



Evidence into Action Whitepaper Series:

4: The right qualifications, skills and competencies, for delivering high-quality aged care

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Introduction

Aged care regulatory requirements for competence, skills and training

Australia's aged care sector is undergoing major reform with the commencement of the Aged Care Act 2024 and the Strengthened Quality Standards in November 2025. Central to these reforms is the recognition that safe, high-quality care depends on a skilled and competent workforce. Persistent shortages of registered nurses (RNs), enrolled nurses (ENs), and personal care workers (PCWs), coupled with variable training quality, highlight the need for a coherent sector strategy to ensure staff possess the right skills in the right settings. Worker skills, competencies, qualifications, and continuing professional development (CPD) are not only levers for workforce sustainability but they are also compliance obligations tied directly to governance and service delivery. [1]

The Act, [25] Rules [26] and Standards [2] now embed these obligations in law. The Aged Care Rules 2025 make training and competence requirements a condition of provider registration, extending accountability to boards and responsible persons.

The Strengthened Quality Standards detail how this must be achieved:

- Standard 2.8 requires providers to identify the skills, qualifications, and competencies required for each role through workforce planning,
- Standard 2.9 requires systems for training, competence assessment, and regular refreshers.
- Clause 2.9.6 goes further, mandating competency-based training for all aged care workers in core areas such as:
 - o Person-centred care
 - o Rights-based care
 - o Culturally safe
 - o Trauma-aware practice
 - o Dementia care
 - o Medical emergencies
 - o Overall compliance with the Statement of Rights, Code of Conduct, Serious Incident Response Scheme (SIRS), Work Health & Safety (WHS) and the Quality Standards themselves. [2]

Together, these aged care reforms signal a shift where competencies, qualifications, and training are no longer optional but core compliance conditions, designed to safeguard quality and sustain a capable workforce.

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Defining the issues in the aged care workforce

Personal Care Workers (PCWs)

The aged care workforce is powered by personal care workers (PCWs), who deliver more than 70% of direct care. [27] Yet many PCWs enter the sector with limited preparation for the complex realities of aged care. [3] Provider concerns about training quality for care workers remain significant: a national review by Australian Skills Quality Authority (ASQA) [5] found that some Certificate III programs were delivered in less than 200 hours, far short of the 1,200 hours recommended under Australian Qualifications Framework (AQF) benchmarks, and that most Registered Training Organisations (RTOs) were initially non-compliant. Personal care workers also face structural disadvantages, with no mandated minimum qualifications or CPD despite carrying high levels of responsibility. [5]

The Governments proposed professional registration (consultation) of PCWs would be a turning point, requiring all workers to hold at least a mandatory qualification of a Certificate III in Individual Support, with strengthened training in dementia, palliative care, cultural safety, trauma-informed care, and elder abuse recognition. By linking registration to training and Continuing Professional Development (CPD), the reform would lift PCW professional standing, value frontline staff more visibly, and create a culture of continuous learning in an often-undervalued workforce while ensuring workers have minimum-level knowledge and skills in the delivery of safe and high-quality care.

“Training is critical in supporting the professionalisation of workers”[*]

Nurses

Nurses - registered and enrolled - also face persistent challenges. An independent review of nursing education found inconsistencies in placement hours, variable supervision, and limited exposure to digital health technologies, raising concerns about graduate readiness for modern care. [6] Yet Registered Nurses (RNs) remain essential: they provide clinical oversight, uphold safe skill mix, and drive care quality, especially in residential settings. Shortages, however, are acute - particularly in regional and remote areas where recruitment and retention pressures are most severe. [7]

Unlike PCWs, RNs already practise under a regulated framework: the Nursing and Midwifery Board of Australia requires ongoing registration, at least 20 hours of CPD annually, and compliance with recency of practice, worker screening, and professional conduct standards. [8] The Australian College of Nursing has gone further, calling for graduate certificate-level preparation for RNs in aged care to strengthen leadership and clinical governance capacity. [9] These measures show how professionalisation (factors that work to create a professional identity), when coupled with CPD, can secure stronger capability and inspire confidence in the workforce.

Cultural and equity challenges cut across both groups. For Aboriginal and Torres Strait Islander peoples, aged care remains culturally unsafe, requiring training in cultural safety and the development of flexible models of care that reflect community needs. [10] Migrant workers - who are a critical part of the workforce - face persistent barriers to having their skills recognised, including poor recognition of overseas qualifications, limited English proficiency, and labour market discrimination, leading to underutilisation of their potential. [11] Addressing these inequities is central to building a workforce that is not only skilled, but also inclusive, respected, and sustainable for the future.

