



Australian Government

Department of Health, Disability and Ageing



A national registration scheme to support personal care workers employed in aged care

Consultation Summary Report 2025



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Consultation process

The Australian Government is committed to implementing a national registration scheme to support personal care workers employed in aged care.

The scheme will support the professionalisation of workers, enhance development opportunities, and ensure there are appropriate protections for older people receiving aged care services.

A staged approach to implementation, where elements of the scheme are rolled out progressively, has been adopted to support worker and sector readiness. This consultation will support further policy development and consultation activities.

Public consultation

The Department of Health, Disability and Ageing (department) undertook public consultation on a national registration scheme to support personal care workers employed in aged care.

Interested stakeholders were invited to provide feedback to the department through either a short online survey hosted through the department's [Consultation Hub](#), or through a written submission.

Public consultation was open from 18 February to 17 April 2025 and was supported by a [consultation paper](#) to aid stakeholders in considering key issues and opportunities in the design of a scheme, including new training and skills requirements.

The department received **585 survey responses** and **48 written submissions** to the consultation.

- Survey responses were received directly from personal care workers, aged care providers, some jurisdictions and peak bodies. A quarter of survey respondents identified as being personal care workers employed in aged care.
- Submissions were received from aged care and disability support peaks and providers, Vocational Education and Training sector representatives, unions, Aboriginal and Torres Strait Islander aged care representatives, some jurisdictions, and some research organisations and universities. Written submissions ranged in detail and scope from two pages up to 37 pages per submission.

The department thanks all respondents for taking the time to contribute their valuable thoughts, experiences, and expert advice.

Why did we undertake this consultation?

This consultation built on insights and recommendations from the *Royal Commission into Aged Care Quality and Safety*, the *Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability*, the *National Disability Insurance Scheme (NDIS) Provider and Worker Registration Taskforce*, and on other relevant reforms and opportunities across the care and support economy. It also built on findings and outcomes from the aged care reform journey, including the implementation of mandatory care minutes in residential aged care, and the development of the *Aged Care Act 2024* and strengthened Aged Care Quality Standards.

While this consultation primarily focused on aged care, it included important questions on how a national registration scheme could be designed to support workers across the care and support economy, particularly disability support and veterans' care.

Harmonised approaches between these sectors will promote greater workforce mobility and career opportunities, reduce regulatory burden on workers and employers who deliver care across sectors, and increase the safety and quality of care for people using aged care, disability support and veterans' care services.

This consultation process will assist the department in understanding up-to-date stakeholder views on scheme design, as well as new training and skills requirements.

This will support further policy development, consultation activities and strengthen the government's phased approach to implementation of a national registration scheme. Elements of the scheme will be rolled out gradually, ensuring worker and sector readiness.

There is significant cross-over in service provision and workforce across the aged care, disability support and veterans' care sectors.

In 2023 around 40 per cent of registered aged care providers also delivered NDIS and/or veterans' care services and supports.

Executive Summary

This consultation summary report provides information on key insights and themes from the department's public consultation on a national registration scheme to support personal care workers employed in aged care.

The public consultation focused around the three consultation sections, including:

- National worker registration scheme design
- Training requirements, and
- Skills and qualification requirements.

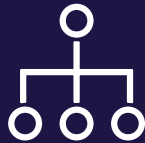
Given the diversity in responses and engagement, formal weighting between individual survey responses and written submissions has not been used through this consultation summary report. This report instead seeks to raise awareness of key insights, suggestions, and themes raised through the consultation.

These insights, suggestions, and themes will support ongoing policy development and future consultation activity in the implementation of a national registration scheme to support personal care workers employed in aged care. Feedback has been shared with other Australian Government agencies to inform broader policy design.

Who are personal care workers?

