

# ARIIA First Nations Aged Care Workforce Capability Roundtable

Yitpi Yartapuultiku / Tarndanya (Adelaide): Tuesday 5 May 2026

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## Summary

The ARIIA First Nations Aged Care Workforce Capability Roundtable brought together community leaders, service providers, researchers and government representatives to identify practical ways to strengthen aged care workforce capability for First Nations Elders and communities. The discussion reinforced that culturally safe, community-led and First Nations-led models of care are central to improving access, trust and outcomes. Stakeholders highlighted major workforce challenges, including recruitment and retention pressures, limited culturally safe training pathways, high turnover, and the need to better recognise lived experience, cultural knowledge and local community roles.

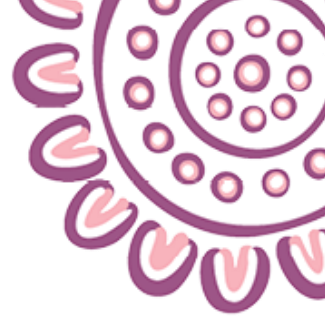
Participants also identified systemic barriers that limit effective service delivery, including inflexible funding, administrative burden, mistrust of mainstream systems, policy settings that do not reflect community realities, and gaps in rural and remote support. The Roundtable identified clear opportunities for ARIIA to act as an ally and system enabler by sharing evidence, supporting knowledge exchange, convening partnerships, documenting what works, and helping translate First Nations-led practice into practical workforce and service improvement. ARIIA's strongest role is not to lead or duplicate community work, but to connect, amplify and support existing First Nations-led efforts through evidence, innovation, collaboration and implementation support.

## Key themes

### 1. Culturally safe, community-led models of care

A central theme was that culturally grounded, First Nations-led models of care are the most effective in meeting the needs of Elders and communities. These models are holistic, place-based, and built on trust, relationships, and shared decision-making, often extending beyond formal service boundaries to respond to community realities. Mainstream models frequently fail to align with cultural expectations, contributing to delayed access and unmet need. Flexible funding, improved use of culturally knowledgeable staff, and better evaluation and sharing of what works were identified as critical enablers to strengthen these approaches.





## **2. Workforce capability and sustainability**

Workforce challenges - including staff shortages, high turnover, and limited access to culturally safe training - are significantly affecting service delivery. There is a strong need to build and retain a local First Nations workforce, recognising lived experience, cultural obligations, and community connections as core capabilities. Training systems require reform to move beyond clinical models and incorporate culturally safe, mentoring-based, and flexible approaches. Sustainable workforce development also depends on addressing structural issues such as career pathways, remuneration, and workforce support mechanisms.

## **3. Systemic barriers and structural challenges**

Stakeholders identified persistent system-level constraints that limit effective care and workforce development, including fragmented funding, high administrative burden, and regulatory frameworks that do not align with First Nations ways of working. These challenges are compounded by underinvestment, inequities in rural and remote areas, and policy settings that constrain ACCOs and smaller providers. A lack of trust - driven by repeated consultation without action, deficit-based approaches, and limited transparency - continues to undermine system effectiveness, alongside broader power imbalances in decision-making and implementation.

## **4. Priorities for reform and innovation**

Clear priorities for reform include strengthening ACCHO-led services, embedding First Nations leadership in decision-making, improving culturally safe care across providers, and investing in workforce development and transition support. Innovation opportunities focus on leveraging technology and AI, improving data use and visibility of community needs, protecting data sovereignty, and learning from successful models of care. There is also strong emphasis on better collaboration, knowledge sharing, and building evidence to inform more effective and sustainable system change.

## **5. Collaboration and knowledge sharing**

The importance of sustained collaboration across the sector was strongly emphasised, including partnerships between First Nations organisations and mainstream providers. Stakeholders highlighted the need for practical, implementation-focused support and platforms that enable peer learning, exchange of knowledge, and sharing of successful local innovations. Avoiding duplication and building on existing work were key principles, with a clear call for mechanisms - such as communities of practice - to support ongoing connection, coordination, and dissemination of best practice across the sector.





