

FAIR WORK COMMISSION

AM2021/63

AUSTRALIAN NURSING AND MIDWIFERY FEDERATION

Applicant

**APPLICATION UNDER SECTION 157 OF THE *FAIR WORK ACT 2009* (CTH) TO
AMEND THE *AGED CARE AWARD 2010* AND *NURSES AWARD 2020***

First Matter

AM2020/99

HEALTH SERVICES UNION

Applicant

**APPLICATION UNDER SECTION 157 OF THE *FAIR WORK ACT 2009* (CTH) TO
AMEND THE *AGED CARE AWARD 2010***

Second Matter

AM2021/65

HEALTH SERVICES UNION

Applicant

**APPLICATION UNDER SECTION 157 OF THE *FAIR WORK ACT 2009* (CTH) TO
AMEND THE *SOCIAL, COMMUNITY, HOME CARE AND DISABILITY SERVICES
INDUSTRY AWARD 2010***

Third Matter

**AUSTRALIAN NURSING AND MIDWIFERY FEDERATION RESPONSE TO
BACKGROUND DOCUMENT 10—STAGE 3 OUTSTANDING ISSUES**

1. These submissions of the Australian Nursing and Midwifery Federation (“ANMF”) address the questions posed in Background Document 10 ([2022] FWCFB 248) (“BD10”), published 23 December 2022, and amended 29 December 2022.

Question 2 for the ANMF: Does the above discussion accurately summarise the changes to the classification structure in the Aged Care Award sought by the ANMF and the submissions already filed?

2. The ANMF agrees with **BD10 [46]–[56]**.
3. However, following further consideration of the issues raised by BD10, the changes to the classification structure in the Aged Care Award sought by the ANMF has been revised. With respect to Grade 4A – Specialist Personal Care Worker (aligned with level 6) and Grade 5 – Personal Care Supervisor (aligned with level 7), the ANMF now proposes amendments in accordance with Schedule A to these submissions.

Question 3 for all parties: Does any party propose any amendments to the classification structure under the SCHCADS Award?

4. The ANMF does not propose any amendments to the classification structure under the SCHCADS Award.

Question 4 for all parties other than the HSU: Do parties support the HSU’s proposed changes to the entry level (unqualified) RAO classification level?

5. The ANMF has no position in regard to this proposal. The issue will be whether the Commission is satisfied that the proposed change is necessary to achieve the modern awards objective.

Question 5 for all parties other than the HSU: Do parties support the HSU’s proposed additional classification levels for RAOs?

6. The ANMF has no position in regard to this proposal. The issue will be whether the Commission is satisfied that the proposed additional classification levels for RAOs are necessary to achieve the modern awards objective.

Question 6 for all parties: Does the above discussion accurately summarise the changes to the classification structure in the Aged Care Award sought by the HSU and ANMF and the submissions already filed?

7. In terms of **BD10 [69]**, the HSU propose 4 changes for Recreational/lifestyle activities officer classifications. At level 3, it proposes that the title specify “(entry – up to 6 months)”. At levels 4, 5 and 6 respectively, the HSU propose the addition of

“Recreational/Lifestyle activities officer (from 6 months)”, “Recreational/Lifestyle activities officer (qualified)” and “Senior Recreational/Lifestyle activities officer”. In the table set out at **BD10 [64]**, the proposed new “Recreational/lifestyle activities officer (qualified)” classification should appear in red.

8. There is an omission from the table set out at **BD10 [71]**. As noted at **BD10 [45]**, the HSU proposes to substitute an “*Advanced Diploma*” for an “*Advanced Certificate or Associate Diploma*” at level 7.
9. Subject to those issues, **BD10 [59]–[71]** provide an accurate summary.

Question 7 for all parties: Do the parties agree that the principles that should be applied by the Commission when establishing an appropriate classification structure are that:

- **It should be a career-based classification structure**
 - **It should clearly state the skills, qualifications and experience required at each level**
 - **It should provide a clear means to transition from one level to another**
10. The ANMF broadly agrees that the principles that the Commission would apply when setting a classification structure include those identified in the question. However, the ANMF makes the following additional observations about setting appropriate classification structures:
 - (1) *First*, in order to vary classification structures in modern awards, the Commission must be satisfied that such variation is necessary to achieve the modern awards objective.
 - (2) *Second*, the industrial terms and conditions (including classification structures) applicable to direct aged care workers under the Nurses Award and Aged Care Award have evolved as a product of decades of industrial arbitration. This history is addressed in the statements of Kristen Wischer, dated 14 September 2021, and Leigh Svendson, dated 23 April 2022, and is summarised in Background Document 2 - Award Histories. Any variation to classification structures would need to have regard to that history.
 - (3) *Third*, the ANMF continues to rely upon [162]–[181] of its Closing Submissions in Reply, dated 17 August 2022, with respect to classification structures.