- Personal care workers are known by a number of job titles including, personal care assistant/attendant, assistant in nursing, community care worker, home support worker and home care employee.
 - The personal care workforce is predominately women, and have a high proportion of workers from migrant backgrounds.
- Personal care workers make up the majority of the direct aged care workforce, and work in residential and in-home care settings.
 - The 2023 Aged Care Provider Workforce Survey found that there are around 310,000 personal care workers employed across all aged care service types. They made up 72 per cent of direct care roles in residential aged care, and almost 90 per cent of direct care roles in the Home Care Packages Program.
- Typically, personal care workers deliver day-to-day care and support. This can include personal care (for example, hygiene and showering), social, emotional and household support (for example, companionship, cooking, cleaning, and shopping), and supports to access recreational activities and appointments.

High-level insights and themes



Scheme design

- Strong preference and support for harmonised requirements and systems between personal care and disability support workers.
- Preference for the establishment of a register, using a similar model to other professionalised workforces that also work in aged care, including nurses and some allied health professionals.
- Preference for the inclusion of different registration categories, including, for example “provisional registration” where a worker could commence employment and work towards meeting any skills and training requirements.



Additional insights

- Strong preference for a well communicated, resourced and considered rollout for a national registration scheme.
- Strong feedback on the need for a clear definition / scope-of-practice of personal care workers in aged care.



Skills and qualifications

- Strong support for the establishment of a mandatory minimum qualification.
- Clear preference for a Certificate III in Individual Support to be the mandatory minimum qualification, with careful consideration on rollout and supports.
- Strong focus on the need for streamlined pathways to support Recognition of Prior Learning, with clear avenues to recognise the experiences and knowledge of existing personal care workers.



Training requirements

- A preference for workers to undertake annual continuing professional development hours for their ongoing training requirements.
- Strong feedback around the need for accessible, government-funded training and support, especially for workers from diverse, rural or disadvantaged backgrounds.

National worker registration scheme design

This consultation section sought feedback from stakeholders on their preferred approaches, or models, for the design of a national registration scheme to support personal care workers in aged care.

This information is important in understanding sector expectations on how older people, workers, providers and the community more broadly could interact with a scheme, as well as preferences for registration responsibility and high-level regulation.

What we heard:

Feedback from submissions and surveys reflected a preference to establish a public register where people could see whether a personal care worker was registered.

- While stakeholders valued the transparency and accountability of a public register, some respondents raised concerns around privacy, calling for safeguards to be put in place to protect the identity and confidentiality of workers.
 - This included some respondents suggesting that access could be restricted to key stakeholders, including for example, workers, employers and relevant regulators.
- Other stakeholders strongly recommended that any information held on a public register should be in plain, easily understandable language, complimented by visual aids, to ensure it is accessible for individuals with low literacy levels or those whose first language is not English.

Feedback from submissions indicated a clear preference for the implementation of a scheme where personal care workers are responsible for collecting evidence and providing information to a regulatory/professional body.

- Noting this, many submissions highlighted that there should also be clear expectations for aged care service providers to support personal care workers in meeting any ongoing training, skills and qualification requirements.
- Survey responses were divided on whether workers or aged care service providers should be responsible for the scheme. Noting this, many respondents suggested that the scheme should operate using a similar model to other relevant professionalised workforces, such as nurses and allied health professionals who are responsible for meeting their registration requirements.

Most survey respondents agreed:

- **there should be a public register where people can check registration**
- **there should be consideration of different registration categories**
- **that elements of a national worker registration scheme should be the same across aged care, disability support and veterans' care.**

- Registration costs, worker-based administrative burden, and impacts to sector attractiveness, were raised as issues in implementing a scheme where workers were responsible for attaining and maintaining their own registration.

