



QUALIFICATION
REVIEW

Aged Care, Disability, Leisure and Health Functional Analysis Report



HumanAbility



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Training package modification history

Version	Status	Release date	Summary of changes
1.0	Current	23 June 2026	Document published

Executive Summary

This functional analysis report explores the shape and scope of key work roles within the aged care, disability, and leisure and health sectors. Informed by industry consultation, desktop research, and examination of job advertisements, the analysis will be used as an evidence base shaping the *Aged Care, Disability, Leisure and Health Qualification Review*.

Workforces supporting these sectors are broad and diverse, comprising staff who do not hold formal qualifications through to staff with higher-qualified staff specialising in clinical and allied health junctions. The scope of the qualification review is to review five qualifications in the CHC training package, and one nationally accredited qualification, [listed here](#). These training products, and this functional analysis, focuses primarily on the following roles:

- personal care worker (residential aged care);
- disability support worker (multiple settings);
- home and community support worker (aged care);
- domestic assistant;
- leisure and lifestyle worker; and
- frontline team leader or coordinator.

Workers in these roles operate across a range of environments, including residential and home-based settings, and in the community. Primary functions differ across roles and settings but may include providing personal care, supporting independence and wellbeing including through the provision of social support, assisting with daily tasks, forming and maintaining relationships with clients and their families, record-keeping and compliance duties, and adhering to organisational policies, regulatory standards, and codes of conduct.

The functional analysis highlights that workers across the aged care, disability, and leisure and health sectors typically require several common core capabilities. There is, however, a growing need for specialised skills and training, to ensure future workforces are sustainable, effective, and meet the evolving needs of industry and the community. Specialist needs differ between aged care and disability.

Key themes surfaced in the evidence include:

- the complexity of care and support needs of older people and people with disability;
- the impact of legislative, regulatory, and policy reforms; and
- variances in job functions, responsibilities, and expectations across metropolitan, regional and remote areas.

The evidence captured in this functional analysis will be used in the next stage of the *Aged Care, Disability, Leisure and Health Qualification Review*, which will involve assessing the relevance and potential for updating and restructuring of the six qualifications, and associated skill sets, currently supporting these sectors.

1 Functional analysis

1.1 Purpose of the functional analysis

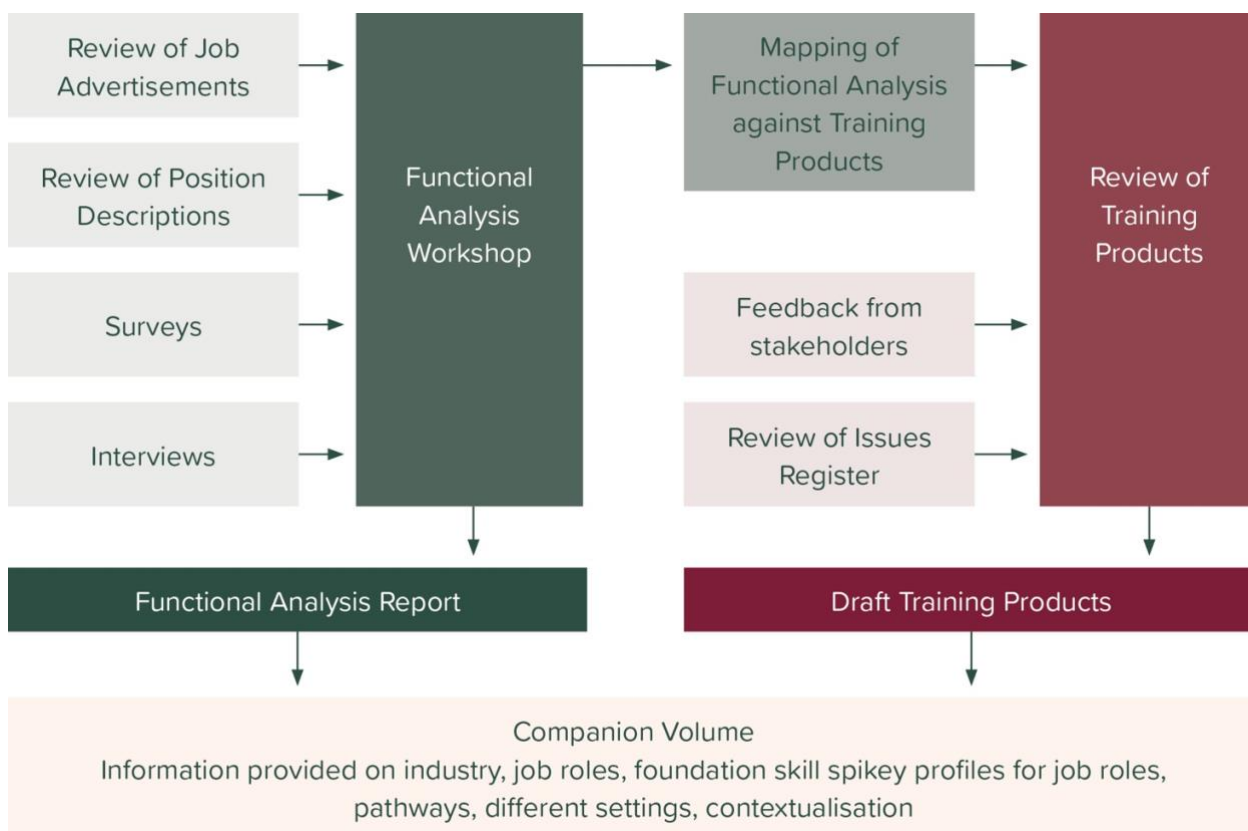
Functional analysis provides a structured, evidence-based way to understand work performed in defined job roles and forms a critical foundation for training product design projects. Its focus is on describing work as it is carried out in practice, rather than starting from existing qualifications or units of competency. In particular, functional analysis:

- examines roles, functions and sub-functions to describe what people do in practice;
- captures responsibilities, decision-making and role boundaries; and
- establishes occupational outcomes grounded in real work rather than legacy training structures.

Functional analysis is conducted through a systematic process of evidence gathering, synthesis and validation. This process is designed to remain focused on work performed in roles and typically involves:

- defining the roles in scope and their contexts of work;
- reviewing existing information about work, including industry and workforce resources;
- analysing job advertisements and position descriptions to identify patterns in tasks and responsibilities;
- engaging with sector stakeholders through interviews, surveys or workshops designed to elicit descriptions of work;
- synthesising evidence to identify functions and sub-functions that describe how work is organised and carried out; and
- validating draft findings with sector representatives to test accuracy and completeness.

Figure 1. The functional analysis process



1.2 Intended audience

This report is designed to communicate to industry stakeholders including, but not limited to:

- Skills Ministers;
- The Department of Employment and Workplace Relations (DEWR);
- Sector representatives and stakeholders;
- Peak bodies, relevant government departments and industry associations;
- RTOs and VET professionals; and
- HumanAbility.

1.3 Project goal

A functional analysis examines the functions performed within a role, including the activities undertaken, responsibilities held and capabilities required to perform work effectively. By focusing on the work itself rather than existing training products, the analysis provides an evidence-based understanding of contemporary practice and emerging workforce requirements.

The purpose of a functional analysis is not to evaluate individual workers, organisations or training providers. Rather, it seeks to identify the common functions, capabilities and workforce requirements that characterise contemporary practice across the sectors within scope. This approach helps distinguish

which skills and knowledge are fundamental to effective performance, which are specific to particular settings or service contexts, and where new or changing workforce requirements may influence future training needs.

Training products are most effective when they reflect the realities of contemporary practice. As service delivery models, workforce expectations, policy reforms and regulatory environments continue to evolve, it is important to understand how work is currently performed, the capabilities required by workers, and the conditions in which those capabilities are applied. This functional analysis was undertaken to provide that evidence base.

The findings presented in this report provide a structured understanding of the work undertaken across the aged care, disability, and leisure and health sectors. They identify common and distinct functions across job roles, occupational functions and service settings, examine emerging trends influencing workforce capability requirements, and explore the extent to which current training products align with contemporary practice. The analysis contributes to the evidence base used to review qualifications, units of competency and skill sets, supporting informed decisions about how training products can best reflect contemporary practice and future workforce needs.

1.4 Project scope

The analysis examines the work performed within the aged care, disability, leisure and health sectors that are represented by the qualifications included in the *Aged Care, Disability, Leisure and Health Qualification Review*.

The analysis includes roles involved in:

- residential aged care;
- disability services;
- home and community support;
- leisure and health services; and
- coordination and frontline leadership.

The analysis examines multiple related job roles that share common occupational functions while recognising that responsibilities, levels of autonomy and decision-making requirements may vary between service settings and organisations. The analysis also recognises that role boundaries are not always clearly defined and that workers may perform functions across multiple service settings or client groups. Where overlap exists, the analysis focuses on the functions, responsibilities and capabilities required to perform the work rather than on specific job titles.

The scope of the analysis does not include:

- workforce roles, qualifications or career pathways outside the sectors and qualifications identified in the approved project scope;
- regulated health professions and other occupations that fall outside the occupational coverage of the qualifications under review; and
- functions and responsibilities that are not performed within the roles being examined.

2 Industry and workforce context

2.1 Sector overview

Workers in aged care, disability, and leisure and health roles provide services and assistance to members of the community. Settings for this work can include people's own homes, residential centre-based settings, and in the community. Depending on the specific role and setting, duties may include:

- Assistance with personal care needs such as showering, dressing, and eating;
- General household assistance;
- Providing emotional support, care and companionship to clients;
- Supporting clients with complex physical or mental health care needs;
- Assisting clients with medication;
- Dealing with vulnerable people;
- Liaising with clients' families, including having sensitive or challenging conversations;
- Responding to complex behaviours;
- Arranging social activities;
- Assisting with rehabilitation exercises; and
- End of life care.

Workforces in these sectors are generally growing, amid increasing demand and demographic shifts. Visibility of the composition and profile of each of these workforces is, however, low. Barriers include:

- ANZSCO, the current occupation classification framework used by the Australian Bureau of Statistics, can be inconsistent, leading to a lack of clarity around worker numbers in different contexts. For instance, workers supporting people in their own homes can technically be counted under both *4233 Nursing Support and Personal Care Workers* and *4231 Aged and Disabled Carers*. Welcome differentiation will come under the new Occupation Standard Classification for Australia (OSCA) framework; the first wave of these data – which, for instance, steps out distinct roles such as Residential Aged Care Worker, Aged Care Team Leader, and Disability Support Officer – is set to be released in late 2026.¹
- The most popular qualification in this review, the *CHC33021 Certificate III in Individual Support*, is completed by learners who may go on to work in either of the aged care or disability sectors. Many may move between these sectors at various points of their career.
- Graduates of the two leisure and health qualifications (*CHC43415 Certificate IV in Leisure and Health*, and *CHC53415 Diploma of Leisure and Health*) can similarly work in various settings – including in aged care and disability, but also community work, sports and recreation, and children's education and care. For statistical purposes, we consider here *ANZSCO 4113 Diversional Therapists* as the main destination occupation for graduates of these programs.

¹ <https://www.abs.gov.au/statistics/classifications/osca-occupation-standard-classification-australia/2024-version-1-0>

- The lack of mandatory minimum qualification requirements in parts of the aged care sector makes it difficult to track skills and knowledge gaps potentially addressable by training product reform.

2.2 Key workforce characteristics

These limitations aside, the current ANZSCO data tell us that, at February 2026, there were:

- 376,000 Aged and Disabled Carers;
- 110,400 Nursing Support and Personal Care Workers; and
- 5,300 Diversional Therapists

Analysis at the ANZSCO occupation level reveals these workforces are highly feminised, attract relatively lower rates of pay, and are more likely than the overall workforce to work part-time.

Table 1. Demographic features of the aged care, disability, and leisure and health workforce²

	Aged and Disabled Carers	Nursing Support and Personal Care Workers	Diversional Therapists	Overall workforce
Gender composition	73% female	74% female	74% female	48% female
Median age	41	40	48	39
Part-time share	60%	52%	48%	41%
Average weekly income	\$1,761	\$1,612	\$1,434	\$1,852

Other data sources provide further, or consolidating, demographic detail on these sectors’ workforces. The Department of Health and Aged Care’s *2024 Aged Care Worker Survey*, for example, which collected responses from 21,197 people working in the sector, found that:

- over two-thirds of respondents (71.6%) worked in personal care worker and assistant roles;
- Around two in five (40.8%) speak a language other than English; and
- A majority (58.7%) work in permanent part-time roles, followed by 20.8% in casual positions, and just 18.0% on a full-time basis.³

The 2024 NDS Workforce Census revealed that over the short-term (between 2020 and 2023) the proportion of the disability workforce in part-time roles had dropped from 82% to 70%.⁴ Over this period, the proportion of full-time staff rose from 18% to 30%. Despite these trends, turnover rates for both

² This data is collected at the “4-digit” level of ANZSCO classifications. We note some workers within scope of this review fall under “Disabilities Services Officer”, within the much broader 4-digit category of Welfare Support Workers.

