being education
- CHCFAM003 Support people to improve relationships

	<ul style="list-style-type: none"> • CHCFAM010 Provide intervention support to families • CHCGRP002 Plan and conduct group activities • CHCGRP003 Plan, facilitate and review psycho-educational groups • CHCGRP004 Deliver structured programs • CHCLLN001 Respond to client language, literacy and numeracy needs • CHCMHS002 Establish self-directed recovery relationships • CHCMHS003 Provide recovery oriented mental health services • CHCMHS004 Work collaboratively with the care network and other services • CHCMHS005 Provide services to people with co-existing mental health and alcohol and other drugs issues • CHCMHS006 Facilitate the recovery process with the person, family and carers • CHCPRP003 Reflect on and improve own professional practice • CHCPRT001 Identify and respond to children and young people at risk • CHCPRT002 Support the rights and safety of children and young people • CHCSET001 Work with forced migrants • CHCSET002 Undertake bicultural work with forced migrants in Australia • CHCSOH001 Work with people experiencing or at risk of homelessness • CHCYTH011 Work effectively with young people and their families • HLTAAP001 Recognise healthy body systems • HLTHPS006 Assist clients with medication • HLTHPS010 Interpret and use information about nutrition and diet • HLTOHC001 Recognise and respond to oral health issues • HLTOHC002 Inform and support patients and groups about oral health • HLTOHC003 Apply and manage use of basic oral health products • HLTOHC004 Provide or assist with oral hygiene • HLTWHS006 Manage personal stressors in the work environment • BSBINM201 Process and maintain workplace information
<p><i>CHC53215 Diploma of Alcohol and Other Drugs</i></p>	<p>16 core and 6 elective units. Core units are:</p> <ul style="list-style-type: none"> • CHCADV005 Provide systems advocacy services • CHCAOD001 Work in an alcohol and other drugs context • CHCAOD004 Assess needs of clients with alcohol and other drugs issues • CHCAOD006 Provide interventions for people with alcohol and other drugs issues • CHCAOD007 Develop strategies for alcohol and other drugs relapse prevention and management

- CHCAOD008 Provide advanced interventions to meet the needs of clients with alcohol and other drug issues
- CHCAOD009 Develop and review individual alcohol and other drugs treatment plans
- CHCCCS004 Assess co-existing needs
- CHCCOM006 Establish and manage client relationships
- CHCDIV001 Work with diverse people
- CHCMHS005 Provide services to people with co-existing mental health and alcohol and other drugs issues
- CHCMHS007 Work effectively in trauma informed care
- CHCPOL003 Research and apply evidence to practice
- CHCPRP002 Collaborate in professional practice
- CHCPRP003 Reflect on and improve own professional practice
- HLTAID011 Provide first aid

Elective units are:

- CHCAOD002 Work with clients who are intoxicated
- CHCAOD003 Provide needle and syringe services
- CHCAOD005 Provide alcohol and other drugs withdrawal services
- CHCCCS007 Develop and implement service programs
- CHCCCS017 Provide loss and grief support
- CHCCCS018 Provide suicide bereavement support
- CHCCSL001 Establish and confirm the counselling relationship
- CHCCSL002 Apply specialist interpersonal and counselling interview skills
- CHCCSL003 Facilitate the counselling relationship and process
- CHCCSL007 Support counselling clients in decision-making processes
- CHCDFV006 Counsel clients affected by domestic and family violence
- CHCDIV002 Promote Aboriginal and/or Torres Strait Islander cultural safety
- CHCEDU001 Provide community focused health promotion and prevention strategies
- CHCGMB001 Assess the needs of clients with problem gambling issues
- CHCGMB002 Provide counselling for clients with problem gambling issues
- CHCINM001 Meet statutory and organisation information requirements
- CHCLLN001 Respond to client language, literacy and numeracy needs
- CHCMGT001 Develop, implement and review quality framework
- CHCMGT002 Manage partnership agreements with service providers
- CHCMHS002 Establish self-directed recovery relationships
- CHCMHS003 Provide recovery oriented mental health services

	<ul style="list-style-type: none"> ● CHCMHS004 Work collaboratively with the care network and other services ● CHCMHS006 Facilitate the recovery process with the person, family and carers ● CHCMHS009 Provide early intervention, health prevention and promotion programs ● CHCMHS010 Implement recovery oriented approaches to complexity ● CHCMHS011 Assess and promote social, emotional and physical wellbeing ● CHCMHS012 Provide support to develop wellness plans and advanced directives ● CHCMHS013 Implement trauma informed care ● CHCVOL003 Recruit, induct and support volunteers ● HLTAAP001 Recognise healthy body systems ● HLTAID009 Provide cardiopulmonary resuscitation ● HLTAID014 Provide Advanced First Aid ● HLTHPS006 Assist clients with medication ● HLTHPS010 Interpret and use information about nutrition and diet ● HLTOHC004 Provide or assist with oral hygiene ● HLTWHS006 Manage personal stressors in the work environment
<p><i>CHC53315</i> <i>Diploma of</i> <i>Mental Health</i></p>	<p>15 core and 5 elective units.</p> <p>Core units are:</p> <ul style="list-style-type: none"> ● CHCADV005 Provide systems advocacy services ● CHCDIV001 Work with diverse people ● CHCDIV002 Promote Aboriginal and/or Torres Strait Islander cultural safety ● CHCMHS002 Establish self-directed recovery relationships ● CHCMHS003 Provide recovery oriented mental health services ● CHCMHS004 Work collaboratively with the care network and other services ● CHCMHS005 Provide services to people with co-existing mental health and alcohol and other drugs issues ● CHCMHS009 Provide early intervention, health prevention and promotion programs ● CHCMHS010 Implement recovery oriented approaches to complexity ● CHCMHS011 Assess and promote social, emotional and physical wellbeing ● CHCMHS012 Provide support to develop wellness plans and advanced directives ● CHCMHS013 Implement trauma informed care ● CHCPOL003 Research and apply evidence to practice ● CHCPRP003 Reflect on and improve own professional practice ● HLTWHS004 Manage work health and safety <p>Elective units are:</p>

