



Submission

National Approach to Worker Screening in the
Care and Support Economy

OCTOBER 2025



Acknowledgement of Country

HumanAbility acknowledges the Aboriginal and Torres Strait Islander peoples as the Traditional Owners and Custodians of Country throughout Australia. We pay our respects to Aboriginal and Torres Strait Islander Elders – past and present, and recognise their enduring connection to their culture, lands, seas, waters and communities.

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About HumanAbility

Who are we?

As the Jobs and Skills Council for the care and support economy, HumanAbility partners with sector specialists to advance skills, training and workforce development.

Our goal is to lead and facilitate in consultation with industry the continuing development of skilled and sustainable workforces which can meet growing community demand.

What do we do?

- Workforce planning
- Training Product development
- Implementation, promotion and monitoring
- Industry stewardship

We are tripartite. Our governance structure and stakeholder engagement approach reflect government, union and industry.

Our sectors



Aged Care &
Disability Services



Children's
Education & Care



Health



Human (community)
services'



Sport &
Recreation

Executive Summary

HumanAbility welcomes the opportunity to contribute to the development of a nationally consistent worker screening system and the informed approach presented in the Consultation Paper¹. A streamlined, and interoperable approach has the potential to strengthen safeguards for people who use care and support services while improving workforce mobility and efficiency across the Care and Support Economy (CSE). HumanAbility's position is informed by ongoing engagement with sector stakeholders, who have consistently emphasised the importance of professionalising the workforce, removing unnecessary barriers, improving the sector's reputation, and managing the scale and sequencing of reform. Stakeholders have also highlighted the need to prioritise the implementation of existing reform, alongside or before introducing additional changes. We have also heard about the need to reduce administrative burden on industry, improve efficiency, and ensure each sector is meaningfully consulted with to draw on its specific expertise and operational knowledge. With this in mind, our recommendations in summary are:

- HumanAbility **supports a single, transferable national screening system (Option 2)**.
- Current reforms to **expand the NDIS Worker Screening Check to include aged care workers should be implemented first**, with further rollout to follow. **Any model must avoid disrupting current aged care and disability worker registration reforms** and should build on these to enhance consistency across sectors.
- Incorporate **digital identity verification** and modern ICT systems to improve timeliness and consistency, while **retaining accessible manual pathways** for people in areas with limited digital access.
- Commit to **consultation on improved information sharing** and interoperability across existing reportable conduct and incident management frameworks, with longer-term exploration of the sectors views on a reportable conduct framework.
- Embed **co-designed mechanisms with First Nations organisations** to ensure screening processes are culturally safe, equitable, and aligned with Closing the Gap employment and health workforce targets, and inclusive of flexible identification and verification options for people facing documentation barriers.
- **Worker screening should be free for CSE workers.**

¹ The Treasury and Department of Finance (2025) *National Competition Policy: National approach to worker screening in the care and support economy*, Australian Government.

Submission

1 A single, transferable national screening system (Option 2)

Based on sector feedback gathered through HumanAbility's ongoing engagement across the Care and Support Economy (CSE), there is broad agreement on the need for screening that is effective, streamlined, efficient, affordable and interoperable across jurisdictions and sectors. In light of this feedback HumanAbility supports Option 2, outlined in the Consultation Paper² - the establishment of a single, transferable national screening system covering all the CSE. The new system should also:

- include a clear and achievable timeline and clear budget for implementation
- set out a phased plan for incorporating each sector, including early childhood education and care (ECEC), disability, and aged care
- be efficient and low burden for: employers, regulators, workers, students and Registered Training Organisations (RTOs) supporting mandatory student placements
- ensure clear and ongoing communication on application progress to build confidence, and
- provide consistent national guidance on worker commencement, addressing differences such as "no card, no start" requirements between jurisdictions.

2 Existing reforms remain essential

Existing reforms are essential to strengthening quality and safety and should remain the immediate implementation priority for government. We have heard from multiple stakeholders the importance of not de-railing or delaying existing reform efforts to harmonise the aged care and disability sector screening systems, or the implementation of other related workforce reforms also flowing from the Royal Commissions. These include the introduction of worker registration, minimum qualification and continuing professional development requirements.