³ <https://www.health.gov.au/sites/default/files/2024-12/aged-care-worker-survey-2024-report.pdf>

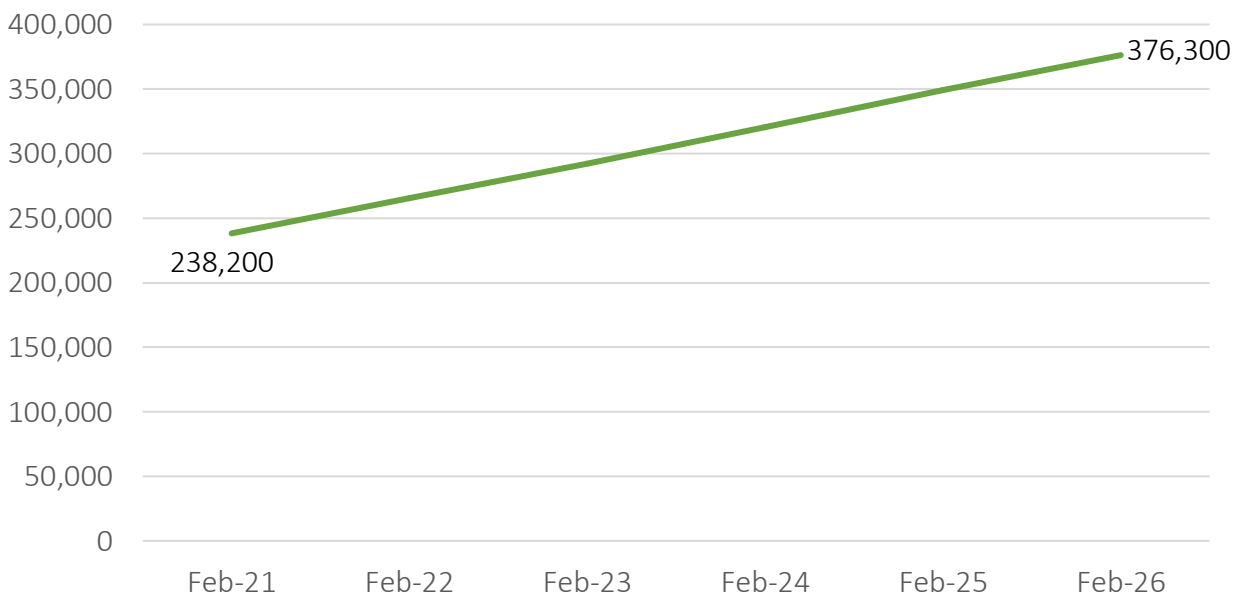
⁴ https://nds.org.au/images/State_of_the_Disability_Sector_Reports/NDS_Workforce_Census_Report_2024.pdf

casual and permanent staff increased over the period. The NDIS Review emphasised this trend. It found that compared to the national average of 12%, between 17% and 25% of disability workers leave the sector in any given year.⁵ For employers, a key theme emerging from the Census’s findings was the high cost of onboarding new staff. In the context of this training product review, this places a focus on ensuring the effectiveness of skills and training pathways in preparing graduates for workforce entry, and in upskilling existing workers to support retention.

2.3 Key workforce trends

Across all three ANZSCO occupation groups discussed above, workforces have generally grown over the past five years.

Figure 2: Workforce size 2021-2026, Nursing Support and Personal Care Workers⁶



⁵ https://www.ndisreview.gov.au/sites/default/files/resource/download/building-a-more-responsive-and-supportive-workforce_0.pdf

⁶ Jobs and Skills Australia, Jobs and Skills Atlas – ‘Nursing Support and Personal Care Workers’

Figure 3: Workforce size 2021-2026, Aged and Disabled Carers⁷

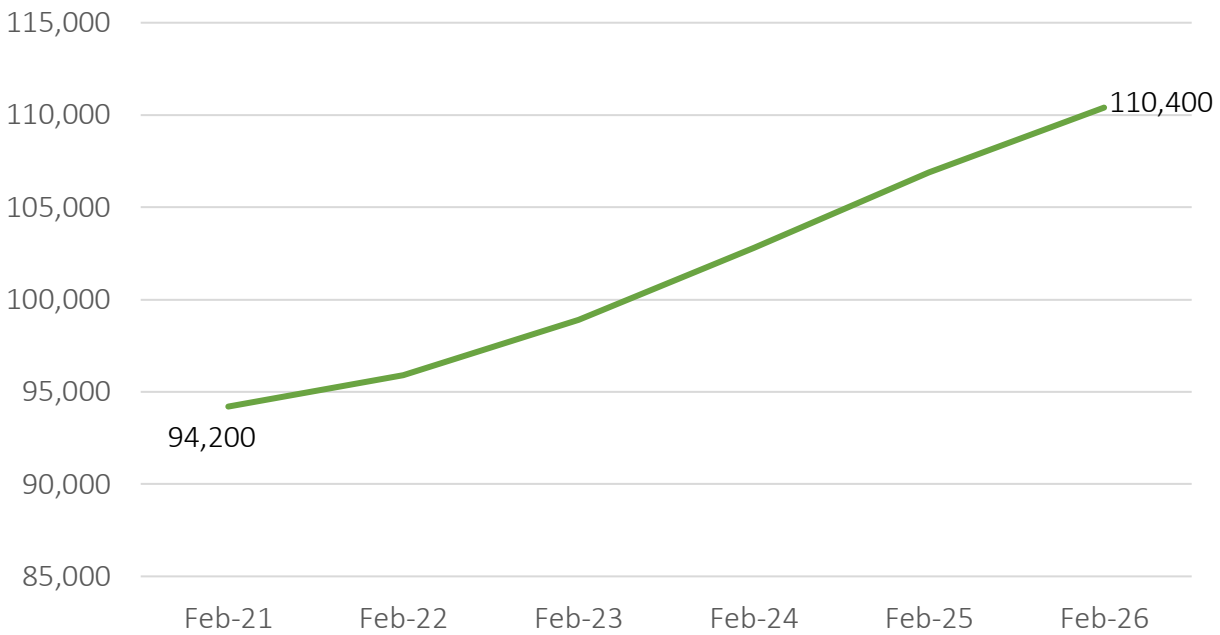
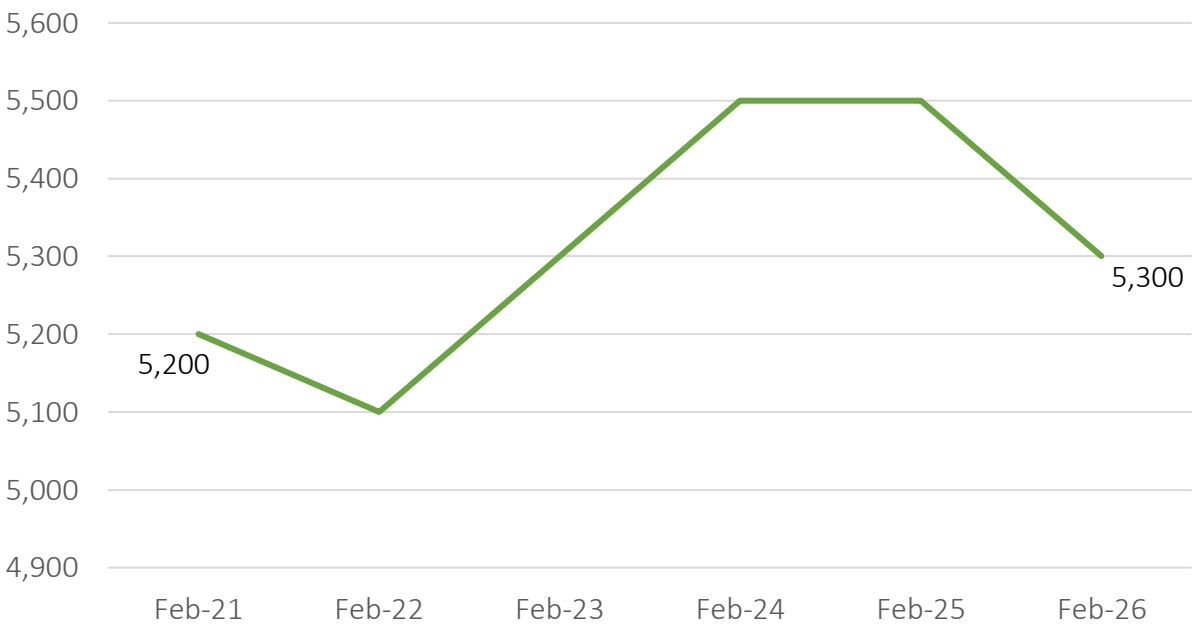


Figure 4: Workforce size 2021-2026, Diversional Therapists⁸



Worker numbers are projected to continue growing at pace. Between 2025 and 2035:

- The Aged and Disabled Carer workforce will expand by 18.1%;
- Nursing Support and Personal Care Worker numbers will grow by 24.7%; and

⁷ Jobs and Skills Australia, Jobs and Skills Atlas – ‘Aged and Disabled Carers’

⁸ Jobs and Skills Australia, Jobs and Skills Atlas – ‘Diversional Therapists’

- The Diversional Therapist workforce will increase in size by 18.5%.

This growth in supply under current and planned policy scenarios will, however, not meet the rising demand for services. The largest component of the workforce, Aged and Disabled Carers, is classified as under shortage in every state and territory, with issues around retention identified as a major driver.⁹

2.4 Legislative, regulatory or policy settings

The aged care and disability sectors are subject to ongoing inquiry, review, and reform. Changes that have already been, and will continue to be, made will affect the shape and nature of work undertaken at various levels of the sectors' respective workforces. Although not discussed in detail here, workers in leisure and health related roles will be variously impacted across both the aged care and disability contexts.

Both sectors also feature in initiatives and strategies arising from the *National Agreement on Closing the Gap*, aimed at reducing the difference in life outcomes between First Nations and non-First Nations Australians across a wide range of measures. A focus on strengthening Aboriginal Community Controlled Organisations (ACCOs) delivering aged care and disability services, for instance, underpins both the Inspector-General of Aged Care's *Statement of Commitment to the National Agreement on Closing the Gap*¹⁰ and the First Peoples Disability Network's *Disability Sector Strengthening Plan*.¹¹ Other priority reform areas shaping such initiatives involve developing both 'policy' and 'place-based' partnerships between government and First Nations communities and stakeholders, and enhancing data accessibility to drive service evaluation and meet the evolving, and location-specific, needs of community members.¹² In aged care, the need for specific trauma-informed support for Stolen Generations survivors has also been identified, helping shape targeted training.¹³

Aged care:

In aged care, significant changes to legislation have been made in response to recommendations from the Royal Commission into Aged Care Quality and Safety (2018-2021). These included a call for review of related qualifications supporting the workforce, and mandatory, regular training about dementia and palliative care for aged care workers (recommendations 79 and 80).¹⁴ Commissioner Briggs recommended the review should consider whether the following should become core competencies:

- personal care modules, including trauma-informed care, cultural safety, mental health, physical health status, wound care, oral health, palliative care, falls prevention, first aid, monitoring medication and dysphagia management
 - quality of life and wellbeing, including the use of technology, interventions for older people at risk, and recognising and responding to crisis situations.

⁹ <https://www.jobsandskills.gov.au/data/occupation-shortage/occupation-shortage-list>; Jobs and Skills Australia, Jobs and Skills Atlas – 'Aged and Disabled Carers'

¹⁰ <https://www.igac.gov.au/sites/default/files/2025-07/inspector-general-s-statement-of-commitment-to-the-national-agreement-on-closing-the-gap.pdf>

¹¹ <https://www.closingthegap.gov.au/sites/default/files/2022-08/disability-sector-strengthening-plan.pdf>

¹² <https://www.closingthegap.gov.au/national-agreement/national-agreement-closing-the-gap/6-priority-reform-areas>

¹³ <https://healingfoundation.org.au/resources/working-with-stolen-generations/>

¹⁴ <https://www.royalcommission.gov.au/system/files/2021-03/final-report-recommendations.pdf>

The *Aged Care Act 2024*, and the accompanying *Aged Care Rules 2025*, marked a shift in the national legal framework applying to people receiving care, workers, and providers. Where the previous Act had focussed on the payment and application of subsidies, the new legislation centres a rights-based approach to aged care provision.¹⁵ Older people are entitled to:¹⁶

- independence, autonomy, empowerment and freedom of choice
- equitable access
- quality and safe funded aged care services
- respect for privacy and information
- person-centred communication and the ability to raise issues without reprisal
- advocates, significant persons and social connections.