Question 8 for all parties: Do parties have further suggestions regarding specific changes to the classification structure for HCWs under the SCHADS Award?

11. The ANMF has no further suggestions regarding specific changes to the classification structure for HCWs under the SCHADS Award.

Question 9 for all parties: Does any party seek changes to the incremental pay points in the Nurses Award?

12. The ANMF does not seek any changes to the incremental pay points in the Nurses Award.

Question 10 for all parties: Does any party seek changes to the incremental pay points in the SCHADS Award?

13. The ANMF does not seek any changes to the incremental pay points in the SCHADS Award.

Question 11 for all parties: Does any party wish to present any further evidence and/or make any further submissions in addition to the evidence and submissions already before the Full Bench in Stage 1 in relation to this issue [Principles underlying classification structures]?

14. If there is a contest in relation to the principles concerning establishing an appropriate classification structure, or the application of those principles in this case, the ANMF would seek to have an opportunity of making further submission, evidence, or both, depending on the positions advanced by other parties.

Question 12 for all parties: Does the above discussion accurately summarise the parties' positions on whether there should be a separate classification structure for PCWs in the Aged Care Award?

15. The ANMF agrees that **BD10 [96]–[104]** accurately summarise the parties' positions on whether there should be a separate classification structure for PCWs in the Aged Care Award. It is further noted that the submissions identified in **BD10 [96]** at the second–fifth, eighth and ninth dot-points are the Joint Employers', not the ANMF's.

Question 13 for all parties: Would any such separate classification structure include only PCWs and RAOs?

16. Yes, a separate classification structure for PCWs (or direct care employees) as proposed by the ANMF would include only PCWs and RAOs.

Question 14 for all parties: Does any party wish to present any further evidence and/or make any further submissions in relation to this issue [Separate classification structure for PCWs]?

17. If the issue of a separate classification structure for PCWs (or direct care employees) remains contested, the ANMF may wish to present further evidence and make further submissions.

Question 17 for the ANMF and Joint Employers: What evidence currently before the Full Bench is relied upon to support the claim that a separate classification structure should be established for PCWs?

18. As the ANMF has previously submitted, if there is to be a difference in wages between PCWs (or direct care employees) and other workers, then a separate classification structure is an “*obvious drafting technique*.”¹
19. As for evidence, the evidence of lay witnesses about the duties of various roles is summarised in O’Neill DP’s Report to the Full Bench of 20 June 2022 with respect to:
- (1) administrative staff at section C.2.10;
 - (2) kitchen staff in residential care at section C.2.11;
 - (3) laundry staff at section C.2.12;
 - (4) property maintenance staff at section C.2.13;
 - (5) cleaning staff in residential care at section C.2.14;
 - (6) PCWs at section C.2.5.
20. As is apparent from those sections, the work of PCWs in residential care is qualitatively different from the work done by other workers under the Aged Care Award. A separate classification structure which is crafted so as to have regard to the differences in work will assist in classification and career progression.

Question 18 for all parties: Are any parties proposing any changes to the classification structure in the Aged Care Award for indirect care workers?

21. The ANMF does not propose any changes to the classification structure in the Aged Care Award for indirect care workers.

¹ ANMF’s submissions of 21 October 2021 at [209], submissions of 22 July 2022 at [873].

Question 19 for all parties: Does the above discussion accurately summarise the parties' positions on whether there should be a separate classification of Senior PCW (Aged Care employee level 5) in the Aged Care Award or, alternatively, an allowance provided?

22. The ANMF agrees that the discussion at **BD10 [105]–[110]** accurately summarises the parties' positions on whether there should be a separate classification of Senior PCW (Aged Care employee level 5) in the Aged Care Award.

Question 20 for all parties: Does any party wish to present any further evidence and/or make any further submissions in addition to the evidence and submissions already before the Full Bench in Stage 1 in relation to this issue [Senior PCW (Aged Care employee level 5) – allowance or separate classification]?

23. If the issue of whether there should be a Senior PCW (Aged Care employee level 5) – allowance or separate classification remains contested, the ANMF may wish to present further evidence and make further submissions.

Question 21 for the ANMF: Does the ANMF maintain their objection to the HSU application to amend the classification description at Aged care employee level 5?