## Introduction and purpose

ARIIA's remit is to support the positive transformation of aged care through strengthening workforce capability and supporting innovation across the sector. Consistent with this remit, the First Nations Aged Care Workforce Capability Roundtable brought together sector stakeholders, including community leaders, service providers, researchers and government representatives. The Roundtable explored current challenges and opportunities for building workforce capability in ways that are culturally grounded and responsive to the needs of First Nations Elders and communities. Stakeholders brought expertise across service delivery in urban, rural and remote settings, workforce development and training, policy, funding and governance. This helped ensure a diverse range of perspectives were shared (see Appendix 1 for stakeholder list).

Building on previous engagement at a [similar roundtable event in 2024](#), this Roundtable represented a continuation of ARIIA's role as an ally for First Nations aged care, seeking to:

- listen to and learn from lived experience and practice;
- identify practical, community-led priorities for workforce development; and
- explore how ARIIA can support existing First Nations-led work without duplicating it.

The discussion reinforced the importance of First Nations leadership, cultural authority and community-defined solutions as central to any future action.



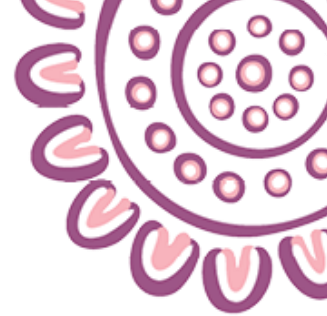
**Image:** Participants of roundtable 2026, rights approved and reserved ARIIA ©.

## Approach and methodology

The Roundtable was held on Kaurna Country at Yitpi Yartapuultiku. It was structured to support both information sharing and yarning combining:

- presentations and knowledge sharing sessions;





- facilitated table discussions;
- whole-group reflection and synthesis; and
- collaborative identification of opportunities and actions.

**The agenda included:**

- overview of ARIIA programs and First Nations initiatives;
- presentations from key sector organisations;
- **structured yarning sessions focused on:**
  - workforce and organisational capability needs;
  - system-level challenges and opportunities; and
  - priorities for ARIIA's future work.

## Key discussion themes

The following is a summary of the themes that arose from the discussions at various yarning tables on the day. They represent an overall summary, not necessarily the viewpoint of every stakeholder present on the day.

### 1. Culturally safe, community-led models of care

A strong and consistent message was that First Nations-led, culturally grounded models of care are most effective in meeting the needs of Elders and communities.

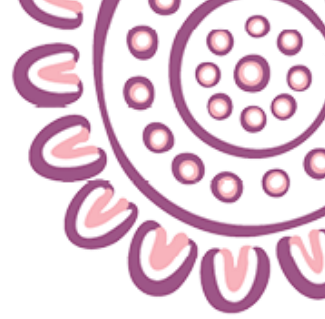
**Stakeholders described these models as:**

- holistic and centred on social, emotional and cultural wellbeing;
- community-centred, place-based and delivered on Country;
- built on inclusion, trust, relationships and shared decision-making; and
- flexible and responsive to community needs.

**There was also a recognition that:**

- mainstream models are often not culturally appropriate;
- generational poverty, trauma and lack of access to other services (housing, education, employment) compound challenges in delivering aged care services for staff and community members;
- communities may access services late due to mistrust or barriers; and
- services frequently operate outside formal scope to meet community need.





**Enablers that were identified in order for services to meet needs included:**

- flexible funding streams (current/new funding structures don't support the delivery of culturally appropriate care services);
- better use of Elder care staff to support clients through the assessment process and help them become eligible for aged care services; and
- Access to technology to support service delivery.

**Gaps identified in knowledge that would further support service delivery included:**

- Services need to be systematically evaluated to understand what works and where the gaps are;
- Success stories need to be shared;
- mapping of the service gaps is needed, including recognition of services acting outside their formal scope to meet unmet needs of the community; and
- documentation of systematic induction processes, including what works.



**Image:** Presenter, roundtable 2026, rights approved and reserved ARIIA ©.

**2. Workforce capability and sustainability**

**Stakeholders identified significant workforce challenges affecting service delivery, including:**

- difficulty attracting and retaining staff;
- high turnover and workforce instability;





- limited access to culturally safe training pathways; and
- lack of recognition of lived experience and community knowledge.