Across submissions and survey responses there were a diverse range of suggestions on what an appropriate regulatory/professional body could look like for personal care workers, or what a regulatory/professional body could look like for personal care, disability support and veterans' care workers more broadly. Key suggestions included that:

- The Australian Health Practitioner Regulation Agency could support this role.
 - This option was seen to be an effective way to use existing regulatory architecture, with the establishment of an appropriate Board for personal care workers.
- A new and independent authority could be established with a focus on aged care, or care and support economy workers.
 - This authority could initially support personal care workers in aged care, and then be expanded to support the registration of personal care and disability support workers in the disability support and veterans' care sectors.
- The Aged Care Quality and Safety Commission could be expanded to perform this role, noting it currently performs a role in ensuring that workers adhere to the Code of Conduct for Aged Care, and manages the National Worker Screening Database for aged care workers.

The majority of respondents agreed that elements of a national worker registration scheme should be the same across aged care, disability support and veterans' care.

- Some stakeholders called for shared regulatory architecture, with a common digital platform, common baseline standards, and mutual recognition of registration status, qualifications and codes of conduct.
- Other key feedback centred around:
 - Siloed regulatory approaches between these sectors increasing regulatory fragmentation risks, resulting in increased red tape and burden for cross-sector workers, service providers and service users.
 - Similar or the same requirements providing improved employment opportunities for workers, better workforce mobility and enhanced stability across sectors.
- Many respondents agreed to a shared foundation of skills, with additional setting-specific training to be included on top, this included within aged care settings (residential, in-home and community care) and broader care and support economy settings.

Across submissions and survey responses there was strong support for a scheme to include different registration categories, for example, full registration and provisional registration. This was widely supported in cases where a worker may be undertaking training, or in cases of demonstrated workforce shortages.

- Many respondents emphasised that provisional registration should come with clear conditions, including supervision and timeframes for achieving full registration, in line with existing professional frameworks for other registered professions.

- Some respondents also suggested the inclusion of other categories, for example, full registration with new recognised specialisations that would highlight and value the additional knowledge and skills of the worker.
- A small group of respondents voiced concerns about implementing a system where unqualified workers could enter and provide poorer quality care and support services.
 - Some respondents noted short training modules, mapped to the units of competency in the Certificate III, could be rapidly undertaken for provisional registered workers which contribute towards the future attainment of a mandatory qualification.

This consultation section sought feedback on key groups that may face additional barriers through the implementation of a national registration scheme, including any important considerations and support suggestions to aid these workers:

- **Aboriginal and Torres Strait Islander workers**
 - There was strong support for involving Aboriginal and Torres Strait Islander voices in policy design, ensuring that systems are accessible, respectful and responsive to cultural needs.
 - Key suggestions included the need to establish culturally safe worker supports, navigation and advocacy support, diverse access to registration information, including phone, community information centres, and printed material, along with low or no registration fees.
 - Some stakeholders noted some workers would face barriers in attaining and providing documentation, geographic isolation, digital literacy skills, and online access.
 - Other suggestions included establishing mentorship programs, supports for local and community-based training, flexible registration pathways, and the recognition of lived experience.
- **Migrant and culturally and linguistically diverse workers**
 - Respondents noted a range of potential barriers for this large worker group including recognition of overseas qualifications and training, cultural understanding and some specific Australian aged care skills and training needs.
 - Key support suggestions included ensuring there is clear advice on how to navigate the registration process, culturally appropriate support, including through ensuring there is translated material, and funded and flexible learning opportunities.
- **Workers with disability**
 - Respondents emphasised that workers with disability should be supported through accessible training, flexible learning options, and recognition of lived experience. There was also a strong focus on ensuring that registration systems are inclusive and easy to navigate.
 - Some respondents called for workplace adjustments, assistive technologies, subsidised training and registration, and mentoring to enable participation and career progression.

- Workers from low socioeconomic backgrounds
 - Respondents noted that workers from low socioeconomic backgrounds often faced financial and educational barriers that could limit their ability to meet registration requirements.
 - There was strong support for literacy and numeracy assistance, flexible learning options, free or low-cost training, registration and subsidies for other related costs.
- Regional, rural and remote workers
 - Respondents noted key barriers for some workers would include limited access to training facilities, unreliable internet for online learning, and high costs and time in travelling for training, qualifications or registration.
 - Many stakeholders called for flexible, subsidised, or fully funded training options including mobile or community-based delivery.
 - There was strong support for pathways to recognise prior learning and experience, and local mentoring to support workers in meeting requirements without leaving their communities.

