

Submission in response to the Productivity Commission Draft Report into Mental Health (Overview and Recommendations) 22 January 2020





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## **Table of Contents**

Preamble	4
Information request 5.2 mental health treatment plans	
Information request 14.1 individual placement and support	expansion
options	
Draft recommendation 14.4 income support recipients' mutual	obligation
requirements	11
Draft recommendation 15.2 support people to find and maintain housing	
References	14
Appendix A	16
Appendix B	19

### **Preamble**

The Rehabilitation Counselling Association of Australasia (RCAA) is the peak professional body for tertiary qualified rehabilitation counsellors throughout Australasia. Established in 2003, RCAA was formed out of recognition of the need for a Rehabilitation Counselling professional organisation with entrance criteria consistent with Allied Health Professions currently practising in Australia. RCAA represents a single profession, where all full members hold tertiary qualifications in a rehabilitation counselling discipline.

### RCAA deliverables include:

- Self-regulation of the profession
- Membership of Allied Health Professions Australia (AHPA)
- Membership of Career Industry Council of Australia (CICA)
- Accreditation of Rehabilitation Counselling education programs at Australian Universities
- Robust Australian Competency Standards and Code of Ethics
- Access to current local and international research through subscriptions to the Australian Rehabilitation Research Review and the International Journal of Disability Management
- Mandatory Continuing Professional Development (CPD) requirements, resources and education to ensure members remain abreast of current evidence-based practice frameworks.

RCAA is the sole accrediting body of Rehabilitation Counselling degrees at The University of Sydney and Griffith University, the primary providers of qualified rehabilitation counsellors in Australia. RCAA has also accredited a Rehabilitation Counselling undergraduate degree at Flinders University.

RCAA supports the Productivity Commission Draft Report (Mental Health) and the opportunity to provide comment on key findings and recommendations.

Allied health professions play an important role in the health of the individual and reduction of the financial and social cost to society. Rehabilitation Counsellors facilitate social, educational and economic inclusion and participation for people experiencing illness, injury, disability or disadvantage through assessment, case management, case coordination and counselling. Members of the profession have demonstrated competency standards to deliver an extensive range of rehabilitation services for people experiencing mental illness, evidenced by recent General Practitioner (GP) clinical guidelines published by Monash University (Mazza, Brijnath, Chakraborty, & the Guideline Development Group, 2019).

Local and international rehabilitation counselling competency research undertaken over an extended period identified vocational counselling, professional practice, personal counselling, rehabilitation case management, workplace disability case management, and workplace intervention and program management as important and frequently used job functions and knowledge areas (Biggs, Herbert Charles & Flett, Ross A, 1995; Leahy, Chan & Saunders, 2003; Matthews, Buys, Randall, Biggs & Hazelwood, 2010). Core competencies in vocational assessment have long been

established within the profession of Rehabilitation Counselling (Black, 2018). GP clinical guidelines developed by Monash University and approved by the National Health and Medical Research Council (Mazza et al. 2019) recommend (1) that GPs use qualified Rehabilitation Counsellors to assess current work environments and duties, and coordinate and negotiate work activities for people with mental health conditions, and (2) that Rehabilitation Counsellors are the profession to assist GPs in determining what work-related factors may be contributing to delayed recovery.

In this submission we will be providing feedback and recommendations in relation to:

- Mental Health Treatment Plans
- Individual Placement and Support expansion options
- Income Support Recipients' mutual obligation requirements
- Support people to find and maintain housing

# INFORMATION REQUEST 5.2 — MENTAL HEALTH TREATMENT PLANS (MHTP)

What should be added to the MHTP or MHTP Review to encourage bestpractice care?

RCAA recommends Rehabilitation Counsellors be included under the Medicare Benefits Schedule (MBS) as allied health professionals qualified to provide focused psychological strategies, with access to the "Education and training component - Better Access initiative" for allied mental health practitioners. For nearly 30 years, Rehabilitation Counsellors have been offering specific expertise in vocational and psychosocial interventions to people at-risk of, and managing diagnosed mental illness (Garske, 1992). Rehabilitation Counsellors continue to work alongside treating GPs and other allied health professionals under the Medicare Better Access items to promote a 'whole of person' approach to recovery.