24. The ANMF accepts that there is merit in amending the classification description for a Senior Personal Care Worker at Grade 4 (aligned with level 5) to recognise their role in assisting residents with the self-administration of medication. Accordingly, the ANMF now seeks that the Grade 4 – Senior Personal Care Worker include the following additional classification description:

“may be required to assist residents with self-administration of medication and hold a relevant unit(s) of competency”.

25. This differs from the HSU proposal in that it recognises the appropriate limits of the role of a PCW as assisting with self-administration of medication, and would omit the reference to a specific unit of competency.

Question 22 for the ANMF and HSU: What evidence currently before the Full Bench is relied upon in relation to this claim [Senior PCW (Aged Care employee level 5/ grade 4)]?

26. As identified in the Report to the Full Bench at [442], there was extensive evidence given in chief and in cross-examination about the administration of medication, including the level of authority, the processes involved, and the challenges and complexity involved. This evidence is further summarised and considered at section

D.5.3.5 of the Report to the Full Bench. Additional evidence regarding assisting residents with the self-administration of medication (and identifying the relevance of this evidence to work value) is also identified in the Closing Submissions of the ANMF, dated 22 July 2022 at [463] to [477].

Question 25 for all parties: Does the above discussion accurately summarise the parties' positions on the appropriate level of a Specialist PCW?

27. In terms of **BD10 [114]**, the HSU also proposes to insert "*the responsibility for leading and/or supervising the work of others*" at level 6. This, too, would provide for a realignment down from level 7 to level 6 for PCWs with supervisory responsibilities.
28. In terms of **BD10 [116]**, the observations set out there have been attributed to counsel for the ANMF, but appear to have been made by counsel for the HSU.
29. As addressed further below, the ANMF now seek the inclusion of a Grade 4A – Specialist Personal Care Worker (aligned with level 6), as set out in Schedule A to these submissions.
30. Save for those matters, the ANMF agrees that the discussion at **BD10 [111]–[121]** accurately summarises the parties' positions on the proper alignment of a Specialist Personal Care Worker classification.

Question 26 for all parties: Does any party wish to present any further evidence and/or make any further submissions in addition to the evidence and submissions already before the Full Bench in Stage 1 in relation to this issue [Specialist PCW – classification or allowance]?

31. The ANMF may wish to present further evidence and make further submissions in relation to the proper alignment of a Specialist Personal Care Worker classification and/or the question of an allowance, should this issue be contested.

Question 27 for the HSU and ANMF: Is it now agreed between the Unions that the Specialist PCW classification claim sits at Aged Care employee level 7?

32. The ANMF now agrees that alignment with level 6 of a new classification of Grade 4A – Specialist Personal Care Worker is necessary for PCWs who may require relevant skills training or experience in Dementia Care or Palliative Care. However, to avoid the risk of employees being re-aligned down from Grade 5 (level 7) to Grade 4A (level 6), the classification descriptors at Grade 4A (level 6) would not include a descriptor

that such an employee “*may have the responsibility for leading and/or supervising the work of others*” or “*may require formal qualifications at ... Certificate IV...*”

Question 30 for the ANMF and the Joint Employers: Does the ANMF or Joint Employers have a response to the HSU claim that there should be a classification for a PCW Supervisor?

33. The ANMF now accepts that it is necessary to identify the Grade 5 classification (aligned with level 7) as a “Personal Care Supervisor”. This reflects the fact that the classification descriptors at this level already identify that such an employee “*may supervise the work of others, including work allocation, rostering and guidance*”.

Question 32 to all parties: Does the above discussion accurately summarise the parties’ positions on whether a Specialist PCW level should include PCWs who have undertaken training in the Household Model of Care?

34. The ANMF agrees that **BD10 [122]–[126]** accurately summarises the other parties’ positions on this issue.
35. The issue for the Commission will be whether it is satisfied that the HSU’s proposed reference to Household Model of Care is necessary to achieve the modern awards objective.

Question 33 to all parties: Does any party wish to present any further evidence and/or make any further submissions in relation to this issue [Specialist PCW – inclusion of Household Model of Care]?

36. The ANMF reserves its position to present further evidence and make further submissions in relation to the whether a Specialist PCW level should include reference to Household Model of Care.

Question 34 for all parties: Does any party wish to present any further evidence and/or make any further submissions in addition to the evidence and submissions already before the Full Bench in Stage 1 in relation to this issue [Difference between AINs under the Nurses Award and PCWs under the Aged Care Award]?