Alongside this, a set of strengthened Aged Care Quality Standards came into effect from 1 November 2025, providing clear guidance to providers on how to meet their obligations under the Act.¹⁷ The updated Standards, directly responding to recommendations from the Royal Commission, require improved skills and knowledge among the workforce in areas such as:

- Dementia care;
- Clinical care;
- Supporting diversity;
- Food and nutrition; and
- Provider governance

At a policy level, older people can access expanded assistance at home through the Support at Home program, which was introduced in November 2025 and is set to replace the Home Care Packages Program and the Short-term Restorative Care Programme. This model links clients with a wide range of support options, including domestic assistance, meals and transport, nursing care, allied health and therapy, assistive technology and home modifications, and social support and community engagement. Industry analysis reveals that demand for home-based aged care support is outstripping supply, putting pressure on the workforce.¹⁸ In residential aged care, an increase in the mandatory care minutes providers must deliver to each client,¹⁹ and the requirement for registered nurses (to whom personal care workers report) to be available to residents around the clock²⁰ increases demand for a suitably-qualified care workforce, and has had implications for resourcing of lifestyle and lifestyle roles.

Different regulations and standards apply across Australia regarding which roles are allowed to administer prescribed drugs and medications. These legislative settings (such as a recent law change in Victoria that means only registered or enrolled nurses can administer certain medications to people who need

¹⁵ <https://www.health.gov.au/our-work/aged-care-act/about#why-the-new-act-is-important>

¹⁶ <https://www.agedcarequality.gov.au/workers/statement-rights>

¹⁷ <https://www.agedcarequality.gov.au/providers/quality-standards/strengthened-aged-care-quality-standards>

¹⁸ <https://assets.kpmg.com/content/dam/kpmgsites/au/pdf/2026/kpmg-aged-care-market-analysis-2026.pdf.coredownload.inline.pdf>

¹⁹ <https://www.health.gov.au/our-work/care-minutes-registered-nurses-aged-care/care-minutes>

²⁰ <https://www.healthtranslations.vic.gov.au/resources/247-registered-nurses-in-aged-care-homes>

assistance)²¹ have implications for the clinical scope of practice of care and support roles outside of the nursing context.

Beyond these realised changes, the Federal Government is considering the findings from recent consultations around how to implement a national registration scheme for personal care workers in the sector.²² It remains to be seen what impact such a scheme will have on skills and training requirements. Possibilities range from continuing professional development (CPD) in key areas – such as those identified by the Aged Care Royal Commission – to potentially requiring a mandated minimum qualification or skill set for workforce entry. Balancing the current and future needs of the community, industry, and eventual workers will therefore be vital when considering the scope, relevance, and accessibility of the training products in this review.

Disability:

The *Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (2019-2023)* and the NDIS Review (2022-2025) made a series of recommendations that have begun to be implemented by government. The Royal Commission highlighted the increased risks of violence, abuse, and neglect of people with disability in isolated and segregated settings, and the importance of access to supported decision making to facilitate rights, participation, and safety.

Enhancing the rights of people with disability participating in disability services, and the quality of the services, and safeguards form key pillars of these recommendations. The NDIS Quality and Safeguards Commission's subsequent Own Motion Inquiry into Aspects of Supported Accommodation emphasised the importance of active supports to quality of life and safeguards in supported accommodation.²³ New practice standards are being introduced specifically for housing and living supports, which will soon be subject to mandatory provider registration.²⁴

At the same time, there has been a renewed focus on the equity, compliance, and efficiency of service delivery across the system. The NDIS Review noted the need for disability supports outside the federally-funded scheme. At the federal level, changes to NDIS eligibility rules – coming into effect on 1 January 2028 – will significantly reduce growth in the number of recipients of federal funding for disability services.²⁵ With states and territories needing to enhance supports to meet this gap in demand, it is unlikely these reforms will reduce the overall need for workers.

Rather, against a backdrop of additional policy changes, it is possible that the types of work functions undertaken by staff in the disability sector will shift (see Section 4 of this report for more detail on specific, and emerging, roles). Funding measures over the previous two federal budgets have focussed on:

- Strengthening compliance and transparency of NDIS payments;

²¹ <https://www.health.vic.gov.au/drugs-and-poisons/medication-administration-in-residential-aged-care>

²² <https://www.health.gov.au/sites/default/files/2025-09/consultation-summary-report-on-a-national-registration-scheme-to-support-personal-care-workers-in-aged-care.pdf>

²³ <https://www.ndiscommission.gov.au/sites/default/files/2023-01/Own%20Motion%20Inquiry%20FINAL%20Report%20-%2016%20January%202023.pdf>

²⁴ <https://www.ndiscommission.gov.au/about-us/ndis-commission-reform-hub/ndis-practice-standards-reform#paragraph-id-107392>

²⁵ <https://www.health.gov.au/our-work/ndis-legislation-changes/amendments/2025>

- Increasing supports available to recipients and families to understand changing eligibility requirements and navigate the system; and
- Introducing the Thriving Kids program, which will deliver early intervention for children aged eight and under with developmental delay and/or autism, who may or may not access the NDIS, depending on assessment processes.

The evolving shape of the disability workforce needed to meet this changing policy environment will be an important consideration in this training product review.

3 Methodology and evidence

3.1 Desktop research

Desktop research was undertaken to build a shared understanding of how work performed in the roles in scope is currently described and understood across the sectors. This step helped set the scene for the functional analysis by identifying the broader context in which work occurs and highlighting factors that influence how roles are performed in practice. The intent was not to evaluate training products or workforce performance, but to establish a sound starting point for examining work.

The review drew on a range of relevant industry, workforce, and regulatory material that describes or shapes work performed in the roles examined. Sources were selected to surface information about work activities, responsibilities, decision-making and role boundaries, as well as to identify areas where expectations appear to be shifting or are inconsistently defined. The emphasis throughout was on understanding how work is framed and experienced in practice, rather than assessing policies, programs, or training arrangements.

Some of the relevant frameworks and guiding documents analysed include:

- The Strengthened Aged Care Quality Standards and the Aged Care Code of Conduct, both administered by the Aged Care Quality and Safety Commission.²⁶
- The Department of Health, Disability and Ageing's *Training Checklist for Aged Care Workers and Volunteers*. This document provides an overview of training modules available to aged care workers seeking knowledge around legislative, regulatory, and functional implications of working in the sector, including obligations under federally funded schemes such as the new Support at Home program.²⁷
- The National Disability Services' (NDS) Skills Project,²⁸ which created several resources for disability providers and workers. A Skills Bank developed for the project documents the current skills needed by frontline care workers and supervisors. Relatedly, an Accredited Training Audit was undertaken.²⁹ This resource maps gaps between current training products and the skills currently needed by the disability workforce. HumanAbility will draw on this resource, alongside our broader research and consultation activities, in this training product review.
- In the disability sector, other guiding documents that outline both tangible and 'soft' skills needed by the workforce include the NDIS Code of Conduct,³⁰ the NDIS Practice Standards,³¹ and the NDIS Workforce Capability Framework.³²

²⁶ <https://www.agedcarequality.gov.au/providers/quality-standards/strengthened-aged-care-quality-standards>;
<https://www.agedcarequality.gov.au/for-providers/code-conduct>

²⁷ <https://www.health.gov.au/sites/default/files/2026-05/training-checklist-aged-care-workers-and-volunteers.pdf>

²⁸ <https://nds.org.au/resources/all-resources/nds-skills-bank-project>

²⁹ https://nds.org.au/images/Accredited_Training_Audit.pdf

³⁰ <https://www.ndiscommission.gov.au/rules-and-standards/ndis-code-conduct>

³¹ <https://www.ndiscommission.gov.au/rules-and-standards/ndis-practice-standards>

³² <https://www.ndiscommission.gov.au/sites/default/files/2025-12/NDIS-Workforce-Capability-Framework-PDF.pdf>

- NDIS Quality and Safeguards Commission information relating to worker training modules that must be completed under the NDIS Code of Conduct.³³

3.2 Job advertisement analysis

Job advertisement analysis was used as a supplementary evidence source to identify patterns in how roles in scope are described in the labour market, including commonly referenced tasks, responsibilities and expectations. This analysis complements other qualitative evidence sources by highlighting areas of convergence and variation, rather than defining work functions in isolation.

The review examined a sample of 262 job advertisements over the period of January–June 2026. The advertisements represented a range of roles across the aged care, disability, home and community, and leisure and health sectors. This analysis focused on identifying patterns and signals in role descriptions, rather than treating frequency as a proxy for importance or using job advertisements to define occupational standards.

Analysis of the advertisements identified several broad role groupings, including direct support and personal care roles, coordination roles, leisure and health roles, and frontline leadership positions. While job titles varied across organisations and service settings, there was a high degree of consistency in the functions and capabilities sought by employers.

3.3 Industry consultation

Industry consultation was undertaken to gather direct evidence about work performed in the roles in scope, drawing on the experience of people who perform, supervise, or oversee the work in practice. Consultation plays a critical role in the functional analysis by testing and enriching insights from desktop research and job advertisement analysis, and by surfacing aspects of work that may not be visible through written sources alone. This includes how tasks are prioritised, where judgement is exercised, and how responsibilities are understood across different settings.

Consultation on this analysis occurred through interviews with employers, unions, and workers to understand the skills and roles in scope of the qualification review, upon recommendations of the review's technical committee and HumanAbility's Aged & Disability Services Industry Advisory Committee. Focus groups have been, and are being, set up to canvass specialist areas of knowledge and capability to inform the full review. Broader consultation will occur upon the release of draft training products.

3.4 Key findings and emerging themes

The various evidence sources highlighted that although frontline work across both the aged care and disability sectors require several common core skills and capabilities, there remain significant differences that should be accounted for in training product development. In addition, even within each sector there is a wide range of complexity in the scope of work regularly performed. These findings raise implications for

³³ <https://www.ndiscommission.gov.au/workforce/online-training-modules>

the capability levels needed by workers; both in terms of what should be considered core skills and knowledge, and what may inform more specialised training pathways.

For instance, at a broad level, personal care workers, disability support workers, and home and community support workers share many common functions and competencies. These include:

- using effective, person-centred communication tailored to the person’s needs and preferences, including their preferred communication methods, systems and assistive technology.
- following care plans;
- identifying and reporting changes in client conditions;
- following organisational policies;
- undertaking required documentation tasks; and
- meeting industry standards and codes of conduct.

The nature of the actual engagement these roles have with older people and people with disability can, however, vary. While they all support clients’ independence and autonomy, the extent to which this specifically involves personal care, direct assistance with daily and household tasks, and/or guidance with co-developing tailored strategies to participate in social and community life, differs not only across roles, but between the settings in which these workers operate, and the different people the workers support.

The scope and intensity of supports needed by clients can also be wide. Each individual, after all, has their own needs, capacities, and circumstances, all of which can evolve over time. Personal care and everyday task assistance can range from the more straightforward through to specialised support around acute and high intensity medical or physical dysfunction. Disability is diverse, and tailored supports for a person with physical disability can involve different day to day tasks to supporting someone with episodic psychosocial disability to participate in daily activities. Differences also exist between the levels and regularity of supervision provided to workers operating in home care and residential settings, the numbers of supporting staff in the worker’s care team to assist an older person.

Insights around the increasing need for specialised capabilities among the care and support workforce were particularly surfaced in the desktop research and industry consultation methods of data collection. The strengthened Aged Care Quality Standards, for example, directly respond to recommendations from the Aged Care Quality and Safety Royal Commission – including to strengthen dementia and clinical care, support diversity, and enhance provider governance. By setting clear set of expectations around what quality care looks like, the Standards outline the evolving skills and knowledge needed by the workforce. Beyond existing training package qualifications and skill sets, sectoral peak bodies are increasingly offering targeted training in areas of specialisation.³⁴

Recent HumanAbility consultations (including those undertaken for our separate *Disability Deep Dive*)³⁵ reinforced similar findings in the disability context. At a systemic level, High Intensity Support Skills

³⁴ See, for instance, <https://learning.agedservicesworkforce.com.au/?redirect=0> and <https://www.dementia.org.au/professionals/professional-development-and-training/courses>

³⁵ HumanAbility (2026). Consultations informing *HumanAbility’s Disability Deep Dive*.

Descriptors under the NDIS Practice Standards invoke the need for specialist training options or pathways in areas including:

- Catheter support;
- Complex bowel care;
- Complex wound and pressure care;
- Enteral feeding;
- Tracheostomy and ventilation;
- Dysphagia; and
- Epilepsy and seizure support.³⁶

Several of these specialist care areas (such as catheter support, enteral feeding, and dysphagia) are also relevant to residential aged care work.

Across both sectors, other key themes emerging from the analysis include a need to strengthen:

- digital capabilities among the workforce (such as around digital documentation, care management systems, telehealth, and the use of new and emerging technologies used to support care provision);
- understanding of, and the ability to operate within, multidisciplinary teams (important in multiple systemic contexts, including the persistence of workforce shortages, particularly in regional and remote areas, and the need to support clients with complex, often overlapping, care needs);
- skills in communicating openly and collaboratively with clients and family members (increasingly important given the new Aged Care Act's emphasis on choice and client autonomy and agency); and
- capabilities and knowledge required to engage with assistive technology and related advisory professionals, to support non-verbal clients and clients with complex mobility needs.