Rehabilitation Counsellors approach focused psychological strategies from a primary theoretical foundation of solution-focused brief therapy. They are qualified to use cognitive behavioural therapy, relaxation strategies, skills training, psychoeducation, interpersonal therapy and narrative therapy in treatment interventions.

RCAA recommends (1) the inclusion of solution focused brief therapy in the list of treatment options and (2) the inclusion of Rehabilitation Counsellors in the MBS to provide focused psychological strategies with a vocational and psychosocial rehabilitation focus in the Better Access Program.

# DRAFT RECOMMENDATION 14.3 — STAGED ROLLOUT OF INDIVIDUAL PLACEMENT AND SUPPORT MODEL

The Individual Placement and Support (IPS) model of employment support should be extended beyond its current limited application through a staged rollout to (potentially) all State and Territory Government community mental health services, involving co-location of IPS employment support services.

The Commission is seeking further feedback on whether this should occur through partnerships between dedicated IPS providers and community mental health services, or direct employment of IPS specialists by community mental health services. In the short term (in the next 2 years)

Governments should thoroughly trial and evaluate the IPS program to better establish the factors that influence its cost-effectiveness (for example, the impacts of local labour market conditions and participant characteristics).

The program should initially be open to all non-employed consumers of community mental health services who express a desire to participate and meet the other requirements of the IPS model. Participation in the program should fulfil mutual obligation requirements for income support recipients. In the medium term (over 2 – 5 years) Subject to these trials, the IPS program should be rolled out gradually with data shared across jurisdictions and a mechanism for diffusion of best practice. If the net benefits of the program apparent in the small-scale trials are not replicated as the program is scaled up, its design (and if necessary, its desirability) should be re-appraised.

# INFORMATION REQUEST 14.1 — INDIVIDUAL PLACEMENT AND SUPPORT EXPANSION OPTIONS

The Productivity Commission is seeking further information about the pros and cons of the two distinct options for expanding the Individual Placement and Support (IPS) model of employment support. The options are:

- Direct employment of IPS employment specialists by State and Territory Government community mental health services. This could be supported by additional Australian Government funding
- A new Australian Government-administered contract for IPS providers, based on fee-for-service compensation and subject to strict adherence to the IPS model (including that a partnership is in place with a State and Territory Government community mental health service).

What are the pros and cons of each option?

Which is your preferred option and why?

If the direct employment option is pursued, how should State and Territory Local Hospital Networks be funded to deliver the service?

RCAA strongly urges against the use of Australian Government administered contracts for Individual Placement and Support (IPS) providers and implores the Productivity Commission to recommend that State and Territory Governments directly employ Rehabilitation Counsellors as IPS employment specialists.

Rehabilitation Counsellors are well placed to provide IPS given their historical involvement in psychiatric rehabilitation and job placement for persons with disability, including IPS. For nearly 30 years, Rehabilitation Counsellors have been providing specific expertise in vocational and psychosocial interventions to people at-risk of, and managing diagnosed mental illness (Garske, 1992).

One of the pre-eminent researchers of the IPS model, Deborah Becker, stated in a webcast in 2015 that Vocational Rehabilitation (VR) systems and Vocational Rehabilitation professionals (encompassing Rehabilitation Counsellors) cross-disability expertise is a good fit with the growing evidence for the effectiveness of IPS with diverse disability populations. Becker, Bond and Oulvey (2015) further noted that vocational rehabilitation professionals offer expertise, consistency, accessibility, integration and resources.