37. The ANMF does wish to make further submissions in respect of this issue, and may also present further evidence depending on the position of other parties.

Question 35 for all parties: Do the parties agree that AINs and PCWs perform functionally the same role? Are there differences in skills or qualifications acquired by the respective employees?

38. The ANMF agrees with the summary of this issue as set out at **BD10 [127]–[152]**, including as to how this matter was addressed during the award modernisation process.
39. The ANMF’s position is and has been that the work value of AINs and PCWs is the same. This means that the ANMF agrees that no material difference in the skills or qualifications acquired by the respective employees. That does not mean, however, that the roles are functionally the same.
40. In particular, the work of an AIN is immediately referable to a registered nurse in circumstances where pursuant to the definition of “Nursing Assistant” at Schedule A.1 to the *Nurses Award 2020*:
- (1) they are under the direct control and supervision of an RN; and
 - (2) their employment is solely to assist an RN.
41. Further, there are issues about career progression and “*professional identity*” about which the ANMF has foreshadowed submissions and evidence (amongst other things) should this present as an issue.²

Question 36 for all parties: Should the classification structure and minimum wages for AINs in the Nurses Award and PCWs in the Aged Care Award be aligned and/or consolidated? If so, how? If not, what is the basis for maintaining a different classification structure and minimum wages for AINs and PCWs?

42. The ANMF adheres to the position identified in its submissions, dated 30 August 2022, that AINs and PCWs should not be consolidated in the Aged Care Award. No party has sought this. It has been considered before, and not done. The issues identified in the ANMF’s answer to question 38 below also apply to any prospect of consolidation of AINs and PCWs. If consolidation were to present as an issue, it is not clear why the Aged Care Award would be the appropriate location for consolidation, rather than the Nurses Award.
43. Whilst it is acknowledged that there are some inconsistencies in the alignment of AIN and PCW classifications, the concerns raised by parties in the award modernisation

² See ANMF’s submissions dated 30 August 2022 at [31]–[45].

process about this have not come to fruition. The separate classification structures for AINs and PCWs should be retained. In any case, it is possible to align pay levels without consolidation. These classification structures should be retained for the same reasons that these were adopted in the award modernisation process (and possibly others) which the ANMF would address in evidence and submissions if this were to remain an issue.

44. Following the Sydney round of hearings in this matter on 1 September 2022, the ANMF understood that the alignment or consolidation of classifications was not an issue any party was currently agitating. As per the exchange on 1 September 2022 identified at [155], it was proposed that parties would have an opportunity to address this in due course, “*probably following some sort of conference process.*” As identified in the submissions of 30 August 2022, this is an issue about which the ANMF cares deeply and about which it will present further evidence and make any further submissions should it be a live issue.

Question 37 for all parties: Does any party support moving the nursing classifications of such employees engaged in the aged care industry from the Nurses Award into the Aged Care Award?

45. The ANMF does not support moving the nursing classifications of such employees engaged in the aged care industry from the Nurses Award into the Aged Care Award. In fact, it would oppose this with just as much vigour as the issue raised in question 36, if not more. If any party were to support this course, and if the Commission were to entertain it, the ANMF would seek to advance evidence and submissions.

Question 38 for all parties: If so, how would parties envision the classification and pay structure of aged care nurses resulting from such a move?

46. The Aged Care Award would not be able to properly accommodate aged care nurses. As identified in its submissions of 30 August 2022, the terms of the Nurses Award differ in important ways from the terms contained in the Aged Care Award. Examples of these differences include:

- (1) split or broken shifts are not permissible under the Nurses Award (see clause 13.1(i)), but they are under the Aged Care Award (see clause 22.8);

- (2) persons classified under the Nurses Award are entitled to an additional week of annual leave (see clause 22.2(a)), whereas persons classified under the Aged Care Award are not (see clause 28.1));
 - (3) there is pay loading for recall within a rest break under the Nurses Award (clause 13.4), but not under the Aged Care Award (clause 22.4);
 - (4) an on-call allowance is payable under the Nurses Award (clause 17.2(a), see also clause 19(b) for recall payments), but not under the Aged Care Award;
 - (5) the shiftwork loadings are higher under the Nurses Award (clause 20.2) than they are under the Aged Care Award (clause 26.1);
 - (6) public holiday rates are higher under the Nurses Award (clause 28.2) than they are under the Aged Care Award (clause 29.2);
 - (7) disabled employees are entitled to full rates under the Nurses Award, but are subject to a Supported Wage System framework under the Aged Care Award;
 - (8) employees undergoing training are entitled to full rates under the Nurses Award, but are subject to a training wage under the Aged Care Award.
47. The Aged Care Award was not made to cover, and has never covered nurses or aged care nurses. Its terms were not and are not directed towards providing a safety net of terms and conditions for nurses or aged care nurses. By contrast, the industrial terms and conditions applicable to nurses in Australia, including aged care nurses, has evolved as the product of decades of industrial arbitration and as now reflected in the Nurses Award. Consequently, those terms are directed to fair and relevant terms and conditions for nurses, including aged care nurses.
48. If any party were to raise this as an issue, and/or if the Commission were to give it serious consideration, the ANMF would seek a full opportunity of putting on evidence and submissions.