Other key feedback shared through this consultation section included:

- The importance of a well-communicated, staged and supported scheme roll-out.
- The establishment of a clear definition / scope-of-practice for personal care workers.
 - Including clarity on career pathways into other job roles, for example, enrolled nurse, or registered nurse.
- The need for careful consideration on registration scheme costs and scheme funding.
- The provision of both digital and physical registration cards for workers.
- General support for some form of electronic passport to aid workers in demonstrating their training and skills, and to reduce duplication when workers move between employers or sectors.
- Strong preference for future opportunities to better target information and supports directly to personal care workers, as well as collecting relevant data and information.
- Considerations around professional indemnity insurance.
- The need for stronger partnerships with Registered Training Organisations (RTOs).

Training requirements

This consultation section sought feedback from stakeholders on their preferred approaches, or models, for establishing an ongoing/continual training requirement that personal care workers would need to complete as part of maintaining their registration.

This information is important in understanding sector views and expectations on the types of training that personal care workers should regularly undertake, including views on professional development, and knowledge and skills across different aged care settings.

What we heard:

Feedback from submissions indicated a clear preference for the implementation of a continuing professional development (CPD) model for personal care workers, with many respondents noting it should be around 10 hours per year.

- Survey respondents were divided on this question, where while the majority agreed with a CPD model, many stakeholders also preferred the implementation of a model where workers had to undertake specific skill sets, subjects, or shorter non-accredited training on an ongoing basis.
- Some respondents suggested that some form of national skills or training framework could be developed to provide guidance on the essential skills, knowledge and training for roles in the aged care sector.
 - Respondents suggested this framework may also support workers in undertaking training that could map towards acquiring accredited skill sets or further relevant qualifications. This would enhance job satisfaction, professional development and articulate career pathways in the sector.
 - This framework was also raised as something that could be explored alongside a revision of the Certificate III in Individual Support and other relevant accredited training packages.

Across survey responses there were three key themes of suggestions and comments around whether ongoing training requirements should be the same, or different, for workers employed in different aged care settings, including that:

- Residential, in-home and community care are separate, distinct environments, with different responsibilities, and levels of supervision that require different training approaches.

Most survey respondents agreed:

- **that there needed to be ongoing training, but were divided on what this requirement should look like**
- **there should be harmonised approaches to training across the care and support economy, but that there also needed to be sector-specific training.**

- There should be a shared foundation of core competencies, however there would also need to be some setting specific training to address the unique challenges of each role.
- Training should be consistent across settings to ensure workforce flexibility and mobility.

There was a diverse range of feedback from submissions and surveys on the types of implementation support that may be required to aid the introduction of an ongoing training requirement. Some key themes included:

- The need for Government-funded training, as well as accessible online and in-person learning options for workers to undertake.
 - This included suggestions to bring training directly to workers, especially in rural or remote settings, rather than expecting workers to travel.
 - It also included suggestions to ensure that training and learning options were available in multiple languages and plain English.
- That training should be financially compensated, that workers should have dedicated time to complete training without added workload, and that workers may also need to be given access to devices connected to the internet to undertake training.
- There was strong support for culturally appropriate resources, and digital, literacy, numeracy and language training and supports, especially for migrant and culturally and linguistically diverse workers, Aboriginal and Torres Strait Islander workers and workers from lower-socioeconomic backgrounds.
- The need for careful consideration on ways to best support casual and part-time workers in meeting this requirement.

Feedback from submissions and surveys supported more harmonised approaches to training requirements across the care and support economy, particularly for aged care, disability support and veterans' care.