These challenges are made worse by the limited appeal of aged care as a career, particularly for younger people. Stakeholders also noted a lack of clear pathways into training and employment, including limited early engagement with school-aged students.

**There was a strong emphasis on:**

- building a local, skilled workforce;
- supporting “stayers” committed to community care;
- better utilisation of existing workers (i.e. Eldercare workers);
- recognising cultural load and community obligations; and
- creating flexible employment models, including part-time and shared roles.

**Workforce retention was a critical issue, with stakeholders highlighting:**

- the ongoing burden of high turnover requiring constant retraining;
- the importance of appropriate housing, fair remuneration and career progression;
- the need to better support staff through supervision, registration and tailored supports; and
- recognition that local workers balance employment with community roles and responsibilities.

**Training was identified as a key enabler but requires reform to:**

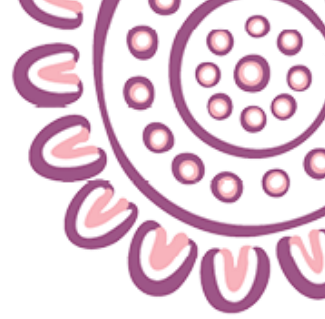
- move beyond a predominantly clinical focus;
- embed cultural safety and trauma-informed approaches;
- provide ongoing, mentoring-based and on-the-job support; and
- be accessible, flexible and locally delivered.

Key gaps include limited baseline capability, low confidence in literacy and numeracy for some workers, and insufficient recognition of lived experience in training pathways. Cultural training is also not valued to the same extent as clinical training, particularly in mainstream settings.

**Culturally safe training approaches were identified as essential, including:**

- aligning cultural training with standards and regulatory expectations;
- delivering flexible models (on-Country, in-person and online);
- enabling participation during paid work time with backfill; and
- incorporating mentoring, shadowing and experiential learning approaches.





### 3. Systemic barriers and structural challenges

The discussions highlighted that system-level constraints continue to limit the effectiveness of workforce and service delivery.

#### Key issues included:

- inflexible and fragmented funding models;
- administrative burden and reporting requirements;
- policy and regulatory settings that do not align with community realities;
- lack of trust between communities, government and mainstream providers; and
- inequities impacting rural and remote services.

These challenges are reinforced by structural funding limitations, including underinvestment across the sector, complex and process-driven funding models, and capped or restricted funding streams (e.g. National Aboriginal and Torres Strait Islander Flexible Aged Care Program - NATSIFAC), which can both enable and constrain service provision. Proposed co-contribution models were also identified as a potential barrier to access for First Nations communities.

#### Stakeholders also emphasised that:

- current systems do not adequately reflect Aboriginal and Torres Strait Islander ways of knowing, being and doing;
- cultural safety is not consistently embedded in service design, regulation or implementation; and
- repeated consultation without visible action has contributed to fatigue and mistrust.

#### Trust was identified as a critical systemic issue, with:

- community mistrust of government and mainstream services driven by deficit-based approaches, fear, and lack of cultural understanding;
- frustration with ongoing consultation processes that do not translate into outcomes; and
- a perception that policy and system design do not adequately anticipate future community needs or support implementation on the ground.

#### Stakeholders also highlighted power imbalances within the system, including:

- limited trust from government in First Nations organisations to lead and implement change;
- policy reforms (including the new Aged Care Act) perceived to disadvantage smaller and community-controlled providers;
- lack of transparency in decision-making processes; and





- a focus on compliance, metrics and documentation that does not align with community priorities and creates significant administrative burden.

**Finally, gaps in system readiness were noted, including:**

- variable capability and experience across First Nations providers entering the sector; and
- limited understanding within mainstream training and service organisations of how to effectively partner with and support ACCOs.



