



HumanAbility

Submission

Australian Tertiary Education Commission's
Discussion Paper: A More Joined-up Tertiary
System

JUNE 2026



Acknowledgement of Country

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

Find us online:
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About HumanAbility

Who are we?

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

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

Who are we?

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

What do we do?

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

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

What do we do?

- Workforce planning
- Training Product development

Our sectors



Aged Care &
Disability Services



Children's
Education & Care



Health



Human (community)
services'



Sport &
Recreation



Submission

1 Introduction

(Discussion Questions 10 & 11)

HumanAbility has contributed to the joint Jobs Skills Council's submission on the principles that should underpin tertiary harmonisation. This submission should be read alongside the joint JSC submission. HumanAbility agrees with the broad directions in both the discussion paper and joint Jobs Skills Council submission. This submission's purpose is to add further evidence that is specific to the care and support sector sectors and stakeholder perspectives on key implementation issues.

Tertiary harmonisation is important in the care and support sectors. It determines whether women in feminised and Vocational Education and Training (VET) linked occupations can use education to improve progression, mobility and job security; whether experienced workers can receive reliable credit and recognition of prior learning; whether placements and work-based learning are designed around people already in paid employment; and whether regional pathways are building local workforce supply in areas of chronic shortage.

2 Gender & Parity of Esteem

(Discussion Questions 2, 3, 7, 10)

Tertiary harmonisation cannot be treated as gender neutral. Jobs and Skills Australia's Gender Equality Study provides evidence that education choices, occupational pathways, career progression and pay remain gendered.¹ Women are overrepresented in education and training while having lower financial returns on qualifications, particularly in VET qualified feminised sectors.^{2 3}

Formal pathways can either reduce or reinforce occupational segregation. Women are concentrated in lower-paid care and support roles. Better credit recognition, opportunities for articulation, stackable qualifications, skill sets and recognition of prior learning can support women to reskill, upskill and progress to higher paid and more secure occupations.⁴

Parity of esteem between VET and higher education should not be treated only as a matter of perception or institutional status. The value attached to qualifications is shaped by classification

¹ Jobs and Skills Australia (2025). *Gender Economic Equality Study*. Accessed 9 June 2026.

² Jobs and Skills Australia (2025). *Education and training divides: Gendered skills, pathways and outcomes, Paper 2 Gender Economic Equality Study*. Accessed 9 June 2026.

³ Jobs and Skills Australia (2025). *Education and training divides: Gendered skills, pathways and outcomes, p.20, Paper 2 Gender Economic Equality Study*. Accessed 9 June 2026.

⁴ Jobs and Skills Australia (2025). *Education and training divides: Gendered skills, pathways and outcomes, p29, Paper 2 Gender Economic Equality Study*. Accessed 9 June 2026.

structures, occupational regulation, funding and pricing settings, remuneration and whether qualifications create access to valued roles.

Workers in feminised care and support sectors can face weak financial returns from further study, limited career mobility and unclear progression pathways. This can make further study difficult to justify, particularly for workers who are in already low-paid employment, have caring responsibilities or need to complete unpaid placements to complete their qualifications. The reform should consider how funding settings, qualification design, credit, recognition of prior learning, occupational regulation, classification structures and employer practices affect the economic value of qualifications.

3 Effective transitions

(Discussion Questions 4-6, 8, 11)

The barriers to harmonisation and progression pathways are often both structural and practical. Stronger transitions first need a destination – a higher role to progress into. Where a destination exists, the pathway to it must be:

- Visible – routes, credit and entry requirements clear up front.
- Recognised – credit transfer and recognition of prior learning are consistent and certain, not case-by-case.
- Supported – rostering, study leave, supervision and placements that align with paid work.
- Accessible – delivered locally, by institutions and partnerships willing to own more than one stage of the transition.
- Rewarded – progression pays, and funding and pricing settings make study worthwhile.