- Many recommended there could be core competencies, including communication, safety, and person-centred care, paired with sector-specific modules to address specific needs.
- There was strong support for flexible, accessible training pathways that could support cross-sector career pathways.
- Other stakeholders noted that a CPD model for personal care workers could align closely with the professional development requirements recommended in the *Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability* Final Report for the establishment of a disability support worker registration scheme.

There was a broad range of feedback from submissions and surveys on potential transition timeframes that should be considered in supporting the successful implementation of this requirement. Key themes included:

- The need for carefully and thoroughly planned action to minimise workforce disruption and not to disadvantage, discourage or disincentivise existing personal care workers.
- Strong support for clear communication, flexible and readily accessible training, and government funding to support workers and aged care service providers.
- There were also a diverse range of suggested transition timing from between 1-3 years for workers to meet this requirement.

Other key feedback shared through this consultation section included:

- Consideration of micro-credentialing, and the role it could provide in supporting workers to work towards further qualifications, or new advanced personal care worker specialisations.
 - Some stakeholder noted concerns with the lack of consistency in definition when referring to micro-credentials.
- Some stakeholders suggested the establishment of government funded training grants, with the goal that they could:
 - Support workers that face additional barriers, for example, workers in remote settings who may need to travel to undertake a qualification or training
 - Cover backfilling for staff, or training leave in some instances
 - Seek to cover costs for high-value training courses in core care and support areas.
- There should be careful consideration on how this requirement links and interfaces with the training requirements set in the strengthened Aged Care Quality Standards.
- Stakeholders also noted a diverse range of key areas of suggested mandatory training, including, but not limited to:
 - Cultural safety training
 - Trauma informed and inclusive practice
 - Dementia and palliative care training
 - First Aid and Cardiopulmonary Resuscitation training
 - Infection prevention and control.
- Survey respondents noted interest in the potential exploring the development of a professional network that could support the promotion of high-value training opportunities, provide peer mentoring, and support professional development opportunities.
 - They also noted interest in exploring portable training opportunities for workers working across multiple providers.

Skills and qualification requirements

This consultation section sought feedback from stakeholders on their preferred approaches, or models, for establishing requirements for specific skills, or qualifications, that a personal care worker would need to hold, or undertake, as part of acquiring their registration.

This information is important in understanding sector views and expectations on the types of knowledge and skill requirements that personal care workers should have, or undertake, including sector preferences on specific skills and training packages.

What we heard:

Feedback from submissions and surveys strongly supported the establishment of mandatory minimum skills and/or qualifications for personal care workers, with a clear preference for the establishment of a Certificate III in Individual Support as the mandatory minimum qualification requirement for personal care workers in aged care.

- Some stakeholders noted the Certificate III in Individual Support would ensure all workers had a consistent foundation of shared knowledge and professional skills.
- Some stakeholders suggested that a more rapid entry-level accredited skill set could also be implemented to provide foundational care and support skills to provisionally registered workers, while they actively work towards attaining a Certificate III in Individual Support.
- Other respondents suggested an accredited skill set could be the mandatory minimum qualification, supported by a skills or training framework, where workers could undertake training and qualifications that aligned with their preferred career paths.
- Some respondents noted additional training, or higher-level qualifications, for example, diplomas, may be more appropriate for workers undertaking leadership roles.

Other key preferred mandatory minimum skill requirements raised by stakeholders included:

- Risk management, and independent decision-making skills and training for workers in home and community settings.
- Person-centred care skills.
- Clinical, mental health, rehabilitation and restorative care skills.
- Palliative care and dementia care skills.
- Cultural competency, diversity and trauma-informed and inclusive practice skills.

Most survey respondents agreed:

- **to establishing mandatory minimum skills and qualification requirements**
- **workers should be supported to attain a qualification while employed**
- **that a mandatory minimum qualification could meet the needs of having a minimum English language / communication skill requirement.**

- English language/communication, literacy, digital and numeracy skills.