Question 39 for all parties: Should the key classification for the purposes of the C10 Metals Framework Alignment Approach in the Aged Care Award be Aged care employee—level 4?

49. For the reasons addressed below with respect to question 40, it is submitted that the key classification for the purposes of the C10 Metals Framework Alignment Approach in

the Nurses Award should be a RN, level 1, pay point 1. Thereafter, existing internal relativities in the Nurses Award should be retained.

50. The Commission would then align the classification of “*Nursing Assistant – aged care employees- Experienced (the holder of a relevant certificate III qualification)*” with the classification of “*Aged care employee—direct care—level 4*” (proposed Grade 3 – Personal Care Worker (qualified)) under the Aged Care Award (also the holder of a relevant certificate III qualification).
51. Such an approach would properly recognise the work value of classifications under the Aged Care Award.

Question 40 for all parties: Should the key classification for the purposes of the C10 Metals Framework Alignment Approach in the Nurses Award be Nursing Assistant, Experienced (the holder of a relevant certificate III qualification)?

52. The ANMF accepts the proposition identified by the Full Bench at [952] of the Interim Decision, namely that the qualifications required for a particular role will usually be relevant to the task of assessing the level of skill exercised by an employee and thereby “*work value reasons.*” The ANMF agrees with the proposition identified by the Full Bench at [955] that the comparison between the C10 Metals Framework and the Nurses Award discloses an anomaly.
53. The ANMF understands the “*provisional view*” expressed in Interim Decision [955] to have been that there is considerable merit in realigning classifications (possibly even a provisional view that RN, level 1, pay point 1 under the Nurses Award should align with classification C1(a) under the Metals Framework). The ANMF also understands the effect of [955] to [956] to have been that the Full Bench had decided not so to align in stage 1 of these proceedings (*i.e.*, “*in this decision*”), because it would be necessary to afford other parties procedural fairness.
54. It is submitted that the Full Bench should give effect to that provisional view in stage 3 of these proceedings. Interested parties may be heard as part of stage 3, so as to afford procedural fairness.
55. At [956], the Full Bench suggests that to give effect to that provisional view in stage 3 would have implications for nurses and their employers in other sectors. A decision to realign the classification rates of aged-care nurses in the Nurses Award may ultimately

flow through to nurses and their employers in other sectors. The ANMF will shortly make an application with respect to the work value for employees covered by the Nurses Award, working outside of aged care. Its submission there, consistently with its submission here (acknowledging that this has not always been its submission) will be that the Commission would align the classification of RN, level 1, pay point 1 with classification C1(a) under the Metals Framework.

56. The Full Bench (fairly) noted that the ANMF's support for alignment of RN level 1 pay point 1 with classification C1(a) had been equivocal ([946]–[950] of the Interim Decision). However, its support is now not equivocal. It agrees with the Joint Employers that that alignment should occur. Other affected parties (if any) may be given the procedural fairness the Full Bench (again right) said would be required, as part of this stage 3.

Question 41 for all parties: Should the key classification for the purposes of the C10 Metals Framework Alignment Approach in the SCHADS Award be Home Care Employee Level 3?

57. The ANMF does not have a position on the appropriate key classification for the purposes of the C10 Metals Framework Alignment Approach in the SCHADS Award.

Question 42 for all parties: Is it appropriate to benchmark a different or an additional key classification contained in the Manufacturing and Associated Industries and Occupations Award 2020?

58. The ANMF submits, for reasons given above, that the key classification for the Nurses Award should be an RN, level 1, pay point 1 benchmarked to C1(a) under the Metals Framework. It may wish to present further submissions and/or evidence on this issue, depending on the positions taken by other parties.

Question 43 for all parties: Do parties agree with the provisional view expressed at paragraph [955] of the Stage 1 decision not to realign the rates in the Nurses Award to the C10 in these proceedings as proposed by the Joint Employers?