Each sector is at a different stage of readiness; therefore, existing reform efforts, such as the harmonisation of aged care and disability screening, should continue without delay, alongside a clear roadmap for workforce registration and training requirements. National screening reform should complement rather than divert focus, funding or resources from these existing initiatives. A phased approach should be adopted that enables these current initiatives to proceed while establishing the framework for a single national screening system.

3 ICT Systems

- Digital identity verification and modern ICT systems can improve the timeliness, transparency, and consistency of worker screening.

² The Treasury and Department of Finance (2025) *National Competition Policy: National approach to worker screening in the care and support economy*, Australian Government.

- At the same time, accessible, non-digital pathways must remain to ensure equity for people in rural and remote areas.
- If a single ICT system is developed, parallel systems should operate during transition to maintain continuity, resolve technical issues, and gather feedback before full national rollout.

Stakeholders noted that current arrangements can be inequitable, with applicants in remote areas sometimes unable to complete screening and identity checks online, due to digital limitations or non-standard identification documents, resulting in the requirement to travel long distances to present documents in person at specified government services. Retaining manual options and increasing accessible options will be essential to avoid compounding digital disadvantage.

Stakeholders also emphasised that transitioning providers to a new screening platform in the short to medium term could present substantial operational challenges and resistance, particularly given current difficulties with other systems such as Services Australia platforms for Home Care and PACE in the NDIS.

Implementation should be carefully staged and aligned with existing sector reforms. In the initial phase, the digital system could be piloted through voluntary early adoption by willing jurisdictions and employers.

4 Reportable conduct

The Consultation Paper highlights the important role of reportable conduct frameworks in safeguarding people who use care and support services. It notes that existing mechanisms, including the NDIS Reportable Incidents Framework, the Aged Care Serious Incident Response Scheme and several state-based schemes, already provide important protections. The paper also observes that these frameworks operate under different legislative bases and thresholds, with limited interoperability or capacity to share information across jurisdictions. The Consultation Paper also recognises that screening systems primarily capture criminal convictions, and reportable conduct schemes focus on identifying concerning behaviour patterns³ or credible allegations that have not progressed to formal charges.

HumanAbility has heard from the sector about the scale of reform currently underway and the importance of embedding existing reforms and working closely with the sector on any new proposals. Such an approach will ensure changes are grounded in expertise that sits within each specific sector. This will strengthen information sharing and enable earlier identification of risk while ensuring reforms are practical, proportionate and supported by the care and support sectors.

Implementation of both existing and any new incident and reporting mechanisms should also include mandatory, fit-for-purpose training to ensure all workers and supervisors understand their obligations, incident response processes and the principles of procedural fairness. Some of this training is delivered through nationally recognised units of competency within the CHC Training Package, supporting consistent

³ Reportable conduct schemes recognise concerning behavioural patterns such as grooming behaviour and intimidating conduct. NDIS Quality and Safeguards Commission (2019) *Reportable incidents – Detailed guidance for registered NDIS providers* Commission for Children and Young People (2025) *Reportable Conduct Scheme Information Sheets* National Office for Child Safety (2025) *Grooming*, NOCS, Australian Government

practice and workforce capability across the care and support sectors.⁴ HumanAbility is currently undertaking a project to replace a superseded unit with an updated unit of competency (CHCPRT025 Identify and report children and young people at risk) in all applicable CHC qualifications.⁵

A commitment to consult on these options would build on existing safeguards, promote interoperability between systems and lay the groundwork for any future harmonisation should sector consultation indicate support, while also ensuring procedural fairness and due process for workers are maintained throughout reform design and implementation. This is an area which HumanAbility could explore further with stakeholders and come back with more detailed views.

5 Addressing cost burden

Worker screening should be free for CSE workers to not aggravate the growing workforce crisis across these sectors.

The Consultation Paper significantly underestimates the financial burden of screening on low paid workers. People may be required to complete multiple checks, such as WWCC (Victoria \$135, NSW \$107), NDIS screening check \$105-119, National Police Check \$89, which combined could exceed \$500. Costs are especially high for people who work across borders, roles and sectors.