Most respondents did not think there should be different requirements for new and existing personal care workers, but noted a range of additional considerations and supports that could be implemented to aid workers in meeting new requirements. Key suggestions included that there needed to be:

- Government-funded or subsidised TAFE and other training options.
 - Some submissions also noted a significant amount of current Certificate III in Individual Support enrolments are delivered by non-TAFE RTOs.
- Provisional registration to provide flexibility and support to both new and existing workers.
- High-quality induction programs, mentoring and supervised practice for new entrants.
- Robust and easy to use pathways for Recognition of Prior Learning (RPL), along with broader opportunities to recognise existing aged care worker's highly valued experiences, skills and knowledge.
 - Some Vocational Education and Training sector respondents noted RTOs must already ensure they have robust and valid processes for RPL, however there could be the opportunity to develop a streamlined process, or toolkit, to reduce burden on RTOs, aged care service providers and workers.
- Paid study leave, flexible rostering to support study and training, paid and supported mandatory work placements, and a greater uptake of traineeships and 'earn while you learn' approaches by aged care service providers.
- More detailed consultation and tailored support for Aboriginal and Torres Strait Islander people, culturally and linguistically diverse workers, and workers in rural or remote areas, including on language assistance and local training access.

Feedback from submissions and surveys largely supported the implementation of a model where workers could undertake study to attain a mandatory minimum qualification while employed.

- Respondents in general supported a flexible, but clearly defined timeline for workers to undertake and complete their qualification.
 - Some respondents suggested that workers should have between 3-6 months to enrol in a qualification after commencing their role.
 - Feedback was divided on how long workers would have to complete their qualification, with respondents suggesting between 6-24 months.
- There was divided feedback on whether there should be limitations on the types of job roles workers could perform while undertaking study, with some respondents suggesting that workers should not take on advanced, high-risk, or overly personal tasks until they were fully qualified.

The vast majority of survey respondents agreed that the introduction of a mandatory minimum qualification would meet the need of having minimum English language proficiency or communication skill requirements.

- Noting this, many survey responses also raised the importance of English language and clear communication skills for safety, accurate documentation, and building trust with older people in aged care, particularly those with hearing loss or dementia.
- Responses were more divided through submissions, where some stakeholders agreed that there should be an English language proficiency requirement, and others noted that

it could reduce workforce numbers, disadvantage Aboriginal and Torres Strait Islander and culturally and linguistically diverse workers, and that relevant communication skills could be developed through on-the-job training.

- Some stakeholders noted exemptions could be made for workers employed in organisations where they delivered in-language care and support services, while other stakeholders noted standards should apply universally to ensure quality care.
- In general, stakeholders agreed that there was a strong need to ensure that there was accessible, low or no cost, culturally sensitive English language training and supports for aged care workers.

Other key feedback shared through this consultation section included:

- That a phased rollout with clear timelines and support was recommended to avoid workforce disruption and ensure there is a smooth implementation.
- Stakeholders generally supported consistent core skills and qualifications across aged care, disability support and veterans' care to improve workforce mobility and care quality.
 - However some respondents emphasised the need for sector specific training and skills to address unique needs.
- There was some support for micro-credentialing options to provide flexible, accessible and cost-effective ways to upskill workers, with links to accredited training packages.
- Some stakeholders noted there would need to be careful considerations on the connections between qualification and worker pay.
- That government could consider campaigns to promote working within aged care to support new entrants to enter the sector, particularly in rural, regional and remote areas.
- There was a need to consider appropriate supports, or reduced barriers, for students undertaking study in other relevant aged care areas, including, for example, students undertaking a Bachelor in Nursing, who in the interim, may wish to work as a personal care worker to develop their other sector skills and knowledge.

The Department of Health, Disability and Ageing thanks all participants for taking the time to contribute to this consultation.

The experiences, thoughts and expert advice shared through this consultation are valued and will provide a critical and contemporary understanding of sector views and expectations, building on outcomes from the Royal Commission into Aged Care Quality and Safety,