59. As identified above at question 40, the ANMF does not read the provisional view at [955] of the Interim Decision in the same way as it is framed in this question. The view in fact expressed was that there was considerable merit in such a re-alignment, but that it would not be done as part of "this decision."

60. For the reasons identified above at question 40, the ANMF's position is that RN, level 1, pay point 1 should be aligned with classification C1(a) under the Metals Framework, as the Joint Employers appeared to contemplate.

Question 44 for all parties: What changes, if any, are sought to the existing internal relativities of classifications in the Aged Care, Nurses, and/or SCHADS Awards?

61. The ANMF does not seek any changes, to the existing internal relativities of classifications in the Aged Care, Nurses, and/or SCHADS Awards.

Question 45 for all parties: Do parties propose any re-alignment between rates external to the relevant awards, considering the C10 Metals Framework Alignment Approach and AQF?

62. As identified at questions 39, 40 and 43 above, the ANMF proposes that:
- (1) rates in the Nurses Award at RN, level 1, pay point 1 be realigned to C1(a) under the Metals Framework; and
 - (2) rates in the Aged Care Award at the classification of "*Aged care employee-direct care-level 4*" (proposed Grade 3 – Personal Care Worker (qualified)) under the Aged Care Award be aligned to the classification of Nursing Assistant - aged care employees – Experienced".

Question 46 for all parties: Parties are invited to comment on what extent there is evidence currently before the Full Bench suggesting that HCWs work across multiple sectors and with clients with multiple care needs (aged care and disability care).

63. The ANMF's evidence does not address the issue of HCWs working across multiple sectors and with clients with multiple care needs (aged care and disability care).

Question 47 for all parties: If a separate classification structure is created for home aged care workers, how will this apply to HCWs who work with both aged persons and people with a disability or who also work in the social and community services sector?

64. The ANMF does not have a position on how a separate classification structure for home aged care workers would apply to HCWs who work with both aged persons and people with a disability or who also work in the social and community services sector.

Question 48 for all parties: Does any party consider that there should be any changes to the classification structure to take account of any differences between the home care and residential care settings?

65. The ANMF does not consider that there should be any changes to the classification structure to take account of any differences between the home care and residential care settings.

Question 49 for all parties: does any party wish to file additional submissions and/or evidence in addition to the evidence and submissions already before the Full Bench in Stage 1 in relation to indirect care employees?

66. The ANMF does not wish to file additional submissions and/or evidence in addition to the evidence and submissions already before the Full Bench in Stage 1 in relation to indirect care employees.

Question 50 for all parties: does any party wish to file additional submissions and/or evidence in addition to the evidence and submissions already before the Full Bench in Stage 1 in relation to whether a further increase is justified on work value reasons for direct care workers?

67. The ANMF does wish to file further submissions in relation to whether a further increase is justified on work value reasons for direct care workers. It would seek to file additional evidence, at least relating to the impact of the COVID-19 pandemic and the issues arising from understaffing.

J C McKenna

J E Hartley

Counsel for the ANMF

7 March 2023

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Gordon Legal

Solicitors for the ANMF

SCHEDULE A

Grade 4A – Specialist Personal Care Worker [aligned with level 6]

An employee at this grade:

- is capable of functioning with a high level of autonomy, and prioritising their work within established policies, guidelines and procedures;
- is responsible for work performed with a substantial level of accountability and responsibility;
- works either individually or in a team;
- may assist with supervision of others;
- may require comprehensive computer knowledge or be required to use a computer on a regular basis;
- possesses administrative skills and problem solving abilities;
- possesses well developed communication, interpersonal and/or arithmetic skills;
- requires substantial on-the-job training, may require formal qualifications at trade or certificate level and/or relevant skills training or experience; and
- may require relevant skills training or experience in Dementia Care or Palliative Care.

Grade 5 – Personal Care Supervisor [aligned with level 7]

An employee at this grade:

- is capable of functioning autonomously, and prioritising their work and the work of others within established policies, guidelines and procedures;
- is responsible for work performed with a substantial level of accountability and responsibility;
- may supervise the work of others, including work allocation, rostering and guidance;
- works either individually or in a team;
- may require comprehensive computer knowledge or be required to use a computer on a regular basis;
- possesses developed administrative skills and problem solving abilities;
- possesses well developed communication, interpersonal and/or arithmetic skills; and
- may require formal qualifications at Certificate IV level and/or relevant skills training or experience.