Analysis of job advertisements identified several recurring themes across the aged care, disability, home and community, and leisure and health sectors. While responsibilities, service settings, and levels of autonomy varied between roles, employers commonly sought workers who could communicate effectively, maintain documentation, work collaboratively with others, respond to individual needs, and contribute to person-centred service delivery. The advertisements also highlighted differences in the knowledge, responsibilities and decision-making requirements associated with particular service settings, client groups and levels of responsibility.

A review of qualification requirements referenced in job advertisements found that employers most requested the *CHC33021 Certificate III in Individual Support*, equivalent qualifications, or relevant sector experience. Explicit references to the *CHC43015 Certificate IV in Ageing Support* and *CHC43121 Certificate IV in Disability Support* were comparatively limited and were generally associated with coordination, supervisory or more senior support roles. References to qualifications, certifications and experience reflect employer recruitment preferences and labour market signalling and should not be interpreted as definitive occupational requirements.

³⁶ <https://www.ndiscommission.gov.au/sites/default/files/2024-09/High%20Intensity%20support%20skills%20descriptors.pdf>

Together, these findings once again suggest that while many roles draw on a shared foundation of capabilities, sector-specific knowledge and specialised functions remain important features of contemporary practice.

These findings were used to inform and test the functional analysis by highlighting areas to explore further through consultation and validation.

Table 2. Key themes identified across each sector from job advertisement analysis

Sector	Common Work Activities and Responsibilities	Autonomy and Decision-Making	Frequently Referenced Capabilities and Credentials
Aged Care	Supporting older people with personal care, activities of daily living, mobility, meals, wellbeing, social engagement, documentation and reporting. Roles commonly involve implementing care and support activities and reporting changes in an individual's health, wellbeing or support needs.	Autonomy varies by role and setting. Direct care roles generally provide support in accordance with documented care or support plans that outline an individual's needs, preferences and goals, while working within organisational procedures and defined levels of responsibility. Senior roles may contribute to care planning, service coordination and team support.	Communication, empathy, person-centred practice and aged care experience. Employers frequently referenced the <i>CHC33021 Certificate III in Individual Support (Ageing specialisation)</i> , <i>CHC43015 Certificate IV in Ageing Support</i> , first aid certification, medication support competencies, police checks and sector-specific screening requirements.
Disability	Supporting independence, choice and control, community participation, personal support, domestic assistance, transport, appointments, implementation of support plans, documentation and responding to changing or complex support needs.	These roles often require workers to exercise judgement in less supervised environments, particularly in home and community settings. Workers may be required to adapt support to individual circumstances while working within documented support plans, organisational	Communication, relationship building, problem-solving, person-centred and rights-based practice, and positive behaviour support. Employers commonly referenced the <i>CHC33021 Certificate III in Individual Support (Disability specialisation)</i> , <i>CHC43121 Certificate IV in Disability Support</i> , first aid

Sector	Common Work Activities and Responsibilities	Autonomy and Decision-Making	Frequently Referenced Capabilities and Credentials
		procedures and escalation pathways.	certification, NDIS Worker Screening Checks and other sector-specific clearances.
Home and Community Care/Support	Supporting individuals to remain living independently in their own homes and communities through domestic assistance, meal preparation, shopping, transport, social support, wellbeing monitoring, community access, and (in aged care, particularly under the parameters of the incoming Support at Home program) personal support. Roles frequently involve working across multiple client locations and maintaining regular contact with individuals, families and service providers.	These roles typically require a high degree of autonomy as workers often perform their duties independently within community settings. Advertisements commonly emphasised the ability to prioritise tasks, respond to changing circumstances, identify emerging support needs and escalate concerns appropriately.	Communication, relationship building, time management, adaptability, problem-solving and the ability to work independently. Employers frequently referenced the <i>CHC33021 Certificate III in Individual Support</i> , home care experience, first aid certification, police checks and relevant screening clearances.
Leisure and Health	Planning, supporting and reviewing individual and group activities that support participation, wellbeing, social connection and quality of life. Roles commonly involve documenting participation, monitoring engagement and working collaboratively with care and support teams.	Workers are generally expected to plan, support and adapt activities to meet individual interests, abilities, goals and support needs. More senior roles may coordinate programs, oversee activity schedules and provide guidance to other staff.	Interpersonal skills, creativity, activity planning, group facilitation and documentation. Employers commonly referenced the <i>CHC43415 Certificate IV in Leisure and Health</i> and <i>CHC53415 Diploma of Leisure and Health</i> , together with experience supporting older people, people with disability or community-based participants.

Sector	Common Work Activities and Responsibilities	Autonomy and Decision-Making	Frequently Referenced Capabilities and Credentials
<p>Coordination and Frontline Leadership</p>	<p>Coordinating services, supporting staff, monitoring service delivery, liaising with families and stakeholders, managing documentation, contributing to quality and compliance activities, and supporting implementation of individual plans and organisational requirements.</p>	<p>These roles generally involve higher levels of autonomy, judgement and accountability. Workers are commonly expected to prioritise work, manage competing demands, respond to operational issues, escalate risks and support consistent service delivery.</p>	<p>Leadership, communication, service coordination, supervision and stakeholder engagement. Employers commonly referenced the <i>CHC43015 Certificate IV in Ageing Support</i>, <i>CHC43121 Certificate IV in Disability Support</i>, relevant Diploma-level qualifications and demonstrated sector experience.</p>

4 Functions and sub-functions

The functions and sub-functions of the roles examined were developed through synthesis of the evidence collated across desktop research, job advertisement analysis, and industry consultation. Evidence from each source was compared and triangulated to identify consistent areas of work, responsibilities and decision-making associated with the roles in scope. Functions reflect broad groupings of work evident across sources, while sub-functions describe the key tasks and processes that make up those areas of responsibility in practice.

It is noted that the aged care, disability, and leisure and health sectors comprise a wide range of roles. Key categories include frontline staff, support staff (such as chefs, cleaners, and property services), and leadership and management (at various levels).

To help clients understand the complex range of care and support options and funding frameworks, another cohort of roles is made up of what might be termed ‘system navigators’. Indicative job titles in this category include Navigator, Advocate, Local Area Coordinator, and Care Manager. While these roles deal directly with clients, their primary functions are more centred on the provision of advice and administrative support than physical or emotional care. System-level reforms, such as the reduced scope of NDIS eligibility and attendant increase in demand for state and territory-based supports, will likely increase the need for these navigator roles. Such roles are also needed to support families negotiate transitions between settings, such as from acute hospital care to residential aged care.

To ensure the analysis is focussed, this report details roles that are limited to those falling within the Foundational Care & Support category; namely frontline workers and leaders. Many functional overlaps exist between roles. These are highlighted in a table at Section 4.2. Such intersections highlight the fact that some clients require care and support across both the aged care and disability contexts. There is a growing academic literature, for instance, on the concepts of ‘disability with ageing’ (experiencing new impairments in older age) and ‘ageing with disability’ (people entering their later years having acquired disability or impairment earlier in life).³⁷ Such phenomena add even greater complexity to the work undertaken by carers and support workers.

Linkages and connections between these foundational care and support roles and the broader categories outlined above – support staff, senior management, and system navigators – are presented in Section 5, which steps out the range of career pathways available to workers in and across these sectors.

³⁷ See, for example, Giraldo, M. (2024). ‘Aging with disability’. In Bennet, G., Goodall, E. (eds). *The Palgrave Encyclopedia of Disability*, Palgrave Macmillan. https://link.springer.com/rwe/10.1007/978-3-031-40858-8_135-1#citeas; and Acton, D., Talbot, G., Mogan, C., & Jaydeokar, S. (2026). ‘Active ageing in people with intellectual disability: a qualitative evidence synthesis of the experiences, challenges, and pathways to support’. *Journal of Intellectual & Developmental Disability*, 51(1), 1–13. <https://doi.org/10.3109/13668250.2025.2517203>

It should also be highlighted that functions and sub-functions presented throughout this section are indicative only. As industry consultation in this review surfaced, nuances often exist within the actual scope of work required to be undertaken by people holding each of the identified roles.

In remote and regional communities, for example, workforce attraction and retention challenges (frequently interconnected with broader systemic issues such as a lack of housing and infrastructure) can be extensive. Notwithstanding the supervision and scopes of practice that staff work within, care and support workers can, at times, perform a greater variety of duties than their metropolitan counterparts.

Staffing constraints may also mean regional workers are asked to operate across setting types (residential, in-home, and community) typically differentiated at the role level. As a result, they may need further training to undertake tasks usually completed by other roles in more operationally staffed services. Care workers engaged by providers under the Multi-Purpose Service Program – which provides integrated health and aged care services in rural and remote communities³⁸ – likely have a substantially different day-to-day experience to a frontline worker in a major city.

As a disclaimer, this report provides an analysis of roles and associated skills in the workforce as reflected currently in the sector. However, many workers in these sectors hold advanced skills in direct support. For example, the NDIS Workforce Capability Framework highlights further developed behavioural and knowledge capabilities for advanced disability support workers.

Career pathways continue to emerge. The Aged Care and SCHADS Awards now recognise ‘senior’ and ‘specialist’ roles and skills at Level 5 of their respective classification structures for direct care. These schedules provide indicative titles including specialist care workers, and workers at these levels have advanced problem solving and solution sharing skills.³⁹ While many of these specialist pathways are not formally reflected in job descriptions, or as graduated career pathways, there are opportunities to better formalise these pathways, and make these skills visible through the review.

4.1 Foundational Care & Support Roles

Roles in this category involve working directly with older people or people with disability, providing a range of physical, social, and emotional supports. Although not all applicable to all roles, key skills and knowledge required may generally include:

- the ability to work with vulnerable people and people from all backgrounds, respecting privacy and individuals’ independence, autonomy, and personal preferences;
- skills relating to providing personal care (including at times complex physical and emotional assistance) and support around daily or household activities;
- interpersonal and problem-solving skills, including the capacity to advise and advocate for clients and connect them to broader services;

³⁸ <https://www.health.gov.au/our-work/the-multi-purpose-service-program/about-the-multi-purpose-service-program>

³⁹ Associate Professor Anne Junor, cited in Fair Work Commission (2022). *Work Value Case: Aged Care Award 2010; Nurses Award 2020; Social, Community, Home Care and Disability Services Industry Award 2010*, p.219.

- capacity to build the empowerment of clients and support mental and physical wellbeing;
- appreciation of the importance of identifying safe work practices, identifying and reporting unsafe environments or situations, and the link between personal wellbeing and the quality of care and support provided to clients;
- administration skills such as record-keeping and reporting; and
- understanding of and willingness to adhere to organisational policies and procedures, and regulatory and compliance expectations related to their sector.

Given the public-facing nature of the work involved, staff holding foundational care and support roles generally need to hold Police Checks and Working With Children Checks, and often must possess first aid, CPR certification and skills, and mental health first aid certificates. In disability, an NDIS Worker Screening Check is required if working in 'risk-assessed roles' for Registered NDIS Providers.

4.1.1 Personal Care Worker (residential aged care)

Also variously known as Personal Care Assistant/Attendant, Aged Care Worker, or Aged Carer, this role involves providing direct support to aged care clients – specifically in residential and centre-based aged care settings. Primary duties include interacting respectfully with clients, providing personal care support, assisting with clients' physical and emotional needs, maintaining records of the care and support provided, and observing and responding to changes in clients' conditions. Direct care under legislated care minutes can only be provided by a personal care worker/assistant in nursing, registered nurse or enrolled nurse.⁴⁰

Minimum pay rates and classifications for personal care workers in residential aged care are outlined in the direct care schedule of the Aged Care Award 2010. However, some workers may be employed on enterprise agreements or state-based awards. Direct care employees provide personal care services to residents under the supervision of a registered or enrolled nurse, or recreational/lifestyle activity services to residents, whose duties include:

- assisting with daily living activities;
- attending to personal hygiene, physical, administrative and cognitive needs;
- providing emotional care and social support;
- assisting with participation in social and recreational activities; or
- assisting with clinical care and provision of medical treatments and procedures where qualified to do so.

Personal care workers (residential aged care) work under the supervision of registered nurses⁴¹; accordingly, in some jurisdictions the role is largely similar to Assistant in Nursing.⁴² Given this reporting structure, the role is sometimes involved in the administration of selected forms of medication to clients. Scopes of practice differ in this area, based on relevant legislative settings at the state/territory level.

⁴⁰ <https://www.health.gov.au/our-work/care-minutes-registered-nurses-aged-care/care-minutes?language=en>

⁴¹ MA000018 - Aged Care Award 2010, (s) 3.1

⁴² Note that in other jurisdictions Assistants in Nursing are involved in acute care work, typically aligned more closely to the enrolled nurse qualification pathway than Certificate III or IV programs in individual support.