3.1 Enrolled Nurse to Registered Nurse pathway

The Enrolled Nurse to Registered Nurse transition has a relatively strong pathway, with a clear occupational ladder, registration architecture and recognised credit from Diploma to Bachelor of Nursing. However, even established pathways require consistent credit, transparent information, employer support and placement capacity to work well. The National Australian Nursing and Midwifery Federation (ANMF) note the importance of “scope of practice, legislation, accreditation standards, career pathways and qualification structures that align with AQF structures”.⁵ The ANMF also report that the transition into post-graduate study has friction points with nurses prevented from working to full scope by employer and organisational policies, the prohibitive cost of further study, and the barrier of

⁵ Australian Nursing and Midwifery Federation (2025). *Public Consultation: Building a system that puts people and skills first – Development of a National Skills Taxonomy*, page 14. Accessed 16 June 2026.

study leave arrangements.⁶ ANMF also highlights that credit arrangements vary across universities, reinforcing the point that the pathway is established but not uniform or low friction.⁷

3.2 Pathways – Allied Health Assistant to Allied Health Professional

Government policy, pricing and workforce strategies send important signals about whether qualifications are valued, whether workers can progress, and whether VET and higher education operate as a joined-up tertiary system. Tertiary harmonisation will have limited impact if qualification pathways are designed separately from the policy levers that shape employer demand, occupational structures and service funding. Allied health provides a clear example.

Allied Health Assistance has a weak transition pathway. All Allied Health Professional (AHP) occupations are in shortage and VET qualified Allied Health Assistants (AHAs) can increase access to care, reduce burn out and provide an untapped pipeline into AHP occupations.^{8 9 10} Stakeholder submissions and HumanAbility's 2024 submission on the National Allied Health Workforce Strategy, argued that the value of AHAs should be explicitly recognised in the national strategy, that workforce data should include both AHPs and AHAs to provide visibility, and that career pathways should be extended from AHA though to AHP level.^{11 12}

There is currently no formal pathway for AHAs seeking to progress to AHP roles. By comparison, Enrolled Nurses have a clear pathway into Registered Nurse qualifications, with the Diploma of Nursing supporting entry and credit into the Bachelor of Nursing.

Stakeholders report that some AHAs commence the Certificate in AHA expecting it to support progression into an allied health degree (such as Physiotherapy, Speech Pathology or Occupational Therapy) but later finding that it does not provide direct entry or credit towards the first year of study. Instead, AHAs who want to transfer into an AHP degree must first complete at least one year of a

⁶ Australian Nursing and Midwifery Federation (2024) *Submission to the Australian Government re Unleashing the potential of our health workforce – Scope of Practice review*. Response to Issues Paper 1. Accessed 12 June 2026.

⁷ Australian Nursing and Midwifery Federation Victorian Branch (2021) *Article: Further study for enrolled nurses*. Accessed 16 June 2026.

⁸ Snowdon, D.A., King, O.A., Dennit, A., Pinson, J.A., Shannon M.M., Collyer, T.A., Davis A., & Williams, C.M. (2022). *Delegation of patient related tasks to allied health assistants: a time motion study*. BMC Health Service Research, 22 (1), Article 1280. <https://doi.org/10.1186/s12913-022-08642-7>. Accessed 18 June 2026.

⁹ Department of Health (2023) *Victorian allied health assistant workforce recommendations*, Victorian Government. Accessed 16 June 2026. Allied Health Assistants National Association (2026) *Strengthening the Allied Health Assistant Workforce*. Accessed 18 June 2026.

¹⁰ HumanAbility (2024) *HumanAbility Submission to the DoHAC consultation – Draft Outline for the National Allied Health Strategy*. Accessed 12 June 2026.

¹¹ HumanAbility (2024) *HumanAbility Submission to the DoHAC consultation – Draft Outline for the National Allied Health Strategy*. Accessed 12 June 2026.

¹² Allied Health Assistant National Association (2024) *Inclusion of Allied Health Assistants in the National Allied Health Workforce Strategy*. Accessed 16 June 2026.

Bachelor of Health Science. This limits recognition of the training, practical experience, scope of practice and interdisciplinary knowledge developed by AHAs.