**Image:** Yarning participant, roundtable 2026, rights approved and reserved ARIIA ©.

#### **4. Priorities for reform and innovation**

**Despite the challenges, stakeholders identified clear pathways for change, including:**

- strengthening and expanding ACCHO-led services, including support for organisations seeking to become aged care providers;
- embedding First Nations voices, including Elders, as cultural authorities in decision-making and system design;
- supporting culturally safe care across all providers, with stronger expectations for training, regulation, and accountability;
- improving transition pathways (e.g. hospital to home), ensuring these incorporate cultural as well as clinical needs; and





- investing in workforce development and sector-wide capacity building, including streamlined administrative processes to reduce burden on providers.

**Key innovation opportunities included:**

- use of technology and AI to support service delivery, planning, and workforce capability, including development of communities of practice;
- improved data collection and use to better represent community need, including capturing currently unmeasured or “unmapped” service activity;
- protecting data sovereignty and culturally appropriate data governance;
- learning from existing successful models of care and documenting effective capacity-building approaches to support replication; and
- greater transparency and analysis of system costs, including the downstream health system impacts where aged care needs are unmet.

Additional system and sector priorities included strengthening collaboration and coordination across providers and sectors. This included building more effective partnerships between mainstream services and ACCHOs and fostering collaboration across First Nations organisations. There was also a strong emphasis on avoiding duplication through coordinated efforts, supporting shared learning, and leveraging existing strengths across the sector.

Across workforce and knowledge development, there was a focus on building a skilled local First Nations workforce through culturally safe training, mentoring, and clearer career pathways, alongside fair remuneration and recognition of lived experience. Stakeholders also highlighted the importance of knowledge sharing - creating platforms to disseminate good practice, support peer learning, and enable exchange between service providers. This includes documenting what works in workforce and service delivery and ensuring this knowledge is accessible and actionable to support implementation at scale.

## **5. Collaboration and knowledge sharing**

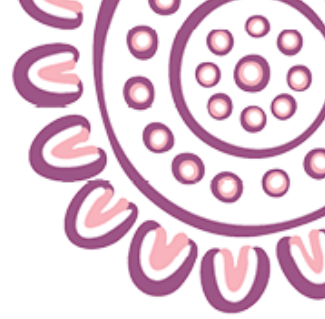
**Stakeholders emphasised the importance of:**

- stronger partnerships between First Nations organisations and mainstream providers;
- peer learning and communities of practice;
- sharing success stories and local innovations; and
- avoiding duplication and building on existing work.

**There was a clear desire for:**

- sustained collaboration;
- practical, implementation-focused support; and





- platforms to share knowledge and experience across the sector.

## **Actions and opportunities for ARIIA**

ARIIA's ongoing role is to work alongside the sector as an ally -- supporting, connecting and amplifying efforts to strengthen the workforce and improve care for First Nations Elders and communities. Throughout the discussions, stakeholders identified a number of ways ARIIA could contribute, consistent with its role as a national knowledge and implementation partner.

### **Immediate opportunities**

- Support the sharing of evidence, resources and successful models of care;
- Facilitate communities of practice across the sector;
- Build partnerships with First Nations organisations and stakeholders; and
- Provide forums for ongoing engagement and collaboration.

### **Research and evidence**

- Map unmet needs and service gaps;
- document what works in culturally safe service delivery and workforce development;
- support research translation and implementation; and
- identify system barriers and opportunities for reform.

### **Workforce capability**

- support culturally safe training and mentoring approaches;
- support pathways for local workforce development; and
- recognise and incorporate lived experience into training and career pathways.

### **Advocacy and System Influence**

- act as an ally for First Nations providers to government;
- amplify community narratives and sector insights; and
- support funding advocacy and partnership development.

#### **These actions align with ARIIA's commitment to:**

- work in partnership with First Nations communities;
- support practical implementation; and
- contribute where it can add value without duplication.

## **Next steps**





Following this Roundtable, ARIIA mapped actions that aligned with its program of work (see *Mapping table 1 below*). The Roundtable outcomes reinforce that ARIIA is not the solution owner, but a system enabler:

- **connecting evidence** → **practice**
- **connecting stakeholders** → **partnerships**
- **translating ideas** → **implementation**

The Roundtable reflections and subsequent mapping exercise position ARIIA's role as complementary rather than duplicative - focused on **enabling, amplifying and connecting** existing First Nations-led activity. The strongest alignment for ARIIA sits in building and sharing the evidence base of "what works" in culturally safe aged care, including documenting practice that occurs outside formal funded models and making this knowledge accessible across the sector. This includes establishing mechanisms such as evidence hubs, facilitating knowledge exchange between providers, and supporting dissemination of best practice to enable adaptation across diverse communities.