Table 3. Identified functions and sub-functions for Personal Care Worker (residential aged care)

Functions	Sub-function
Provide person-centred care and support	Assist clients with daily activities (e.g. cleaning, laundry, and shopping)
	Assist clients with personal care needs (e.g. showering, meal preparation and eating, dressing, mobility)
	Provide specialised support for clients with complex or acute care needs, including around dementia and palliative care
	Actively listen to, and communicate respectfully and thoughtfully with, clients – ensuring they have agency, independence, and autonomy over the care and support provided to them
	Interact with respect for people’s cultural and linguistic differences and sexual preferences, including Aboriginal and Torres Strait Islander peoples, LGBTIQ+ people, and people from culturally and linguistically diverse backgrounds
	Comply with mandatory reporting and other regulatory requirements and standards
Build rapport and collaborate effectively with clients, clients’ families, colleagues, and management to achieve positive outcomes	Develop and maintain respectful, collaborative, and constructive relationships with a range of stakeholders, including clients and their families
	Follow workplace stakeholder engagement policies and procedures, and consistently maintain professional standards
	Discuss with clients their preferences for how support is provided and additional supports they may need, and understand where to go to follow up and ensure this assistance is pursued
	Provide advocacy support for clients when needed, drawing on interactions with and knowledge of clients’ individual circumstances
Engage in safe work practices and maintain personal wellbeing	Have and maintain an understanding of how to work safely in environments where care and support must be provided
	Understand regulations and apply organisational policies around workplace health and safety

Functions	Sub-function
	Engage in practices to maintain self-care, acknowledging the impact of own wellbeing on quality of care and support provided to clients
Follow care and support plans	<p>Understand how to access, read, and engage with care and support plans developed for clients</p> <p>Deliver care and support in alignment with care plans or therapy plans previously prepared for clients and tailor support to the individual</p> <p>Understand how to use digital interfaces, tools and technology for care or support delivery, and to record notes</p> <p>Apply person-centred positive behaviour support strategies in line with individual behaviour support plans and relevant Quality and Practice Standards, upholding each person’s rights, choice, safety and dignity</p>
Contribute to care and support planning	In collaboration with other organisational roles, help identify areas for additional support needed by clients, contributing insights from own engagement with clients to support ongoing care and therapy plan development
Observe and report changes in client conditions	Report clients’ changing conditions to senior staff, recording observations in relevant documentation and report to senior staff as required by organisational policies
Report complaints about care	Ensure complaints about care provision quality or safety are reported, in alignment with organisational policies
Provide social support and companionship	<p>Develop friendly, culturally safe, and supportive relationships with clients, supporting clients to feel heard and seen</p> <p>Provide social support to clients with varying needs, upholding clients’ dignity and respecting their privacy and human rights</p>
Support clients to participate in wider social and community activities	<p>Support clients by identifying possible activities for social and community participation</p> <p>Assist clients with undertaking social and community activities, including by preparing them emotionally and making physical accommodations, as required</p> <p>Follow workplace policies and procedures around external relationship management, including engaging professionally with</p>

Functions	Sub-function
	staff and management of services partnering with employer to provide positive client outcomes
Assist with rehabilitation exercises and promoting a healthy lifestyle	Liaising with other care and support roles, including physiotherapists and other allied health workers, support clients with physical rehabilitation and other exercise activities
	Encourage and support clients to engage in health and recreation activities
Assist clients with transportation to attend appointments and other supports	Advise and support clients with personal transport needs, such as using public transport and taxis, and sharing transport with other clients
Assist clients with medications, per industry guidelines and legislation and under appropriate supervision	Assist with the delivery of medication to clients as required, ensuring compliance with relevant legislative instruments around scope of practice
	Understand and adhere to relevant scope of practice and reporting frameworks covering medication assistance
Assist people to participate in meaningful leisure and recreation activities	Identify suitable activities and support clients to access and participate in them
	Understand how individual clients' needs and capacities may impact on accessibility of activities, and respond accordingly
	Show initiative and resourcefulness to adapt where needed (e.g. responding to changing availability of activities)
Maintain friendly and supportive professional relationships	Communicate effectively, respectfully, and professionally with colleagues and other staff in the sector
	Follow workplace policies, sector-specific professional standards and maintain professional boundaries
Undertake administrative tasks	Understand and operate within team rosters and work scheduling, liaising with colleagues and management to align with strategic objectives
	Contribute to the development of organisational policies

4.1.2 Disability Support Worker

Disability Support Workers assist people of all ages with intellectual, physical, social, and/or emotional disabilities. This category covers multiple roles, varying by the setting and nature of supports provided. Disability Support Workers may, for instance:

- work with clients one-on-one in clients’ own homes;
- work with clients accessing housing and living supports in group settings, such as Specialist Disability Accommodation;⁴³ or
- work in the community, providing support to clients around the development of skills and facilitating community participation.

These variations see the Disability Support Worker role differ from one setting to another, in terms of duties and responsibilities. In some cases, this gives rise to functional overlaps with other frontline care and support roles identified in this analysis; while in others, it means the overall functions and sub-functions for Disability Support Worker outlined in Table 4, below, do not always apply.

Minimum pay rates and classifications for disability support workers are outlined in the Social, Community, Home Care and Disability Services Industry Award 2010 (SCHADS Award). However, some workers may be employed on enterprise agreements or state-based awards. A review of gender undervaluation in this Award has recently concluded, with proposed changes to the Award coming into effect next year.

The draft determination defines disability support work as “engaging with a person with disability to provide them with personal care or support by an employee whose employer is in the social and community services sector.”⁴⁴ This is a broad definition, and some of the functions of a Disability Support Worker operating in community-based roles may intersect with those of Leisure and Lifestyle Workers.⁴⁵

Table 4. Identified functions and sub-functions for Disability Support Worker

Functions	Sub-function
Provide person-centred care and support	Assist clients with daily activities (e.g. cleaning, laundry, and shopping)
	Assist clients with personal care needs (e.g. showering, meal preparation and eating, dressing, mobility) (<i>not in home care work</i>)
	Provide specialised support for clients with complex or acute care needs, including around dementia and palliative care

⁴³ <https://www.ndis.gov.au/participants/home-and-living/types-home-and-living-supports/what-specialist-disability-accommodation-sda>

⁴⁴ <https://www.fwc.gov.au/documents/sites/am2024-19/am202421-draftdet-010626.pdf>

⁴⁵

Functions	Sub-function
	<p>Support clients to develop and apply individualised strategies to strengthen confidence and capacities in social and emotional skills, and to undertake daily tasks</p> <p>Actively listen to, and communicate respectfully and thoughtfully with, clients – ensuring they have agency, independence, and autonomy over the care and support provided to them</p> <p>Interact with respect for people’s cultural and linguistic differences and sexual preferences, including Aboriginal and Torres Strait Islander peoples, LGBTIQ+ people, and people from culturally and linguistically diverse backgrounds</p> <p>Engage clients actively in the delivery of support tasks to support skills and independence</p> <p>Comply with mandatory reporting and other regulatory requirements and standards</p>
<p>Build rapport and collaborate effectively with clients, clients’ families, colleagues, and management to achieve positive outcomes</p>	<p>Develop and maintain respectful, collaborative, and constructive relationships with a range of stakeholders, including clients and their families</p> <p>Follow workplace stakeholder engagement policies and procedures, and consistently maintain professional standards</p> <p>Discuss with clients their preferences for how support is provided and additional supports they may need, and understand where to go to follow up and ensure this assistance is pursued</p> <p>Provide advocacy support for clients when needed, drawing on interactions with and knowledge of clients’ individual circumstances</p>
<p>Engage in safe work practices and maintain personal wellbeing</p>	<p>Have and maintain an understanding of how to work safely in environments where care and support must be provided</p> <p>Understand regulations and apply organisational policies around workplace health and safety</p> <p>Engage in practices to maintain self-care, acknowledging the impact of own wellbeing on quality of care and support provided to clients</p>
<p>Follow care and support plans</p>	<p>Understand how to access, read, and engage with care and support plans developed for clients</p>

Functions	Sub-function
	<p>Deliver care and support in alignment with care plans or therapy plans previously prepared for clients and tailor support to the individual</p> <p>Understand how to use digital interfaces, tools and technology for care or support delivery, and to record notes</p> <p>Apply person-centred positive behaviour support strategies in line with individual behaviour support plans and relevant Quality and Practice Standards, upholding each person's rights, choice, safety and dignity</p>
Contribute to care and support planning	<p>In collaboration with other organisational roles, help identify areas for additional support needed by clients, contributing insights from own engagement with clients to support ongoing care and therapy plan development</p>
Observe and report changes in client conditions	<p>Report clients' changing conditions to senior staff, recording observations in relevant documentation and report to senior staff as required by organisational policies</p>
Report complaints about care	<p>Ensure complaints about care provision quality or safety are reported, in alignment with organisational policies</p>
Provide social support and companionship	<p>Develop friendly, culturally safe, and supportive relationships with clients, supporting clients to feel heard and seen</p> <p>Provide social support to clients with varying needs, upholding clients' dignity and respecting their privacy and human rights</p>
Support clients to participate in wider social and community activities	<p>Support clients by identifying possible activities for social and community participation</p> <p>Assist clients with undertaking social and community activities, including by preparing them emotionally and making physical accommodations, as required</p> <p>Follow workplace policies and procedures around external relationship management, including engaging professionally with staff and management of services partnering with employer to provide positive client outcomes</p>
Assist with rehabilitation exercises and promoting a healthy lifestyle	<p>Liaising with other care and support roles, including physiotherapists and other allied health workers, support clients with physical rehabilitation and other exercise activities</p>

Functions	Sub-function
	Encourage and support clients to engage in health and recreation activities
Assist clients with transportation to attend appointments and other supports	Drive clients to medical or other appointments
	Drive clients to excursions or other engagements with leisure and recreation activities
	Advise and support clients with personal transport needs, such as using public transport and taxis, and sharing transport with other clients
Assist clients with medications, per industry guidelines and legislation and under appropriate supervision	Assist with the delivery of medication to clients as required, ensuring compliance with relevant legislative instruments around scope of practice
	Understand and adhere to relevant scope of practice and reporting frameworks covering medication assistance
Assist people to participate in meaningful leisure and recreation activities	Identify suitable activities and support clients to access and participate in them
	Understand how individual clients' needs and capacities may impact on accessibility of activities, and respond accordingly
	Show initiative and resourcefulness to adapt where needed (e.g. responding to changing availability of activities)
Maintain friendly and supportive professional relationships	Communicate effectively, respectfully, and professionally with colleagues and other staff in the sector
	Follow workplace policies, sector-specific professional standards and maintain professional boundaries
Ensure chosen leisure and recreation programs and activities are appropriate for, and meet the needs of, culturally and linguistically diverse clients	Acknowledge how cultural and linguistic differences may impact suitability of leisure and recreation activities, and make accommodations accordingly
Undertake administrative tasks	Understand and operate within team rosters and work scheduling, liaising with colleagues and management to align with strategic objectives
	Contribute to the development of organisational policies

4.1.3 Home and Community Support Worker (aged care)

This role supports aged clients to maintain independence, dignity, and autonomy in their own homes and in the community. Given the logistical environment of their work, Home and Community Support Workers (aged care) often operate under less direct supervision at any given time. This gives rise to a need for specific knowledge and capabilities, such as in communication and problem-solving skills, managing complex behaviours, providing mental health support, advising on and supporting with transport needs, and assisting clients who may not have their own capacity to self-administer medications.