	<ul style="list-style-type: none"> • CHCAOD001 Work in an alcohol and other drugs context • CHCAOD002 Work with clients who are intoxicated • CHCAOD003 Provide needle and syringe services • CHCAOD004 Assess needs of clients with alcohol and other drugs issues • CHCAOD005 Provide alcohol and other drugs withdrawal services • CHCAOD006 Provide interventions for people with alcohol and other drugs issues • CHCAOD007 Develop strategies for alcohol and other drugs relapse prevention and management • CHCAOD008 Provide advanced interventions to meet the needs of clients with alcohol and other drugs issues • CHCAOD009 Develop and review individual alcohol and other drugs treatment plans • CHCCCS017 Provide loss and grief support • CHCCSL001 Establish and confirm the counselling relationship • CHCCSL003 Facilitate the counselling relationship and process • CHCCSL007 Support counselling clients in decision-making processes • CHCDFV006 Counsel clients affected by domestic and family violence • CHCEDU001 Provide community focused health promotion and prevention strategies • CHCGMB001 Assess the needs of clients with problem gambling issues • CHCGMB002 Provide counselling for clients with problem gambling issues • CHCINM001 Meet statutory and organisation information requirements • CHCLLN001 Respond to client language, literacy and numeracy needs • CHCMGT001 Develop, implement and review quality framework • CHCMGT002 Manage partnership agreements with service providers • CHCMHS006 Facilitate the recovery process with the person, family and carers • CHCPRP001 Develop and maintain networks and collaborative partnerships • CHCPWK006 Promote and conduct mental health peer work • CHCVOL003 Recruit, induct and support volunteers • HLTAAP001 Recognise healthy body systems • HLTHPS006 Assist clients with medication • HLTHPS010 Interpret and use information about nutrition and diet • HLTWHS006 Manage personal stressors in the work environment
CHCSS00092 Alcohol and Other Drugs Co-	<ul style="list-style-type: none"> • CHCAOD007 Develop strategies for alcohol and other drugs relapse prevention and management

<i>existing Needs Skill Set</i>	<ul style="list-style-type: none"> • CHCAOD008 Provide advanced interventions to meet the needs of clients with alcohol and other drugs issues • CHCCCS004 Assess co-existing needs • CHCMHS005 Provide services to people with co-existing mental health and alcohol and other drugs issues
<i>CHCSS00093 Alcohol and Other Drugs Skill Set</i>	<ul style="list-style-type: none"> • CHCAOD001 Work in an alcohol and other drugs context • CHCAOD004 Assess needs of clients with alcohol and other drugs issues • CHCAOD006 Provide interventions for people with alcohol and other drugs issues • CHCAOD009 Develop and review individual alcohol and other drugs treatment plans
<i>CHCSS00102 Mental Health Co-existing Needs Skill Set</i>	<ul style="list-style-type: none"> • CHCMHS004 Work collaboratively with the care network and other services • CHCMHS005 Provide services to people with co-existing mental health and alcohol and other drugs issues • CHCMHS010 Implement recovery oriented approaches to complexity • CHCMHS011 Assess and promote social, emotional and physical wellbeing
<i>CHCSS00103 Mental Health Peer Work Skill Set</i>	<ul style="list-style-type: none"> • CHCLEG001 Work legally and ethically • CHCPWK001 Apply peer work practices in the mental health sector • CHCPWK003 Apply lived experience in mental health peer work
<i>CHCSS00112 Suicide Bereavement Support Skill Set</i>	<ul style="list-style-type: none"> • CHCCCS003 Increase the safety of individuals at risk of suicide • CHCCCS019 Recognise and respond to crisis situations • CHCCCS028 Provide client-centred support to people in crisis
<i>CHCSS00113 Crisis Support Skill Set</i>	<ul style="list-style-type: none"> • CHCCCS003 Increase the safety of individuals at risk of suicide • CHCCCS019 Recognise and respond to crisis situations • CHCCCS028 Provide client-centred support to people in crisis
<i>CHCSS00138 Mental Health Assistance</i>	<ul style="list-style-type: none"> • CHCMHS001 Work with people with mental health issues • CHCMHS004 Work collaboratively with the care network and other services