It was generally accepted in the late 1980's that the needs of people with chronic and severe psychiatric disabilities extend well beyond the boundaries of any one system and require coordinated efforts with an array of health and human service agencies. Nationally, about one-third of all VR offices are reported to have formal interagency collaboration agreements with one or more local Mental Health agencies (Katz, 1991). Rehabilitation Counsellors are highly trained and experienced in working with and disseminating information to multidisciplinary treatment teams. RCs understand

the impact of mental health on occupational functioning and effects of medication on areas of functioning including energy and executive function.

Garkse (1992), noted that the involvement of rehabilitation counsellors in psychiatric rehabilitation seemed both appropriate and necessary. Philosophically, the new psychiatric rehabilitation model coincides with the practice of rehabilitation counselling. The clinical nature of psychiatric rehabilitation, just like its counterpart in physical rehabilitation, is comprised of two intervention strategies--client skill development and strengthening of environmental supports (Rehab Brief, 1989, Vol. 12). Psychiatric rehabilitation practice is guided by the basic philosophy of rehabilitation, in that people with disabilities require skills and environmental supports to fulfill the role demands of their living, learning, social, and working environments (Anthony, Cohen, & Farkas, 1990). According to Lamb (1988), no part of this work is more important than giving these clients a sense of mastery over their internal drives, their symptoms, and the demands of their environment.

People with disability have a right to access appropriate and evidenced based services and supports, and therefore must be afforded access to professionals with appropriate knowledge and skills in vocational rehabilitation, disability employment, and psychosocial rehabilitation. The variable levels of training and qualifications of staff working in vocational rehabilitation contexts in Australia has been noted and attributed to poor service and outcomes for people with disability (Buys, Matthews & Randall, 2014). A lack of qualified professionals in this context frequently results in fragmented service, unintended adverse consequences and/or the unwanted and unsustainable status quo outcomes. Contracting this service to IPS providers is likely to result in consumers having poor service provision and less than optimal outcomes due to inconsistency in the skills and qualifications of people working as employment specialists, high staff turnover, and limited skills and knowledge in working as part of a multidisciplinary team of health professionals.

RCAA has concerns that if a contract system was set up, providers may not abide by contractual guidelines regarding qualifications of staff. RCAA has identified advertised positions for a currently operating Federal Government funded program aimed at mature aged job seekers, Career Transition Assistance (CTA), that do not appear to comply with the requirement for staff engaged by the CTA Provider in the role of CTA Coordinator will be a person who holds an endorsed qualification in professional career development, or who is a member of a Career Industry Council of Australia (CICA) Member Association. (Appendix A and B). RCAA is the only rehabilitation counselling professional association with CICA membership.

RCAA strongly supports a national rollout of IPS integration into Community Health Centres. IPS has the strongest evidence base of any vocational intervention design for people with mental health-related conditions. It is supported by over 20 randomized controlled trials across four continents, a range of programs serving clients and a demographically diverse variety of communities. It has been proven

effective for both young adults and older adults with a serious mental illness, posttraumatic stress disorder, substance-use disorders; history of homelessness, substantial and repeated hospitalization, involvement in the criminal justice system, and long-term unemployment and dependence on Social Security. IPS has been consistently a much better program model than any active alternative (Drake & Bond, 2014).

# DRAFT RECOMMENDATION 14.4 — INCOME SUPPORT RECIPIENTS' MUTUAL OBLIGATION REQUIREMENTS

In the short term (in the next 2 years) The Departments of Human Services; Social Services; and Employment, Skills, Small and Family Business should:

- Provide greater flexibility in the application of the Targeted Compliance Framework for jobseekers experiencing mental illness
- Assess more systematically whether employment service providers are meeting their obligations to provide personalised Job Plans that go beyond compliance, targeted at job seekers with complex needs
- Consider extending the period of time that job seekers with more complex needs have to consider and propose changes to their Job Plan beyond two business days.

RCAA is aware of poor practices to date in the preparation of Job Plans. Appropriate, person-centred and timely goal setting and planning is crucial in maximising the employment success of individuals. This planning must be based on the needs, skills and interests of the individual, not pre-determined by the provider and governed by cost-cutting strategies.