Minimum pay rates and classifications for home and community support workers in residential aged care are outlined in Schedule F of the Social, Community, Home Care and Disability Services Industry Award 2010 (SCHADS Award). However, some workers may be employed on enterprise agreements or state-based awards. A review of gender undervaluation in this Award has recently concluded, with proposed changes to the Award coming into effect next year. The draft determination defines home care aged work as “personal care, domestic assistance or home maintenance that is provided to an aged care client performed by an employee whose employer is in the home care sector”.⁴⁶

Table 5. Identified functions and sub-functions for Home and Community Support Worker (aged care)

Functions	Sub-function
Provide person-centred care and support	Assist clients with daily activities (e.g. cleaning, laundry, and shopping)
	Assist clients with personal care needs (e.g. showering, meal preparation and eating, dressing, mobility)
	Provide specialised support for clients with complex or acute care needs, including around dementia and palliative care
	Support clients to develop and apply individualised strategies to strengthen confidence and capacities in social and emotional skills, and to undertake daily tasks
	Actively listen to, and communicate respectfully and thoughtfully with, clients – ensuring they have agency, independence, and autonomy over the care and support provided to them
	Interact with respect for people’s cultural and linguistic differences and sexual preferences, including Aboriginal and Torres Strait Islander peoples, LGTBQ+ people, and people from culturally and linguistically diverse backgrounds

⁴⁶ <https://www.fwc.gov.au/documents/sites/am2024-19/am202421-draftdet-010626.pdf>

Functions	Sub-function
	Comply with mandatory reporting and other regulatory requirements and standards
Build rapport and collaborate effectively with clients, clients' families, colleagues, and management to achieve positive outcomes	Develop and maintain respectful, collaborative, and constructive relationships with a range of stakeholders, including clients and their families
	Follow workplace stakeholder engagement policies and procedures, and consistently maintain professional standards
	Discuss with clients their preferences for how support is provided and additional supports they may need, and understand where to go to follow up and ensure this assistance is pursued
	Provide advocacy support for clients when needed, drawing on interactions with and knowledge of clients' individual circumstances
Engage in safe work practices and maintain personal wellbeing	Have and maintain an understanding of how to work safely in environments where care and support must be provided
	Understand regulations and apply organisational policies around workplace health and safety
	Engage in practices to maintain self-care, acknowledging the impact of own wellbeing on quality of care and support provided to clients
Follow care and support plans	Understand how to access, read, and engage with care and support plans developed for clients and tailor supports to the individual
	Deliver care and support in alignment with care plans or therapy plans previously prepared for clients and tailor support to the individual
	Understand how to use digital interfaces, tools and technology for care or support delivery, and to record notes
Contribute to care and support planning	In collaboration with other organisational roles, help identify areas for additional support needed by clients, contributing insights from own engagement with clients to support ongoing care and therapy plan development
Observe and report changes in client conditions	Report clients' changing conditions to senior staff, recording observations in relevant documentation and report to senior staff as required by organisational policies

Functions	Sub-function
Report complaints about care	Ensure complaints about care provision quality or safety are reported, in alignment with organisational policies
Provide social support and companionship	Develop friendly, culturally safe, and supportive relationships with clients, supporting clients to feel heard and seen
	Provide social support to clients with varying needs, upholding clients' dignity and respecting their privacy and human rights
Support clients to participate in wider social and community activities	Support clients by identifying possible activities for social and community participation
	Assist clients with undertaking social and community activities, including by preparing them emotionally and making physical accommodations, as required
	Follow workplace policies and procedures around external relationship management, including engaging professionally with staff and management of services partnering with employer to provide positive client outcomes
Assist with rehabilitation exercises and promoting a healthy lifestyle	Liaising with other care and support roles, including physiotherapists and other allied health workers, support clients with physical rehabilitation and other exercise activities
	Encourage and support clients to engage in health and recreation activities
Assist clients with transportation to attend appointments and other supports	Drive clients to medical or other appointments
	Drive clients to excursions or other engagements with leisure and recreation activities
	Advise and support clients with personal transport needs, such as using public transport and taxis, and sharing transport with other clients
Assist clients with medications, per industry guidelines and legislation and under appropriate supervision	Assist with the delivery of medication to clients as required, ensuring compliance with relevant legislative instruments around scope of practice
	Understand and adhere to relevant scope of practice and reporting frameworks covering medication assistance

Functions	Sub-function
Assist people to participate in meaningful leisure and recreation activities	Identify suitable activities and support clients to access and participate in them
	Understand how individual clients' needs and capacities may impact on accessibility of activities, and respond accordingly
	Show initiative and resourcefulness to adapt where needed (e.g. responding to changing availability of activities)
Maintain friendly and supportive professional relationships	Communicate effectively, respectfully, and professionally with colleagues and other staff in the sector
	Follow workplace policies, sector-specific professional standards and maintain professional boundaries
Complete home care tasks	Provide support to clients at home with domestic tasks such as cleaning, laundry, light meal preparation, and organisation
Undertake administrative tasks	Understand and operate within team rosters and work scheduling, liaising with colleagues and management to align with strategic objectives
	Contribute to the development of organisational policies

4.1.4 Leisure and Lifestyle Worker

Leisure and Lifestyle Workers work with people living in the community to strengthen their social capacity and independence. This role is utilised across the aged care, disability, and veterans' care sectors. Other indicative job titles include Recreational Therapist/Officer, Lifestyle Assistant, and Leisure and Lifestyle Officer. Given their level of direct engagement with clients, Leisure and Lifestyle Workers are often also required to hold broader capabilities common to care and support workers covered above, including in providing emotional support and guidance.

Table 6. Identified functions and sub-functions for Leisure and Lifestyle Worker

Functions	Sub-function
Provide person-centred care and support	Assist clients with daily activities (e.g. cleaning, laundry, and shopping)
	Assist clients with personal care needs (e.g. showering, meal preparation and eating, dressing, mobility)
	Support clients to develop and apply individualised strategies to strengthen confidence and capacities in social and emotional skills, and to undertake daily tasks
	Actively listen to, and communicate respectfully and thoughtfully with, clients – ensuring they have agency, independence, and autonomy over the care and support provided to them
	Interact with respect for people’s cultural and linguistic differences and sexual preferences, including Aboriginal and Torres Strait Islander peoples, LGBTIQ+ people, and people from culturally and linguistically diverse backgrounds
	Comply with mandatory reporting and other regulatory requirements and standards
Build rapport and collaborate effectively with clients, clients’ families, colleagues, and management to achieve positive outcomes	Develop and maintain respectful, collaborative, and constructive relationships with a range of stakeholders, including clients and their families
	Follow workplace stakeholder engagement policies and procedures, and consistently maintain professional standards
	Discuss with clients their preferences for how support is provided and additional supports they may need, and understand where to go to follow up and ensure this assistance is pursued
	Provide advocacy support for clients when needed, drawing on interactions with and knowledge of clients’ individual circumstances
Engage in safe work practices and maintain personal wellbeing	Have and maintain an understanding of how to work safely in environments where care and support must be provided
	Understand regulations and apply organisational policies around workplace health and safety

Functions	Sub-function
	Engage in practices to maintain self-care, acknowledging the impact of own wellbeing on quality of care and support provided to clients
Follow care and support plans	<p>Understand how to access, read, and engage with care and support plans developed for clients</p> <p>Deliver care and support in alignment with care plans or therapy plans previously prepared for clients and tailor support to the individual</p> <p>Understand how to use digital interfaces, tools and technology for care or support delivery, and to record notes</p> <p>Apply person-centred positive behaviour support strategies in line with individual behaviour support plans and relevant Quality and Practice Standards, upholding each person's rights, choice, safety and dignity</p>
Contribute to care and support planning	In collaboration with other organisational roles, help identify areas for additional support needed by clients, contributing insights from own engagement with clients to support ongoing care and therapy plan development
Observe and report changes in client conditions	Report clients' changing conditions to senior staff, recording observations in relevant documentation and report to senior staff as required by organisational policies
Report complaints about care	Ensure complaints about care provision quality or safety are reported, in alignment with organisational policies
Provide social support and companionship	<p>Develop friendly, culturally safe, and supportive relationships with clients, supporting clients to feel heard and seen</p> <p>Provide social support to clients with varying needs, upholding clients' dignity and respecting their privacy and human rights</p>
Support clients to participate in wider social and community activities	<p>Support clients by identifying possible activities for social and community participation</p> <p>Assist clients with undertaking social and community activities, including by preparing them emotionally and making physical accommodations, as required</p> <p>Follow workplace policies and procedures around external relationship management, including engaging professionally with</p>

Functions	Sub-function
	staff and management of services partnering with employer to provide positive client outcomes
Assist with rehabilitation exercises and promoting a healthy lifestyle	Liaising with other care and support roles, including physiotherapists and other allied health workers, support clients with physical rehabilitation and other exercise activities
	Encourage and support clients to engage in health and recreation activities
Assist clients with transportation to attend appointments and other supports	Drive clients to medical or other appointments
	Drive clients to excursions or other engagements with leisure and recreation activities
	Advise and support clients with personal transport needs, such as using public transport and taxis, and sharing transport with other clients
Evaluate and assess people's levels of abilities, needs, and strengths	Provide assistance (typically to a Team Leader or Coordinator) in the planning, implementation and evaluation of leisure, health, and recreational activities needed by clients
Maintain knowledge of resources available within a facility and within the community	Plan work and establish priorities, including by keeping an ongoing record of known resources that may support clients
	Monitor organisations' websites to identify and track new and no longer available resources
Assist people to participate in meaningful leisure and recreation activities	Identify suitable activities and support clients to access and participate in them
	Understand how individual clients' needs and capacities may impact on accessibility of activities, and respond accordingly
	Show initiative and resourcefulness to adapt where needed (e.g. responding to changing availability of activities)
Maintain friendly and supportive professional relationships	Communicate effectively, respectfully, and professionally with colleagues and other staff in the sector
	Follow workplace policies, sector-specific professional standards and maintain professional boundaries

Functions	Sub-function
Ensure chosen leisure and recreation programs and activities are appropriate for, and meet the needs of, culturally and linguistically diverse clients	Acknowledge how cultural and linguistic differences may impact suitability of leisure and recreation activities, and make accommodations accordingly
Manage relationships with internal and external stakeholders	Liaise with internal stakeholders such as senior management to ensure organisational strategic objectives are met
	Liaise with external professionals involved in the coordinated care and support provided to clients
Undertake administrative tasks	Understand and operate within team rosters and work scheduling, liaising with colleagues and management to align with strategic objectives
	Contribute to the development of organisational policies

4.1.5 Domestic Assistant

This role provides assistance to older people or people with disability, to support their independent living. Functions generally involve home care, domestic tasks, and providing emotional support to clients.

While the Domestic Assistant title generally applies to workers in home and community settings, indicative titles for roles with similar knowledge, capabilities, and duties in residential settings include Housekeepers and Catering Assistants.

Table 7. Identified functions and sub-functions for Domestic Assistant

Functions	Sub-function
Provide person-centred care and support	Assist clients with daily activities (e.g. cleaning, laundry, and shopping)
	Actively listen to, and communicate respectfully and thoughtfully with, clients – ensuring they have agency, independence, and autonomy over the care and support provided to them
	Interact with respect for people’s cultural and linguistic differences and sexual preferences, including Aboriginal and Torres Strait Islander peoples, LGBTBIQ+ people, and people from culturally and linguistically diverse backgrounds

Functions	Sub-function
	Comply with mandatory reporting and other regulatory requirements and standards
Build rapport and collaborate effectively with clients, clients' families, colleagues, and management to achieve positive outcomes	Develop and maintain respectful, collaborative, and constructive relationships with a range of stakeholders, including clients and their families
	Follow workplace stakeholder engagement policies and procedures, and consistently maintain professional standards
Engage in safe work practices and maintain personal wellbeing	Have and maintain an understanding of how to work safely in environments where care and support must be provided
	Understand regulations and apply organisational policies around workplace health and safety
	Engage in practices to maintain self-care, acknowledging the impact of own wellbeing on quality of care and support provided to clients
Follow care and support plans	Understand how to access, read, and engage with care and support plans developed for clients
Observe and report changes in client conditions	Report clients' changing conditions to senior staff, recording observations in relevant documentation and report to senior staff as required by organisational policies
Complete home care tasks	Provide support to clients at home with domestic tasks such as cleaning, laundry, light meal preparation, and organisation
Undertake administrative tasks	Understand and operate within team rosters and work scheduling, liaising with colleagues and management to align with strategic objectives

4.1.6 Team Leader or Coordinator

Key functions of a Team Leader (also sometimes known as Coordinator) include the leadership, coaching, and mentoring of other staff, typically with some level of strategic oversight of the care and support provided by their various team members. In this light, the Team Leader or Coordinator role involves administrative and management functions. These can include support with or coordination of rostering, ensuring compliance with regulatory requirements, and monitoring or contributing to the development of workplace policies and procedures. Employers looking for candidates in these roles often value strong organisational, communication, and problem-solving skills, as well as experience working directly in client-facing roles.

Depending on an organisation’s size and scope, Team Leaders or Coordinators lead teams made up of specific care and support roles identified above. Indicative job titles include Care Team Leader (managing and mentoring Personal Care Workers) and Leisure and Lifestyle Coordinator (managing Leisure and Lifestyle Workers).