Skills, competencies and qualifications for aged care

Personal Care Workers

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For PCWs, the absence of nationally recognised competencies has long undermined consistency and quality of training and care delivery. The need to create an agreed set of standard sector wide competencies is an imperative. Building on this, one author has developed ten domains and 66 multidisciplinary competencies that provide a shared framework across health and aged care. These frameworks give educators and providers a practical tool to align PCW training with clear, measurable skill sets. [12]

Table 1: Suggested ten domains by Poulos et al. which contain specific competencies: [12]

Domain	Brief description
Assessment	Competencies in this domain involve understanding normal and abnormal ageing, using a holistic, person-centred approach to assessment that includes informal caregivers where appropriate. Workers can apply validated tools, interpret results, and recognise the role of other disciplines in the assessment process.
Care planning and coordination	Competencies involve person-centred care planning and coordination, including end-of-life care. Workers understand the importance of coordination across the care spectrum and the roles of other disciplines in delivering care.
Care Delivery	Competencies focus on enhancing the care experience for older people, their caregivers, and workers. Central to this is maintaining functional ability through collaborative, person-centred care.
Healthy aging	Competencies promote healthy ageing across the life course through protection, prevention, and promotion. Workers support older people to make healthy choices by providing information, resources, and education.
Communication and interpersonal skills	Competencies ensure quality communication across modalities, respecting individual needs to empower older people, support decision-making, and underpin person-centred care.
Interdisciplinary team care	Competencies promote an interdisciplinary team approach that optimises care, quality of life, and functional ability. Workers value coordination, understanding group dynamics, and respect the skills and knowledge of other disciplines
Health and aged care systems and policy	Competencies support sustainable, continuously improving care systems that enable older people, families, caregivers, and staff to deliver or receive care in the most appropriate and effective setting.
Safety and quality	Competencies ensure safe, high-quality care that promotes the best outcomes for older people, caregivers, and workers. They require recognising and managing risks while protecting dignity and quality of life
Professional skills /	Competencies promote personal and professional development, with accountability for care. Workers who embrace evidence-based practice

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practices professionally	and ongoing learning contribute to quality care.
Leadership	Competencies enhance the care experience by promoting a vision for high-quality care. Leaders inspire and motivate by advocating a positive view of ageing and older people's care

With professionalisation of PCWs now firmly on the horizon the proposed registration of PCWs would mandate a Certificate III in Individual Support, with expanded content in dementia, palliative care, cultural safety, trauma-informed care, and elder abuse recognition. Importantly, it would also link registration to CPD. This reform would do more than regulate entry standards - it would affirm PCWs as professionals, create career pathways, and embed lifelong learning at the heart of the role. [5]

- **Recommendation:** *Providers should mandate minimum qualifications for PCWs with CPD requirements*

Nurses

For nurses, competency frameworks are equally critical A study undertaken by/in XXX identified eleven gerontological nursing competencies designed for residential and community aged care, spanning clinical leadership, governance, and digital readiness. [13] These complement broader frameworks such as those proposed by other researchers in this area, helping to define the specific expertise needed for nurses in aged care. [12]

Professional bodies have called for higher minimum qualifications to reflect this complexity. The Australian College of Nursing recommended Certificate IV for unregulated workers (such as XXX), a Diploma or higher for ENs, and graduate certificate-level preparation for RNs in aged care. These recommendations reflect strong evidence that a higher skill mix improves quality outcomes. [9] documented persistent weaknesses in clinical placements - from inconsistent supervision to limited exposure to aged care practice - which risk leaving graduates underprepared.

- **Recommendation:** *A nationally consistent, competency-based approach to placements would give nurses the confidence and capability to meet aged care's unique challenges.*

Organisational aged care governance and oversight

Competence is no longer just a matter for educators or individuals - it is a governance obligation. The AICD's 'Director's Guide to Governing for Quality Aged Care' [1] identifies workforce skills, qualifications, and training as core responsibilities of boards. The Strengthened Quality Standards [2] reinforce this, requiring providers to map role-specific competencies (Standard 2.8) and ensure regular, competency-based training and assessment (Standard 2.9). Together, these reforms send a clear message: building and sustaining competence is not optional - it is essential to delivering safe, high-quality care.

Continuing professional development (CPD) and workforce retention in aged care

Ongoing learning is at the heart of a capable and confident aged care workforce.