The services included in a Job Plan should be reasonably based on the employment related needs identified by the individual, and those identified in the Employment Services Assessment (ESAT/ Job Capacity Assessment (JCA) and by the Disability Employment Services (DES) provider. The process must involve full participant engagement in assessment, goalsetting and preparation of the Job Plan. Further, this must be matched by the accountability of the provider in ensuring adequate and meaningful support and services are provided to the participant.

Where these services and supports cannot be offered in-house, then appropriate services must be sought from external service providers. It is acknowledged the provision of these services can be costly, particularly where these must be outsourced.

However, the fact that many recommendations from ESATs/JCAs are ignored, either because of cost or because the provider does not have the professional skills required to deliver the services, is a significant problem and a likely contributor to failures in the sector. Providers must be held accountable to the provision or sourcing of services required to improve participants' employment readiness and potential for success.

Consideration of new systems and funding options to ensure this accountability are now critical. For example, if vocational assessment and vocational counselling are listed as an intervention on an ESAT/JCA, these interventions should be listed on the job plan, with an expectation they be completed by appropriately qualified professionals such as Rehabilitation Counsellors, who undertake tertiary training and work integrated learning placements in the administering of Vocational Assessments for people with disabilities and other barriers to employment. DES Providers should be required to demonstrate compliance with the recommendations of ESATs/JCAs.

Further examples of essential services and support to be provided upon recommendation may include Functional Capacity Evaluations (FCEs), pain

management or specialist reviews, employer and co-worker education, adjustment to disability counselling, and assistance to source appropriate childcare. Failure to respond to these recommendations and needs does not enable participants to reach their employment potential.

RCAA suggests that participant interventions be electronically attached to the central database and that DES Providers can set or mark interventions as complete after these have been actioned. Setting interventions to "complete" and keeping these in the Plan would be preferable to closing them off and losing all reference to completed activities. Current Job Plans delete completed activities, providing limited opportunity for positive reflection on what has been achieved.

# DRAFT RECOMMENDATION 15.2 — SUPPORT PEOPLE TO FIND AND MAINTAIN HOUSING

Housing and homelessness services should have the capacity to support people with severe mental illness to find and maintain housing in the community. In the short term (in the next 2 years)

Each State and Territory Government, with support from the Australian Government, should commit to a nationally consistent formal policy of no exits into homelessness for people with mental illness who are discharged from institutional care, including hospitals and prisons.

Governments should ensure that people with mental illness who exit institutional care (particularly hospitals or prisons) receive a comprehensive mental health discharge plan, and services have the capacity to meet their needs. These programs should integrate care coordination and access to accommodation.

The National Disability Insurance Agency should review its Specialist Disability Accommodation strategy and policies with a view to encouraging development of long-term supported accommodation for National Disability Insurance Scheme recipients with severe and persistent mental illness.

Each State and Territory Government, with support from the Australian Government, should work towards meeting the gap in the number of 'supported housing' places for those individuals with severe mental illness who are in need of integrated housing and mental health supports. – Governments should provide (either themselves or outsourced to non-government organisations) a combination of long-term housing options for this cohort to support the diverse needs for mental health support and tenancy security.

Each State and Territory Government, with support from the Australian Government, should work towards meeting the gap for homelessness services among people with mental illness in their jurisdiction. This could include increasing existing homelessness services as well as scaling up longer-term housing options such as Housing First programs. – Housing First programs should target people who experience severe and complex mental illness, are persistently homeless, and are unlikely to respond to existing homelessness services. – This would require governments to invest in homelessness services that make long-term housing available specifically for these programs

RCAA supports the Commission's recommendation to increase homelessness services and recommends inclusion of Rehabilitation Counsellors into homelessness services teams. Fearn-Smith and Tadros (2018) identified that the vocational outcomes orientation of rehabilitation counsellors aligned well with the 2017 National Homelessness Strategy. It was further noted that improving employment outcomes of people experiencing or at risk of homelessness would enhance economic capacity in this group and reduce vulnerability to housing affordability stress. The authors assert that the skills of Rehabilitation Counsellors in facilitating economic and educational social inclusion has the potential to facilitate meaningful poverty reduction.