Table 8. Identified functions and sub-functions for Team Leader or Coordinator

Functions	Sub-function
<p>Provide leadership, coaching, and mentoring to care and support staff</p>	<p>Lead or supervise one or more care and support workers on a day-to-day basis, supporting a collaborative and constructive team culture and ensuring practice standards are adhered to</p>
	<p>Allocate and organise staff support</p>
	<p>Identify opportunities for coaching of staff, including onboarding of new team members, and liaise with senior management to action</p>
	<p>Identify and organise mentoring and professional development opportunities for team members, linking staff improvement to strategic organisational objectives</p>
	<p>Focus staff attention on quality of life, encouraging a work-life balance for the benefit of both team members and clients</p>
<p>Manage and organise care and support</p>	<p>Manage a caseload of clients’ care and support plans, coordinating team members to ensure workload is covered in cases of absence or turnover</p>
	<p>Ensure reporting and compliance requirements, for both organisational and regulatory purposes, are met</p>
<p>Manage relationships with internal and external stakeholders</p>	<p>Liaise with internal stakeholders such as senior management to ensure organisational strategic objectives are met</p>
	<p>Liaise with external professionals involved in the coordinated care and support provided to clients</p>
<p>Provide person-centred care and support</p>	<p>Assist clients with daily activities (e.g. cleaning, laundry, and shopping)</p>
	<p>Assist clients with personal care needs (e.g. showering, meal preparation and eating, dressing, mobility)</p>
	<p>Provide specialised support for clients with complex or acute care needs, including around dementia and palliative care</p>

Functions	Sub-function
	<p>Actively listen to, and communicate respectfully and thoughtfully with, clients – ensuring they have agency, independence, and autonomy over the care and support provided to them</p> <p>Interact with respect for people’s cultural and linguistic differences and sexual preferences, including Aboriginal and Torres Strait Islander peoples, LGBTIQ+ people, and people from culturally and linguistically diverse backgrounds</p> <p>Engage clients actively in the delivery of support tasks to support skills and independence</p> <p>Comply with mandatory reporting and other regulatory requirements and standards</p>
<p>Build rapport and collaborate effectively with clients, clients’ families, colleagues, and management to achieve positive outcomes</p>	<p>Develop and maintain respectful, collaborative, and constructive relationships with a range of stakeholders, including clients and their families</p> <p>Follow workplace stakeholder engagement policies and procedures, and consistently maintain professional standards</p> <p>Discuss with clients their preferences for how support is provided and additional supports they may need, and understand where to go to follow up and ensure this assistance is pursued</p> <p>Provide advocacy support for clients when needed, drawing on interactions with and knowledge of clients’ individual circumstances</p>
<p>Engage in safe work practices and maintain personal wellbeing</p>	<p>Have and maintain an understanding of how to work safely in environments where care and support must be provided</p> <p>Understand regulations and apply organisational policies around workplace health and safety</p> <p>Engage in practices to maintain self-care, acknowledging the impact of own wellbeing on quality of care and support provided to clients</p>
<p>Follow care and support plans</p>	<p>Understand how to access, read, and engage with care and support plans developed for clients</p> <p>Deliver care and support in alignment with care plans or therapy plans previously prepared for clients and tailor support to the individual</p>

Functions	Sub-function
	<p>Understand how to use digital interfaces, tools and technology for care or support delivery, and to record notes</p> <p>Apply person-centred positive behaviour support strategies in line with individual behaviour support plans and relevant Quality and Practice Standards, upholding each person's rights, choice, safety and dignity</p>
Contribute to care and support planning	<p>In collaboration with other organisational roles, help identify areas for additional support needed by clients, contributing insights from own engagement with clients to support ongoing care and therapy plan development</p>
Observe and report changes in client conditions	<p>Report clients' changing conditions to senior staff, recording observations in relevant documentation and report to senior staff as required by organisational policies</p>
Report complaints about care	<p>Ensure complaints about care provision quality or safety are reported, in alignment with organisational policies</p>
Provide social support and companionship	<p>Develop friendly, culturally safe, and supportive relationships with clients, supporting clients to feel heard and seen</p> <p>Provide social support to clients with varying needs, upholding clients' dignity and respecting their privacy and human rights</p>
Support clients to participate in wider social and community activities	<p>Support clients by identifying possible activities for social and community participation</p> <p>Assist clients with undertaking social and community activities, including by preparing them emotionally and making physical accommodations, as required</p> <p>Follow workplace policies and procedures around external relationship management, including engaging professionally with staff and management of services partnering with employer to provide positive client outcomes</p>
Assist with rehabilitation exercises and promoting a healthy lifestyle	<p>Liaising with other care and support roles, including physiotherapists and other allied health workers, support clients with physical rehabilitation and other exercise activities</p> <p>Encourage and support clients to engage in health and recreation activities</p>

Functions	Sub-function
Assist clients with medications, per industry guidelines and legislation and under appropriate supervision	Assist with the delivery of medication to clients as required, ensuring compliance with relevant legislative instruments around scope of practice
	Understand and adhere to relevant scope of practice and reporting frameworks covering medication assistance
Evaluate and assess people's levels of abilities, needs, and strengths	Provide assistance (typically to a Team Leader or Coordinator) in the planning, implementation and evaluation of leisure, health, and recreational activities needed by clients
Maintain knowledge of resources available within a facility and within the community	Plan work and establish priorities, including by keeping an ongoing record of known resources that may support clients
	Monitor organisations' websites to identify and track new and no longer available resources
Assist people to participate in meaningful leisure and recreation activities	Identify suitable activities and support clients to access and participate in them
	Understand how individual clients' needs and capacities may impact on accessibility of activities, and respond accordingly
	Show initiative and resourcefulness to adapt where needed (e.g. responding to changing availability of activities)
Maintain friendly and supportive professional relationships	Communicate effectively, respectfully, and professionally with colleagues and other staff in the sector
	Follow workplace policies, sector-specific professional standards and maintain professional boundaries
Ensure chosen leisure and recreation programs and activities are appropriate for, and meet the needs of, culturally and linguistically diverse clients	Acknowledge how cultural and linguistic differences may impact suitability of leisure and recreation activities, and make accommodations accordingly
Undertake administrative tasks	Understand and operate within team rosters and work scheduling, liaising with colleagues and management to align with strategic objectives
	Contribute to the development of organisational policies
	Understand and operate within team budgets

Functions	Sub-function
Support development of care and support planning	With input from colleagues, including frontline care and support and allied health workers, contribute to the development of clients' care and support plans

4.2 Functional overlaps between foundational care and support roles

The table below shows where overlaps occur between sub-functions of the key identified foundational care and support roles. Roles are distinguished by the following acronyms:

- PCW: Personal Care Worker (residential aged care)
- DSW: Disability Support Worker
- HCS: Home and Community Support Worker (aged care)
- LLW: Leisure and Lifestyle Worker
- DA: Domestic Assistant
- TLC: Frontline Team Leader or Coordinator

Table 9. Functional overlaps between foundational care and support roles in aged care and disability sectors

Functions and sub-functions	PCW	DSW	HCS	LLW	DA	TLC
Provide person-centred care and support						
Assist clients with daily activities (e.g. cleaning, laundry, and shopping)	Y	Y	Y	Y	Y	Y
Assist clients with personal care needs (e.g. showering, meal preparation and eating, dressing, mobility)	Y	Y	Y (aged care only)	Y		Y
Provide specialised support for clients with complex or acute care needs, including around dementia and palliative care	Y	Y	Y			Y
Support clients to develop and apply individualised strategies to strengthen confidence and capacities in social and emotional skills, and to undertake daily tasks		Y	Y	Y		
Actively listen to, and communicate respectfully and thoughtfully with, clients – ensuring they have agency, independence, and autonomy over the care and support provided to them	Y	Y	Y	Y	Y	Y

Functions and sub-functions	PCW	DSW	HCS	LLW	DA	TLC
Interact with respect for people's cultural and linguistic differences and sexual preferences, including Aboriginal and Torres Strait Islander peoples, LGBTIQ+ people, and people from culturally and linguistically diverse backgrounds	Y	Y	Y	Y	Y	Y
Engage clients actively in the delivery of support tasks to support skills and independence		Y				Y
Comply with mandatory reporting and other regulatory requirements and standards	Y	Y	Y	Y	Y	Y
Build rapport and collaborate effectively with clients, clients' families, colleagues, and management to achieve positive outcomes						
Develop and maintain respectful, collaborative, and constructive relationships with a range of stakeholders, including clients and their families	Y	Y	Y	Y	Y	Y
Follow workplace stakeholder engagement policies and procedures, and consistently maintain professional standards	Y	Y	Y	Y	Y	Y
Discuss with clients their preferences for how support is provided and additional supports they may need, and understand where to go to follow up and ensure this assistance is pursued	Y	Y	Y	Y		Y
Provide advocacy support for clients when needed, drawing on interactions with and knowledge of clients' individual circumstances	Y	Y	Y	Y		Y
Engage in safe work practices and maintain personal wellbeing						
Have and maintain an understanding of how to work safely in environments where care and support must be provided	Y	Y	Y	Y	Y	Y
Understand regulations and apply organisational policies around workplace health and safety	Y	Y	Y	Y	Y	Y
Engage in practices to maintain self-care, acknowledging the impact of own wellbeing on quality of care and support provided to clients	Y	Y	Y	Y	Y	Y
Follow care and support plans						
Understand how to access, read, and engage with care and support plans developed for clients	Y	Y	Y	Y	Y	Y

Functions and sub-functions	PCW	DSW	HCS	LLW	DA	TLC
Deliver care and support in alignment with care plans or therapy plans previously prepared for clients	Y	Y	Y	Y		Y
Understand how to use digital interfaces, tools and technology for care or support delivery, and to record notes	Y	Y	Y	Y		Y
Apply person-centred positive behaviour support strategies in line with individual behaviour support plans and relevant Quality and Practice Standards, upholding each person's rights, choice, safety and dignity	Y	Y	Y	Y		Y
Contribute to care and support planning						
In collaboration with other organisational roles, help identify areas for additional support needed by clients, contributing insights from own engagement with clients to support ongoing care and therapy plan development	Y	Y	Y	Y		Y
Observe and report changes in client conditions						
Report clients' changing conditions to senior staff, recording observations in relevant documentation and report to senior staff as required by organisational policies	Y	Y	Y	Y	Y	Y
Report complaints about care						
Ensure complaints about care provision quality or safety are reported, in alignment with organisational policies	Y	Y	Y	Y		Y
Provide social support and companionship						
Develop friendly, culturally safe, and supportive relationships with clients, supporting clients to feel heard and seen	Y	Y	Y	Y		Y
Provide social support to clients with varying needs, upholding clients' dignity and respecting their privacy and human rights	Y	Y	Y	Y		Y
Support clients to participate in wider social and community activities						
Support clients by identifying possible activities for social and community participation	Y	Y	Y	Y		Y
Assist clients with undertaking social and community activities, including by preparing them emotionally and making physical accommodations, as required	Y	Y	Y	Y		Y

Functions and sub-functions	PCW	DSW	HCS	LLW	DA	TLC
Follow workplace policies and procedures around external relationship management, including engaging professionally with staff and management of services partnering with employer to provide positive client outcomes	Y	Y	Y	Y		Y
Assist with rehabilitation exercises and promoting a healthy lifestyle						
Liaising with other care and support roles, including physiotherapists and other allied health workers, support clients with physical rehabilitation and other exercise activities	Y	Y	Y	Y		Y
Encourage and support clients to engage in health and recreation activities	Y	Y	Y	Y		Y
Assist clients with transportation to attend appointments and other supports						
Drive clients to medical or other appointments		Y	Y	Y		
Drive clients to excursions or other engagements with leisure and recreation activities		Y	Y	Y		
Advise and support clients with personal transport needs, such as using public transport and taxis, and sharing transport with other clients	Y	Y	Y	Y		
Assist clients with medications, per industry guidelines and legislation and under appropriate supervision						
Assist with the delivery of medication to clients as required, ensuring compliance with relevant legislative instruments around scope of practice	Y	Y	Y			Y
Understand and adhere to relevant scope of practice and reporting frameworks covering medication assistance	Y	Y	Y			Y
Evaluate and assess people’s levels of abilities, needs, and strengths						
Provide assistance (typically to a Team Leader or Coordinator) in the planning, implementation and evaluation of leisure, health, and recreational activities needed by clients				Y		Y
Maintain knowledge of resources available within a facility and within the community						

Functions and sub-functions	PCW	DSW	HCS	LLW	DA	TLC
Plan work and establish priorities, including by keeping an ongoing record of known resources that may support clients				Y		Y
Monitor organisations' websites to identify and track new and no longer available resources				Y		Y
Assist people to participate in meaningful leisure and recreation activities						
Identify suitable activities and support clients to access and participate in them	Y	Y	Y	Y		Y
Understand how individual clients' needs and capacities may impact on accessibility of activities, and respond accordingly	Y	Y	Y	Y		Y
Show initiative and resourcefulness to adapt where needed (e.g. responding to changing availability of activities)	Y	Y	Y	Y		Y
Maintain friendly and supportive professional relationships						
Communicate effectively, respectfully, and professionally with colleagues and other staff in the sector	Y	Y	Y	Y		Y
Follow workplace policies, sector-specific professional standards and maintain professional boundaries	Y	Y	Y	Y		Y
Ensure chosen leisure and recreation programs and activities are appropriate for, and meet the needs of, culturally and linguistically diverse clients						
Acknowledge how cultural and linguistic differences may impact suitability of leisure and recreation activities, and make accommodations accordingly		Y		Y		Y
Complete home care tasks						
Provide support to clients at home with domestic tasks such as cleaning, laundry, light meal preparation, and organisation			Y		Y	
Provide leadership, coaching, and mentoring to care and support staff						
Lead or supervise one or more care and support workers on a day-to-day basis, supporting a collaborative and constructive team culture and ensuring practice standards are adhered to						Y
Allocate and organise staff support						Y

Functions and sub-functions	PCW	DSW	HCS	LLW	DA	TLC
Identify opportunities for coaching of staff, including onboarding of new team members, and liaise with senior management to action						Y
Identify and organise mentoring and professional development opportunities for team members, linking staff improvement to strategic organisational objectives						Y
Focus staff attention on quality of life, encouraging a work-life balance for the benefit of both team members and clients						Y
Manage and organise care and support						
Manage a caseload of clients' care and support plans, coordinating team members to ensure workload is covered in cases of absence or turnover						Y
Ensure reporting and compliance requirements, for both organisational and regulatory purposes, are met						Y
Manage relationships with internal and external stakeholders						
Liaise with internal stakeholders such as senior management to ensure organisational strategic objectives are met				Y		Y
Liaise with external professionals involved in the coordinated care and support provided to clients				Y		Y
Undertake administrative tasks						
Understand and operate within team rosters and work scheduling, liaising with colleagues and management to align with strategic objectives	Y	Y	Y	Y	Y	Y
Contribute to the development of organisational policies	Y	Y	Y	Y		Y
Understand and operate within team budgets						Y
Support development of care and support planning						
With input from colleagues, including frontline care and support and allied health workers, contribute to the development of clients' care and support plans						Y

5 Career pathways

5.1 Purpose of qualifications in this review

Evidence collected for this functional analysis has highlighted a wide variance in how industry interacts with the six qualifications under review. While some – such as the *CHC43415 Certificate IV in Leisure and Health* and the *CHC53415 Diploma of Leisure and Health* – generally support one main occupation (albeit across multiple different settings and serving multiple cohorts of people), career outcomes for the other qualifications are less clear-cut.