Continuing professional development (CPD) is consistently shown to improve staff knowledge, competence, and resident outcomes. A systematic review confirmed CPD's effectiveness in the long-term care workforce,

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though barriers remain, including low digital literacy and limited access to structured career pathways. [15] A review into education models demonstrated how targeted education packages can build PCW confidence and skills in dementia, palliative, and oral care. [3] Yet significant gaps remain between what workers need and what they are offered, with PCWs in residential care, reporting high levels of unmet educational needs. [16] When considering the skills of leaders, one review highlighted, the lack of professional development for aged care managers, particularly in governance and workforce stewardship. [17]

- **Recommendation:** *CPD and training is not just for direct care workers but for leaders, managers and directors to ensure they have the right skills and knowledge to deliver effective organisation change and support*

Retention is strengthened when workers can see a future for themselves. Career pathways, structured progression, and thoughtful workforce planning give staff reasons to remain in the sector and aspire to higher roles. With a state-based case study noting the absence of sustainable career routes in WA, [18] and an integrative review finding that specialised nursing career frameworks enhanced professional identity and sustained CPD but are still largely missing in aged care. [19]

The urgency is clear: HumanAbility [20] projects 21% growth in care worker demand by 2034, with digital capability and AI integration shaping future needs. Another case study stressed that job design and learning pathways directly affect both retention and care quality, [21] another study focusing on home care, showed how competency-based training allows home care aides to feel integrated into care teams. [22] Governance and culture matter too: A report suggesting the strategic focus of the workforce called for targeted retention planning, [7] and the Productivity Commission argued that reforms must prioritise training, protection, and retention over structural mandates. [23]

- **Recommendation:** *Investing in CPD and career development is not simply about meeting standards - it is about creating workplaces where staff feel valued, supported, and motivated to remain*

Preceptorship, recognition of prior learning, and articulation pathways

Supporting staff to grow in their roles is central to sustaining a confident and capable aged care workforce.

Effective preceptorship (where an experienced professional ‘the preceptor’ guides a new or less experienced person ‘the preceptee’) and supervision give students and new graduates the guidance they need to thrive, yet long-standing gaps remain. An independent review into nursing identified weaknesses in nursing supervision, [6] industry discussion paper found inconsistencies in VET placements, underscoring the need for clear national frameworks. [14] Recognition of Prior Learning (RPL) offers an important opportunity to value the skills staff already bring, but inconsistencies in implementation create barriers. SkillsIQ noted that RPL and credit transfer remain uneven, [24] while CEDA highlighted how poor recognition of overseas qualifications leaves migrant workers’ talents underutilised. [11] Addressing these barriers is key to creating an inclusive system where every worker feels their contribution is acknowledged and valued.

- **Recommendation:** *Ensure staff supervision is incorporated at all levels across all roles from induction to ongoing role development*

Looking ahead, building sustainable pathways for growth is just as important as fixing current gaps. HumanAbility emphasised the need for national skills mapping to forecast future demand, particularly in digital capability and AI readiness. [20] Australian multidisciplinary competency frameworks can serve as a foundation for future learning design. [12] Career frameworks show that structured planning fosters professional identity and retention. [18-19] Importantly, the need for clearer articulation pathways - so that staff

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can build qualifications step by step, from Certificate III PCW through to Diploma-level EN and Bachelor-level RN.^[5] Embedding articulation into aged care training would not only improve retention but also empower staff to see themselves as part of a profession with clear, inspiring career ladders, aligned with the wider health system.

Conclusion

Ensuring that staff have the right skills in the right settings is central to achieving the aims of the Aged Care Act 2024 and Strengthened Quality Standards. The evidence base highlights consistent themes: the need for nationally defined competencies, minimum qualifications, accessible CPD, and structured career pathways. Equally important are governance accountability, cultural safety, and the integration of digital and technological competencies. Providers, policymakers, and educators must act together to embed these elements into the system.

Recommendations for aged care providers to support increased workforce skills and competencies:

1. Embed digital and gerontological competencies across all aged care roles
2. Mandate minimum qualifications for PCWs with CPD requirements
3. Standardise and resource work placements with quality supervision
4. Create structured national career pathways for PCWs, ENs, and RNs
5. Expand culturally safe and migrant-inclusive training programs
6. Invest in leadership development for aged care managers.

Summary

- **Training as a compliance obligation:** *The Aged Care Act 2024, Rules 2025, and Strengthened Quality Standards embed workforce planning, competency-based training, and Continuing Professional Development (CPD) as legal requirements, making skills and qualifications central to safe, high-quality care.*
- **Professionalisation of Personal Care Workers (PCWs) and nurses:** *Reforms propose mandatory qualifications and CPD for PCWs, while nurses face calls for higher minimum qualifications, stronger clinical placements, and defined gerontological competencies to ensure capability and retention.*
- **Equity, culture, and future skills:** *Addressing cultural safety, migrant workforce barriers, and emerging digital and (Artificial Intelligence) AI capabilities is critical to creating an inclusive, future-ready aged care workforce.*
- **Governance and career pathways:** *Providers and boards are accountable for workforce competence. Building structured supervision, career ladders, and leadership development will strengthen retention and create sustainable, professionalised career pathways across the sector.*

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