As outlined by the Senate Committee on Work and Care, 95 per cent of workers are earning at rates below the Australian average.⁶ The minimum wage for an aged care level 1 employee under the Aged Care Award is \$26.51 an hour. Similarly, on commencement, a level 1.1 support worker is guaranteed \$24.95 an hour under the Children's Services Award. At these pay rates, the aged carer would need to work nineteen hours, and the child carer twenty hours, to earn \$500 (before tax).⁷

6 First Nations people

First Nations people are disproportionately impacted by involvement in the criminal justice system, driven by a legacy of colonisation and ongoing systemic racism. Worker screening processes that rely heavily on criminal history risk further entrenching structural inequity by excluding First Nations people from meaningful employment and leadership roles in the care and support economy.⁸

⁴ For example: Queensland Government (2025) *Child Protection requirements – Queensland Government protocol*, QLD Government Early Childhood Education and Care.

⁵ HumanAbility (2025) *HumanAbility Workforce Plan 2025*

⁶ Select Committee on Work and Care (2023). *Final Report*

⁷ Fair Work Ombudsman (2025). *Pay Guide - Aged Care Award* and Fair Work Ombudsman (2025). *Pay Guide - Children's Services Award*

⁸ Australian Institute of Health and Welfare (2025) *Aboriginal and Torres Strait Islander Health Performance Framework – Tier 2 Determinants of Health – Contact with the criminal justice system*
First Peoples Disability Network Australia (2023) *The NDIS Workforce and First Nations People: Improving the culture of the NDIS workforce to meet the needs of First Nations People with a Disability*

National worker screening reform must embed mechanisms, co-designed with Aboriginal and Torres Strait Islander organisations, to ensure cultural safety, without perpetuating structural discrimination.

The National Indigenous Australian's Agency has previously submitted:

*Regional staff have noted that barriers persist for local people in remote locations to access and pass the NDIS Worker Screening Check, including the capacity to meet the 100 identity point requirements. Many people in remote locations do not have their Birth Certificate or other standard identity paperwork and struggle to meet these requirements.*⁹

Consistent with positions articulated by NACCHO, screening requirements should be applied flexibly, allowing for culturally appropriate verification processes and recognition of alternative forms of identity and community validation,¹⁰ particularly in remote and regional contexts, and for older First Nations people.¹¹

Any national screening system should be guided by the *Closing the Gap employment targets*¹² and the *National Agreement on Aboriginal and Torres Strait Islander Health Workforce Strategic Framework*,¹³ ensuring that risk assessment and decision-making processes do not replicate systemic bias but instead contribute to equitable workforce participation.

7 Enable access to screening and identification requirements

In addition to cultural safety, equitable access to worker screening processes must also be considered in the design of a national system. Some individuals face significant barriers in meeting identification requirements due to circumstances such as displacement, family and domestic violence, or gender transition, which can result in missing or inconsistent documentation.¹⁴

RMIT Centre for Innovative Justice (2020) *Rethinking Criminal Record Checks: Woor-Dungh Criminal Record Discrimination Project (CRDP) and Aboriginal Ex-Offender Employment Project (AEOEP)*

⁹ National Indigenous Australians Agency (2024) *Submission to the joint standing committee on the NDIS: Inquiry into NDIS participant experience in rural regional and remote Australia, 23 February 2024*, NIAA, Canberra

¹⁰ Department of Home Affairs (2016) *National Identity Proofing Guidelines*, DoHA Australian Government, Canberra
Australian Criminal Intelligence Commission – National Police Checking Service (n.d) *Proof of identify (special provision) for Aboriginal and Torres Strait Islander People*, ACIC-NPCS, Canberra

¹¹ National Aboriginal Community Controlled Health Organisation (2025) *Aged Care Rules, Stage 3 Provider Obligations – Submission to Department of Health and Aged Care, March 2025*, NACCHO

¹² National Indigenous Australians Agency (2020) *National Agreement on Closing the Gap*, NIAA, Canberra

¹³ Department of Health (2022) *National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021-2031*, DoH, Australian Government, Canberra

¹⁴ Australian Transaction Reports and Analysis Centre (2025) *Assisting customers who don't have standard forms of identification*, AUSTRAC, Australian Government, Canberra

The development of a national screening system should include clear guidance and accessible information on alternative identification options and referral pathways to support services.¹⁵ This would enable employers, education providers, RTOs and career advisors to provide accurate advice and direct applicants to funded organisations that assist refugees, people experiencing family violence, and transgender and gender-diverse people to access, replace or update identification documents.

Embedding this guidance within the national framework would reduce barriers to entry, promote workforce diversity, and contribute to safer, more inclusive care and support environments.

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