ARIIA is also well positioned to play a **convening and enabling role** - bringing together stakeholders, strengthening collaboration, and supporting a shared agenda for workforce capability building. This includes amplifying First Nations-led research, policy and advocacy, and supporting ACCOs through evidence generation and sector-wide influence, while maintaining a clear commitment not to replicate work already being led effectively within communities. In this way, ARIIA's contribution aligns most strongly with system-level functions: coordination, knowledge translation, and capacity building at scale.

Finally, the mapping highlights ARIIA's role in supporting long-term workforce development through **advocacy and program design** that aligns with sector priorities. This includes contributing to evidence-based funding models, supporting initiatives that increase First Nations workforce participation, and embedding culturally safe, community-led approaches into workforce programs. Overall, ARIIA's optimal fit is as a trusted ally and enabler - supporting First Nations leadership, strengthening capability through evidence and innovation, and connecting efforts across the aged care system to deliver more culturally grounded and sustainable outcomes.

This mapping exercise helps ARIIA to inform its next program of work to support First Nations Aged Care workforce capability building. It also identifies where external funding can be sought and partnerships can be forged to ensure this work is progressed.





**Table 1: Mapping of Roundtable Opportunities to ARIIA Roles, Delivery Mechanisms and Strategic Alignment**

Roundtable Theme / Opportunity Area	Specific Opportunity Identified	Alignment to ARIIA Mandate	Delivery Mechanism (Existing / Potential)	Funding / Partnership Pathway	Non-Alignment / Alternative Lead (if applicable)
<b>Culturally safe, First Nations-led models of care</b>	Document and share successful culturally grounded models of care	Strong alignment – knowledge sharing and evidence translation are core ARIIA functions	First Nations Knowledge Hub, Knowledge and Implementation Hub (case studies, toolkits).	Existing program delivery; philanthropic support; government knowledge translation grants	–
	Evaluate what works in First Nations-led care models	Strong alignment – translational research and evaluation	ARIIA Collaborative Grants; research partnerships; consultancy/advisory work	MRFF, NHMRC, DoHDA research funding; co-funded projects with research partners	–
	Scaling culturally safe service delivery models nationally	Partial alignment – ARIIA supports implementation but does not deliver services	Implementation toolkits; workforce capability programs; partnership facilitation	Joint initiatives with providers; grant-funded scaling pilots	NACCHO; State ACCHOs; service providers
<b>Workforce capability and sustainability</b>	Deliver culturally safe workforce training and capability-building programs	Strong alignment – core business	Workforce capability programs; Innovator Training Program; short courses; tailored programs	Existing WCC funding; fee-for-service delivery; government workforce funding	–
	Expand mentoring, placements, and on-the-job learning models	Strong alignment	Knowledge Exchange Visits; Communities of Practice; mentoring frameworks	Existing First Nations program; philanthropic expansion; targeted workforce tenders	–
	Develop career pathways and	Strong alignment	Workforce toolkits; role matrices;	Grants, consultancy	–