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#### APPENDIX A

**About Skill Hire** 

Skill Hire are one of Australia's *premier* employment and training providers specialising in the construction industry, and offering an array of different business and employment services solutions including training and labour hire. If you have a passion for helping people reach their full potential, have a 'can-do' attitude and are a people person, then our company is for you.

Skill Hire are excited to provide Career Transition Assistance (CTA) services to West Australians aged 45 and over in Albany on a casual basis.

About the Role

Successful applicants will be involved in delivering our commitment to jobseekers including:

- Career and vocational assessments
- Administering, interpreting, and discussing with jobseekers psychometric assessments
- Delivering individual and group facilitation sessions
- Administering a blend of hands-on and self-guided ICT training to individuals and groups
- Building linkages with employers and communities to secure work experience placements

Successful applicants will complete a fully funded Nationally recognised Cert IV course in Employment Services, be trained in facilitation and assessment techniques, as well as receiving ongoing professional development. No previous experience is necessary, all applications will be considered. Applicants with backgrounds in teaching, nursing, social work, HRM, training, counselling, psychology, or lecturing are encouraged to apply.

An above-Award salary is offered.

Please note, you will need to be able to supply a National Police Clearance to be eligible for these positions, and have the right to work in Australia.

Unsolicited applications from agencies will be discarded unread.

Due to high volume of applications, only successful candidates will be contacted.

Please apply through Seek.

https://www.seek.com.au/job/40627221?type=standard#searchRequestToken=d586c 0c8-eb6e-4f85-a45a-d48fd0ed9a79

Career Transition Assistance Trainer - Castle Hill & Hornsby
Our Career Transition Assistance program is a great opportunity for our clients 45
years+ to up-skill and refresh on past skills, adding ease to re-entering the workforce.
Our program Trainers are experienced in engaging an audience, facilitating training,
sharing their own skills, such as across computers and administration, assisting with
job applications, and utilizing their motivation techniques and influencing skills to help
our clients in moving forward.

We have an opportunity currently to join our Castle Hill & Hornsby sites as a Career Transition Assistance Facilitator working closely with our clients to make a real change to their lives!

### About Konekt Employment:

We're passionate about people. We stand by our belief of equal opportunity, supporting communities and empowering every day Australians. We provide life-changing services that help people find a job or start up their own small business.

Konekt Employment is Australia's largest NEIS provider, a leader within jobactive and now working towards becoming the number one of choice for Disability Employment Services (DES). Collectively assisting more and more people turn their lives around, with a network of more than 80 offices and 420 employees.

Is it a good fit? Ideal candidate requirements include:

- In this role you will be facilitating the CTA program across our Castle Hill and Hornsby offices
- Strong sales and relationship building skills, present to a wide audience of clients 45-years and over
- Possess strong knowledge of the local labour market
- Ability to build and maintain relevant stakeholder relationships, such as local industry bodies and employers
- Experience in career development or career counselling would be advantageous
- Ability to use specialised career assessment tools and formulate individual career pathway plans
- Experience assisting mature aged people to secure long-term employment
- Experience in organising, planning, implementing and facilitating training programs
- A proven track record in achieving results, KPI's and delivering exceptional customer service
- Administrative skills; lead and share your administrative skills with our participants
- Ability to form positive working relationships internally and externally
- Influencing, negotiation, time management and organisational skills
- A high level of computer literacy including proficiency in Microsoft Office packages or other operating systems
- Valid Driver's licence & ability to travel extensively to all locations across the designated region for work

What could my day to day look like?