The difficulty of mapping training outcomes to real-world applications is highlighted by the transferability of qualifications' current core content to a wide range of roles and career pathways. As job advertisement analysis reveals, for instance, qualifications such as the *CHC33021 Certificate III in Individual Support*, the *CHC43015 Certificate IV in Ageing Support*, the *CHC43121 Certificate IV in Disability Support*, and the *11076NAT Diploma of Leadership in Disability* are desired by employers recruiting not only frontline and team leadership staff, but also seeking to fill broader roles such as in coordination, service management leadership, and system navigation.

It is also noted that, among the six qualifications under review, only the *CHC43121 Certificate IV in Disability Support* has a minimum entry requirement (namely the *CHC33021 Certificate III in Individual Support*, with an elective-based specialisation in Disability). Beyond acting as a barrier to entry and thus impacting enrolment numbers, this structural change will also have specific, localised implications for related workforces. In Victoria, for example, employees working with people with disability under the public-funded Supported Residential Services scheme are required to at a minimum hold the Certificate IV.

Such factors, alongside evolving developments in the worker registration space around the possible introduction of nationally mandated minimum qualifications for personal care workers, will need to be considered in the next stage of this qualification review.

5.2 Broad career pathways in aged care and disability

The functional analysis indicates that the aged care and disability workforce is best understood as a set of related but structurally distinct functional pathways, rather than fully interconnected pathways. While there is some mobility across roles, progression is more commonly characterised by defined transitions between functions, particularly between direct care, clinical, and leadership roles.

This reflects the regulated and clinically governed nature of aged care and disability service delivery, where roles are shaped by quality and safety requirements. Relevant guidelines fall under frameworks such as the Aged Care Quality Standards⁴⁷ and the NDIS Practice Standards.⁴⁸

⁴⁷ Aged Care Quality and Safety Commission, 2019

⁴⁸ <https://www.ndiscommission.gov.au/rules-and-standards/ndis-practice-standards>

Across all pathways, progression is characterised by increasing:

- complexity of care and support;
- autonomy in decision-making; and
- scope of influence.

Scope of influence refers to the extent to which a role impacts outcomes beyond immediate task completion. In both aged care and disability, this expands from direct care delivery at the individual level to influencing team practice, service delivery and organisational performance.

Importantly, the functional analysis identifies clear differences between residential, home care, and community-based service delivery models, which influence how roles are performed, the level of autonomy required, and the scope of decision-making.

HumanAbility has published several resources detailing the job functions and training requirements of roles within these broader pathways. These include a careers pathways framework, a good practice guide, promotional flyers, and a series of career profile videos spotlighting case studies of employment journeys taken by people working in both sectors.⁴⁹

5.2.1 Entry and support pathway

Functional role

This pathway provides operational support to aged care and disability services across both residential and home care settings.

Indicative job titles include administration officers, rostering staff, hospitality workers, and cleaning staff.

Work characteristics

- structured, routine tasks aligned to organisational processes
- support functions such as scheduling, facilities management and service coordination
- in residential settings, work is site-based and integrated into facility operations
- in home care, administrative roles often support dispersed service delivery and remote workforce coordination

Autonomy and decision-making

Limited autonomy, with work performed under supervision and in accordance with established procedures.

Scope of influence

Influence is primarily operational, contributing to the efficiency and reliability of service delivery. In residential settings, this supports the functioning of the facility. In home care, it supports coordination across dispersed services.

⁴⁹ HumanAbility (2025), [Career Pathways for Care & Support Sectors: Aged, Disability & Veterans' Care](#)

5.2.2 Foundational care and support pathway

Functional role

This pathway represents the core workforce delivering personal and daily living support to older people and people with disability.

Indicative job titles include personal care workers, disability support workers, and leisure and lifestyle workers.

Work characteristics

In residential aged care:

- care is delivered within a structured, team-based environment
- workers support multiple residents within a shared setting
- tasks are scheduled and aligned to facility routines
- immediate access to supervisors and clinical staff

In home-based aged care and disability support:

- care is delivered one-on-one in clients' homes or, in some disability roles, in group home settings
- work environments vary significantly between clients
- workers must adapt to different home settings, family dynamics and available resources
- tasks may extend beyond care to include social support and informal coordination

Autonomy and decision-making

- residential workers operate with moderate autonomy, supported by on-site supervision and established care processes
- home care workers operate with higher autonomy, requiring independent decision-making in dynamic and less predictable environments

Scope of influence

- in residential settings, influence is shared across the care team and contributes to consistent service delivery
- in home care, influence is more concentrated at the individual level, with workers playing a key role in shaping client experience and engagement

Capability requirements

- relationship building and communication
- supporting dignity, independence and choice
- recognising and responding to changes in condition
- adapting care to individual needs

Qualifications

- Certificate III in Individual Support

Pathway progression

Workers may transition into clinical, coordination or leadership roles, with movement influenced by experience and qualification attainment.

5.2.3 Clinical and advanced care pathway

Functional role

This pathway includes roles delivering clinical and complex care, requiring formal qualifications and professional registration.

Indicative job titles include enrolled nurses, registered nurses and clinical care coordinators. For clarity, these advanced clinical roles are not within the scope of this review.

Work characteristics

In residential aged care and disability support:

- clinical care is delivered within a structured governance framework
- nurses oversee care delivery across multiple residents
- strong integration with care teams and facility operations
- clear escalation pathways and access to multidisciplinary support

In home care settings:

- clinical roles often involve outreach or coordination-based functions
- workers assess and manage care across multiple clients in different locations
- greater reliance on remote decision-making and coordination with external providers

Autonomy and decision-making

High level of autonomy in both settings, with responsibility for clinical judgement, risk management and care planning.

Scope of influence

- in residential settings, influence extends across care teams and impacts facility-wide care quality
- in home care, influence extends across multiple clients and services, impacting care coordination and clinical outcomes

Qualifications

- Diploma or Bachelor of Nursing
- professional registration required

Pathway progression

Progression into senior clinical or leadership roles in both aged care and disability, with movement constrained by qualification and regulatory requirements.

5.2.4 Coordination and service management pathway

Functional role

This pathway focuses on coordinating services and managing care delivery across programs.

Indicative job titles include care coordinators, case managers and service coordinators.

Work characteristics

In residential aged care and disability support:

- coordination occurs within a single service or facility
- focus on managing internal care delivery and workforce allocation
- integration with clinical and care teams

In home care settings:

- coordination spans multiple providers and services
- managing care across dispersed settings
- significant focus on communication, scheduling and service integration

Autonomy and decision-making

High level of autonomy, particularly in home care and support settings, where coordination occurs across multiple stakeholders and environments.

Scope of influence

- residential roles influence service delivery within the facility
- home care roles influence continuity of care across services and providers

Capability requirements

- system knowledge and service coordination
- stakeholder engagement and communication
- problem-solving and decision-making

Qualifications

- Certificate IV or Diploma in Community Services or related fields

Pathway progression

May lead to leadership or system-level roles.

5.2.5 Leadership, governance and system pathway

Functional role

This pathway includes roles responsible for organisational leadership, governance and service performance.

Indicative job titles include facility managers, quality managers and program managers.

Work characteristics

In residential aged care and disability support:

- leadership is focused on managing facility operations, workforce and compliance
- direct oversight of service delivery and quality standards
- responsibility for organisational culture and performance

In home care:

- leadership involves managing dispersed teams and service delivery across locations
- greater emphasis on coordination, workforce management and service integration
- oversight of service consistency across varied environments

Autonomy and decision-making

High level of autonomy and responsibility for both operational and strategic decisions.

Scope of influence

- in residential settings, influence is concentrated within the facility but may extend to organisational operations
- in home care, influence extends across distributed services and workforce systems

Capability requirements

- leadership and workforce management
- governance and compliance
- strategic and operational decision-making

Qualifications

- Diploma or higher-level qualifications in management or related fields
- significant sector experience

Pathway progression

May lead to senior executive or system-level roles.

5.2.6 System navigation pathway

Functional role

This pathway includes roles responsible for providing clients and their families with advice on how to navigate the aged care and disability systems. This may include identifying suitable providers and service packages, facilitating access to and understanding eligibility for funding, and advocating for and supporting clients after placement into care.

Indicative job titles include navigators, connectors, care managers, Aboriginal disability liaison officers (ADSOs), and NDIS planners.

Work characteristics

- understanding the specific care and support needs of clients and their families
- identifying possible options for care and eligibility for financial support
- supporting clients and families with accessing funding, including acting as their advocate
- connecting clients with providers and preferred care options
- monitoring client satisfaction through plan reviews

Autonomy and decision-making

Levels of autonomy and responsibility for operational decisions can vary. Roles such as ADSOs in Aboriginal Community Controlled Organisations may have less autonomy than comparative roles elsewhere in the disability sector.

Scope of influence

Influence generally extends across sector, with connections made between client and provider/s that best meet clients' individual needs.

Capability requirements

- knowledge of sector-specific providers, funding structures, and care package options
- governance, record-keeping, and compliance
- interpersonal and problem-solving skills

Qualifications

- qualifications in individual support, ageing support, or disability, or related fields
- sector experience, including in frontline care and support roles (although some roles in this pathway are entry-level)

Pathway progression

May lead to senior leadership, system level, frontline support, or clinical roles.

6 Conclusion

This functional analysis has examined work performed across aged care, disability, home and community support, leisure and health, and frontline coordination roles within the scope of the *Aged Care, Disability, Leisure and Health Qualification Review*.

The analysis identified the functions and sub-functions undertaken across these roles and examined how work is organised and performed across a range of service settings. While responsibilities, levels of autonomy and decision-making vary between roles and contexts, the findings highlight both common and distinct occupational functions across the sectors. The analysis provides a structured description of contemporary work practices and workforce capability requirements, reflecting:

- the diversity of service delivery environments;
- the increasing complexity of physical and emotional care and support needs, at times necessitating specialised skills on top of core competencies; and
- evolving expectations placed on the workforce due to legislative, regulatory, and funding reforms.

Establishing an evidence-based understanding of the work performed across the sectors, the functional analysis provide a foundation for considering how training products can continue to support workforce requirements. Draft findings were tested through industry validation activities to confirm their accuracy and completeness. Feedback received through the validation process was incorporated to refine the analysis and ensure the functions and sub-functions described in this report accurately reflect work as it is performed in practice.

6.1 Next steps

The findings from this functional analysis will be used as one input to the next stage of the *Aged Care, Disability, Leisure and Health Qualification Review*. The functions and sub-functions identified through the analysis will be considered alongside other project evidence sources, including existing training products, workforce capability frameworks, regulatory and quality standards, implementation evidence, and relevant government and sector priorities.

The next stage of the project will involve examining the extent to which current qualifications, skill sets and units of competency align with contemporary work practices and workforce requirements. This will include consideration of relevant workforce capability frameworks, the Aged Care Quality Standards, NDIS Practice Standards, legislative and regulatory requirements, aged care and disability sector reforms, workforce attraction and retention priorities, and First Nations priorities and commitments that influence service delivery across aged care, disability, home and community support, and leisure and health services.

Evidence from these sources will be used to identify areas of alignment, overlap, gaps and emerging workforce requirements. Findings will inform the review of qualifications, skill sets, and units of competency, and support the development of draft training products.

Draft training products will be released through two rounds of public consultation to seek feedback from industry, employers, workers, training providers, peak bodies, government stakeholders and other interested parties. Feedback received through consultation activities will be reviewed and considered in refining draft training products, with the aim of achieving broad industry consensus and ensuring the products reflect contemporary work practices, workforce capability requirements, regulatory expectations and sector priorities.

Following completion of consultation and refinement activities, proposed training products will be submitted for consideration through the arrangements established under the Training Package Organising Framework. This includes independent review by the Assurance Body and consideration by state and territory governments and the Australian Government through national skills governance arrangements. Following completion of these processes, Skills Ministers will consider whether the proposed training products should be endorsed. Subject to endorsement, training products will be published on training.gov.au and made available for implementation across the vocational education and training sector.

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