Roundtable Theme / Opportunity Area	Specific Opportunity Identified	Alignment to ARIIA Mandate	Delivery Mechanism (Existing / Potential)	Funding / Partnership Pathway	Non-Alignment / Alternative Lead (if applicable)
	progression frameworks		capability frameworks via KIH and programs	services, partnerships with providers	
	Address workforce housing, pay and conditions	No alignment – outside ARIIA remit	N/A	N/A	Department of Health and Aged Care; Fair Work Commission; providers
<b>Training system redesign</b>	Develop culturally safe, flexible, mentoring-based training approaches	Strong alignment	Capability programs; co-designed training modules; KIH resources	Government workforce capability funding; philanthropy; consultancy	–
	Develop accessible, practical learning resources (microlearning, toolkits)	Strong alignment	Knowledge and Implementation Hub (toolkits, microlearning, practice resources)	Internal program expansion; digital development funding	–
	Reform accreditation, VET and training system structures	No alignment – regulatory/system responsibility	N/A	N/A	ASQA; Jobs and Skills Australia; RTO sector
<b>Systemic barriers and funding structures</b>	Map unmet need, service gaps and out-of-scope service delivery	Strong alignment – evidence generation and mapping	Research projects; evidence synthesis; knowledge hub outputs	Research grants; commissioned reports; consultancy	–
	Produce policy-relevant evidence and submissions	Strong alignment (indirect influence)	Evidence briefs; submissions; sector reports	Government engagement; commissioned advisory projects	–
	Reform funding models (e.g.	No alignment – policy decision-making role	N/A	N/A	Department of Health and





Roundtable Theme / Opportunity Area	Specific Opportunity Identified	Alignment to ARIIA Mandate	Delivery Mechanism (Existing / Potential)	Funding / Partnership Pathway	Non-Alignment / Alternative Lead (if applicable)
	NATSIFAC, co-contributions)				Aged Care; NATSIAACC
<b>Trust, partnerships and governance</b>	Facilitate ongoing engagement, convening and collaboration across the sector	Strong alignment – core ARIIA strength	Roundtables; Governance Group; ARIIA Network; Communities of Practice	Existing program delivery; Philanthropic grants; low-cost/high-value core activity	–
	Build two-way knowledge exchange and narrative sharing	Strong alignment	Knowledge hub; events; webinars	Internal programs; philanthropic support for storytelling initiatives	–
<b>Innovation, data and AI</b>	Pilot innovative solutions (e.g. AI-enabled workforce and training tools)	Strong alignment – innovation and incubator role	ACI; incubator/accelerator programs; pilot projects	Government innovation grants; industry partnerships	–
	Develop data and knowledge infrastructure to inform decision-making	Strong alignment	Knowledge repository; data mapping tools; KIH expansion	Government funding; Philanthropic funding; partnerships with DoHDA and research bodies	–
	Improve digital access and infrastructure in remote communities	No alignment – infrastructure not within ARIIA scope	N/A	N/A	Australian Digital Health Agency; state/territory governments
<b>Collaboration and sector coordination</b>	Build partnerships across First Nations providers and mainstream organisations	Strong alignment	Aged Care Incubator; Innovation Network; facilitated partnerships	Existing programs; co-funded collaborative projects	–





Roundtable Theme / Opportunity Area	Specific Opportunity Identified	Alignment to ARIIA Mandate	Delivery Mechanism (Existing / Potential)	Funding / Partnership Pathway	Non-Alignment / Alternative Lead (if applicable)
	Support national community of practice for First Nations aged care workforce	Strong alignment	ARIIA Network; Communities of Practice; events	Philanthropic support	–
<b>Advocacy and system influence (indirect role)</b>	Amplify First Nations perspectives and sector insights	Partial alignment – ARIIA supports evidence-informed advocacy	Reports, research outputs, convening activities	Government engagement; partnerships with peak bodies	NATSIAACC; NACCHO (lead advocacy role)

## Acknowledgements

ARIIA would like to pay respect to the Traditional Owners and Elders past and present of the lands on which we work on and which the Roundtable was held: the Kaurna People of the Adelaide Plains. We acknowledge their strong and ongoing connections to land and culture. ARIIA extends that respect to the Traditional Owners of the lands on which our partners and stakeholders live and work and we recognise the cultural authority of the Aboriginal and Torres Strait Islander members who contributed to this work.

Thank you to all stakeholders who travelled across our vast country to spend time and yarn with us.

## Artwork (Journey of care and connection) – Amy Kilby

**Journey of care and connection**

This artwork, created by proud Wiradjuri woman **Amy Kilby** from the Riverina in New South Wales, represents ARIIA's program of work focused on Aboriginal and Torres Strait Islander peoples. It reflects the themes of respect, innovation and collaboration and honours the role of Elders and communities in shaping the future of aged care.

For more information visit: First Nations Hub – [About Artwork](#)