Work full time across two sites – Castle Hill & Hornsby

- Build relationships with internal and external stakeholders
- Promote the CTA program and benefits for our clients
- Build relationships with other Jobactive providers promoting benefits of the program and bringing new (external) clients into the program
- Utilize your strong administration skills to facilitate the program & learn and teach program participants skills to assist them obtaining and remaining in employment
- Facilitate the program utilizing your training or Employment Services background KONEKT EMPLOYMENT VALUES INCLUSION AND DIVERSITY:

To attract a diverse team, we place a premium on creating an inclusive company culture and an environment shaped by excellence and partnerships. We take great pride in creating an ethical, safe, and healthy environment, equal to all.

### WE ENCOURAGE CAREER OPPORTUNITIES:

We encourage our employees to stretch and to challenge. To experience working in different teams and to go beyond their believed capabilities.

#### WE ARE COMMITTED TO WORK/LIFE BALANCE:

Konekt Employment remuneration and benefits are fair for all and include; rostered days off, yearly salary reviews, professional development leave, discounted health insurance plus more!

Konekt Employment continues to grow and diversify. As a CTA Facilitator you will deliver, facilitate and administer assessments, training, advice and support services to our over 45-year-old+ CTA participants to enable them to become more competitive in their local labour market.

A key measure of success will be your ability to drive new client engagements by marketing and promoting the Career Transition Assistance program to meet or exceed budget.

You will lead the delivery of CTA services across Castle Hill & Hornsby sites for both existing Konekt & wider Job Active service providers in that region. You will be responsible for developing and maintaining key relationships internally and externally (e.g. JA providers, Government departments, local industry bodies such as the Business Chamber, Employers).

This role provides a true sense of job satisfaction! Witness firsthand the positive changes in our clients that stems from their participation in this program under your leadership and guidance. The difference the program can make to our client's lives, their motivation, confidence and their overall skills is remarkable.

If this sounds like your ideal next career step with Konekt and you meet the candidate criteria, then please click 'Apply' now.

All applications are reviewed by our internal talent acquisition team and you will receive notification of the outcome of your application in a timely manner.

### Konekt Employment Careers

Visit www.konektemployment.com.au/our-story/work-for-us/ to learn more

https://www.seek.com.au/job/40536652?type=standout#searchRequestToken=e1c3d808-c942-409b-a6ca-3b641065f27c

#### **APPENDIX B**

What qualifications, qualities or experience are required of the CTA Coordinator?

The person engaged by the CTA Provider in the role of CTA Coordinator will be a person who holds an endorsed qualification in professional career development, or who is a member of a Career Industry Council of Australia (CICA) Member Association.

References: RFT Section 2.3.2.2 – General Delivery Requirements Guide to the Career Industry Council of Australia (CICA)

Endorsed qualifications in professional career development are governed by CICA. CICA has endorsed a number of programs at various institutions that meet the Professional Standards for Australian Career Practitioners. For more information visit their website (https://cica.org.au/).

As a guide, the following list provides current examples of qualifications that meet the Professional Standards for Australian Career Practitioners:

- Postgraduate Certificate in Education
- Master of Education
- Graduate Certificate of Career Development
- Postgraduate Certificate in Educational Studies (Career Development)
- Graduate Diploma in Career Education and Development
- Certificate IV in Career Development
- Specialist Diploma in Career Counselling.

CICA is comprised of ten (10) member associations, these are listed below.

#### National Associations:

- Australian Centre for Career Education (ACCE)/(CEAV)
- Australian Institute of Sport: Athlete Wellbeing and Engagement (AIS)
- Career Development Association of Australia Inc. (CDAA)
- National Association of Graduate Career Advisory Services (Aus) Inc. (NAGCAS)
- Rehabilitation Counselling Association of Australasia Inc. (RCAA)

#### State and Territory Associations:

- Career Advisers Association of New South Wales and Australian Capital Territory (CAA) Inc. (CAANSW/ACT)
- Career Education Association of Western Australia Inc. (CEAWA)
- Career Educators Association of Northern Territory Inc. (CEANT)
- Queensland Association of Student Advisors Inc (QASA)
- Queensland Guidance and Counselling Association Inc. (QGCA)

https://docs.employment.gov.au/documents/career-transition-assistance