Further work could examine whether a Diploma level Allied Health Assistance qualification, developed in response to industry demand for Allied Health Professionals, could support more advanced assistant roles and agreed credit into relevant allied health degrees, similar to that of Enrolled Nurse to Registered Nurse. This would require coordinated work across qualification development, university articulation, professional bodies, regulators, employers and government policy settings, so that any pathway is linked to recognised scope, supervision, credit and workforce need.

International examples, including Singapore's structured therapy support career track, show how advanced assistant roles can be more clearly embedded within the allied health workforce models.¹³

This example illustrates that tertiary harmonisation should identify where adjacent roles are not recognised, measured or connected. Without clearer occupational and qualification pathways, potential workforce pipelines can remain underused even where shortages exist.

4 Placements and work-based learning

Placements and work-based learning are core to many care and support sector qualifications across VET and Higher Education. However, where placement requirements are poorly aligned with employment, income support, supervision capacity, and local service delivery, they can become a barrier to entry, progression and completion at any level of tertiary study.

This is particularly important for students and existing workers who need to study while remaining in paid employment, including mature age workers, workers in regional and rural areas, and women balancing work, study and carer responsibilities. Younger students are also often balancing study with paid work. For these learners, taking extended time away from paid employment to complete unpaid placements is unsustainable. High placement loads, poor rostering fit, limited supervision, and unpaid placement expectations can make formal pathways unusable in practice, even where credit or articulation arrangements exist.

Tertiary harmonisation would support more consistent and practical approaches to placement and work-based learning across VET and higher education. This includes recognition and use of paid work-based learning, assessment arrangements that consider the barrier that placement can create, and funding models that reduce the financial burden of mandatory placements. Existing national and jurisdictional models point to possible solutions. The Commonwealth Prac Payment recognises the financial burden of mandatory placements for eligible students in nursing, midwifery, teaching, social

¹³ Note: Stakeholders advised HumanAbility of the details of a program to skill AHAs to AHPs, after meeting with Singapore Health representatives. The program is part Singapore Ministry of Health [Skills Future Careers Transition Programme](#), which provides stackable skill sets and modules including AHAs and AHPs. The program is mentioned in relation to AHPs on the Singapore public broadcast service CNA (2025) [Allied Health Professionals to be equipped with broader skill sets to support patients holistically](#). Accessed 18 June 2026.

work and the Diploma of Nursing.¹⁴ The ECEC Paid Practicum Subsidy provides a different model, supporting providers to give existing educators paid leave while they complete practicum requirements in diploma, degree and postgraduate early childhood qualifications.¹⁵ Paid student employment models, such as Victoria's Registered Undergraduate Students of Nursing model, also show how structured, supervised employment can be linked to tertiary study and workforce progression.¹⁶ However, these approaches remain uneven across sectors, qualification levels, and jurisdictions. A more joined-up tertiary system should support more consistent placement and work-based learning models across VET and higher education, while maintaining quality, supervision and safety.

5 Recognition of Prior Learning (RPL)

(Discussion Questions 5, 6, 8, 11)

RPL should be treated as a core pathway and transition tool, rather than an exception. In addition to the case made in the discussion paper and joint JSC submission, it is important that gender is considered. RPL has particular value in feminised care and support sectors, where many workers are mature age, cannot easily reduce existing paid employment, and have built substantial capability through work. HumanAbility's work plan includes research on how to make RPL more effective in high volume and consistent occupations, particularly those moving towards worker registration requirements.

For women and priority cohorts, including First Nations workers, regional workers, migrants and workers with a disability, RPL can be the difference between progressing into high-level VET or higher education and deciding that further study is not realistic.

RPL should be built into the design of the Roadmap from the outset with realistic evidence requirements, incentives and clear links between workplace capability, credit and progression.

6 Regional, Rural and Remote

(Discussion questions 3, 5, 8, 9, 11)

Regional, rural and remote communities should be treated as a priority use case for tertiary harmonisation. In many care and support sectors, local workforce supply cannot rely on metropolitan pipelines, relocation or full-time study away from work.^{17 18 19} HumanAbility's work plan includes upcoming research on the specific needs of regional and remote workforces.

¹⁴ Department of Education (2026) *Commonwealth Prac Payment for students*, Australian Government. Accessed 19 June 2026.

¹⁵ Department of Education (2026) *Early Childhood, Paid Practicum Subsidy*, Australian Government. Accessed 19 June 2026.

¹⁶ Department of Health (2024) *Undergraduate student employment programs, Registered Undergraduate Student of Nursing*, Victorian Government. Accessed 19 June 2026.

¹⁷ HumanAbility (2025) *Workforce Plan 2025, Health Sector Profile*. Accessed 16 June 2026.

¹⁸ Jobs Skills Australia (2025) *Jobs and Skills Roadmap for Regional Australia Phase 1*. Accessed 16 June 2026.

¹⁹ Department of Education (2026) *Early Childhood Education and Care (ECEC) Workforce: Paid Practicum Grant Opportunity Guidelines 2026-2027*, Australian Government. Accessed 18 June 2026. Note – prioritisation of regional and remote locations.

Stakeholders report that local providers, employers and communities work out innovative ways to support learners to enter and progress through tertiary systems. However, these arrangements can rely heavily on local champions, bespoke partnerships, and significant co-ordination effort because the broader tertiary system is not designed to support transitions and pathways, credit, placements or to make the process easy to navigate.

“Grow your own” models can improve local workforces supply and capability, but only where learners can enter, continue, and progress through qualifications while remaining connected to employment and community.^{20 21 22} This requires deliberate pathway design between VET and higher education, including local partnerships, employer support, placement and supervision capacity, culturally safe support, and clear credit and articulation arrangements.

6.1 Innovative First Nations transition pathways

Queensland has a cadet-style model that supports First Nations learners to move from Allied Health Assistants to Allied Health Professional occupations.²³ This is supported by partnerships, targeted funding and local institutional commitment, but those features are not consistently available across the system.

James Cook University’s Diploma of Higher Education – Dentistry is a First Nations pathway that provides another example of a transition route into a regulated professional degree, with successful completion enabling entry into the Bachelor of Dental Surgery and credit for completed subjects.²⁴ This is not a standard VET to Higher Education articulation model but illustrates the opportunity to build a pathway from Dental Assisting qualifications into Higher Education. It also highlights the value of individual Higher Education institutions taking on responsibility for offering Diploma.

The value of regional pathway models is not only learner access, but also whether tertiary harmonisation can make locally developed pathways easy to establish, sustain and scale, so that communities are not relying on special projects to address ongoing shortages.

7 Data

(Discussion Question 12)

Data should allow governments and industry to assess whether tertiary harmonisation is improving or whether pathways exist in theory but remain difficult to use in practice. Current data can make it difficult to assess whether learners in the care and support sector are moving effectively between VET and higher education, whether credit or recognition of prior learning is granted, whether qualifications

²⁰ HumanAbility (2026) *Examining Earn While You Learn Models: Success Rates and Challenges in Global Contexts, Background Paper*. Accessed 12 June 2026.

²¹ HumanAbility (2026) *Examining Earn While You Learn (EWYL) Promising Models: Consultation Snapshot Report*. Accessed 16 June 2026.

²² HumanAbility (2025) *Workforce Plan 2025 – Children’s Education and Care Sector Profile*. Accessed 16 June 2026.

²³ Queensland Health (2026) *Queensland Health Careers - Cadetship Program*. Queensland Government. Accessed 18 June 2026.

²⁴ James Cook University (2026) *Diploma of Higher Education Dentistry- Indigenous Pathway* Accessed 12 June 2026.

are being used in related occupations, and whether outcomes differ by gender, region, occupation, qualification level and field of education.

8 Conclusion

(Discussion Questions 10 & 11)

The Tertiary Roadmap should prioritise reforms that make pathways usable in practice. For the care and support sectors, this includes whether women in feminised VET linked occupations can use qualifications to improve progression, mobility and job security; whether experienced workers can access reliable credit and recognition of prior learning; whether placements support rather than block transition; and whether regional communities can build local workforce supply without relying on bespoke local workarounds.

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