

Submission by the Australian Nursing and Midwifery Federation

Submission on National approach to worker screening in the care and support economy, The Treasury-Australian Government

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Nursing &
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Introduction

1. The Australian Nursing and Midwifery Federation (ANMF) is Australia's largest national union and professional nursing and midwifery organisation. In collaboration with the ANMF's eight state and territory branches, we represent the professional, industrial, and political interests of more than 345,000 nurses, midwives, and care-workers across the country.
2. Our members work in the public and private health, aged care, and disability sectors across a wide variety of urban, rural, and remote locations. We work with them to improve their ability to deliver safe and best practice care in each and every one of these settings, fulfil their professional goals and achieve a healthy work/life balance.
3. Our strong and growing membership and integrated role as both a trade union and professional organisation provides us with a complete understanding of all aspects of the nursing and midwifery professions and see us uniquely placed to defend and advance our professions.
4. Through our work with members, we aim to strengthen the contribution of nursing and midwifery to improving Australia's health and aged care systems, and the health of our national and global communities.
5. The ANMF thanks the Australian Government, Treasury and Department of Finance for the opportunity to provide feedback on the National approach to worker screening in the care and support economy. The ANMF's submission should be read in conjunction with the joint response provided to this consultation by the Australian Services Union (ASU), Health Services Union (HSU), Australian Nursing & Midwifery Federation (ANMF), Australian Workers' Union (AWU) and United Workers Union (UWU).



Background

6. The ANMF supports the development of a nationally consistent worker screening scheme across the care and support economy. Such a scheme would align with the recommendations of the Aged Care Royal Commission and would assist in addressing the fragmentation, duplication, and delays currently experienced by our members under existing systems.
7. The ANMF recognises that a suitably designed nationally consistent system would not only strengthen consumer safety but would also assist in improving the professionalisation of workers' roles across the care and support sectors.
8. The ANMF prefers Option 2: a single national check, noting its potential to strengthen safety, simplify processes, and improve workforce mobility. However, any national screening scheme must also recognise that the care and support economy is not homogenous; it comprises a range of sectors, each of which requires specialised roles with unique training, qualification and skillset needs.
9. The ANMF recommends inclusion of the following in any new scheme:
 - Adequate resourcing and funding, recognising the scale of implementation.
 - Continuous monitoring of criminal history, with appropriate reporting of misconduct across jurisdictions.
 - Be free of fees or any cost to workers.
 - Provision of ease of access, transferability across sectors, and clear responsibilities for workers, employers, and regulators.
 - Cultural safety, equity, and flexibility, particularly for First Nations, CALD, and remote workers.
 - Fair and transparent appeal mechanisms.
 - Avoidance of creating additional financial burdens that may deter workers from entering or staying in the sector.



10. While the benefits of reform are clear, cost implications for workers remain a key concern for our members. Without appropriate government support, there is a risk of financial barriers for our members which could undermine efforts to grow the workforce at a time of critical shortage.

11. The remainder of this submission directly address the consultation's questions.

Do these challenges resonate with your experience of worker screening? Are there any other issues that we should consider?

12. Yes. The challenges of fragmentation, duplication, delays in processing applications, and variable standards are consistent with ANMF members' experiences. Cost barriers, lack of transferability across states, and inconsistent reporting are major additional concerns for the ANMF.

What components of the existing worker screening systems work well and should be kept under a national approach?

13. The NDIS Worker Screening Check demonstrates the value of transferability and continuous monitoring when used for screening, as these checks are accepted in any setting. The mutual recognition that already exists between current checks (Working with Children Check and National Police Check) should also be preserved and expanded. However, our members have advised that significant delays persist with NDIS checks being processed, particularly for members who have recently arrived in Australia.

To what extent do the anticipated benefits of the proposed reforms reflect your expectations for an improved worker screening process? Are there any additional benefits you believe we should consider to further strengthen the outcomes?

14. The ANMF supports how the proposed reforms will be integrated with the planned worker screening process. However, our members advise us that they want easier movement between roles, less duplication, faster checks, and stronger safety through continuous



monitoring. These gains will only be achieved if the scheme is properly funded and rolled out in stages. Another benefit for the government to consider is the strengthening in public trust and role recognition of the workforce, if the system is consistent, and fair across the aged care workforce.

What are the key issues with national consistency in worker screening for the care and support economy? How could these issues be overcome?

15. The ANMF is aware that every state and territory has different legislation which significantly impacts the care economy, including differences in offences which must be reported across this sector. There is also variation in how appeal systems work between state and federal legislation. Other issues relate to IT system interoperability, which further impacts our members' experiences within the system, and the delays in real time checks. Another key issue is the difference in cost for worker screening, as providers can choose the screening check they prefer with varying costs. A national screening check should address these issues. The ANMF should be included in a genuine process of codesign of the scheme and its implementation, included appropriate phasing of rollout of the scheme to prevent further disruption to current systems and decrease the potential risks associated with a single system screening check.

How can the government ensure safety outcomes are upheld, while improving the simplicity and efficiency of worker screening processes?

16. The ANMF supports a phased rollout with clear national standards, which will help avoid delays and confusion and allow evaluation of progress. State, territory and national laws must be harmonised, and IT systems need to interoperate so information can move quickly across states and sectors. The ANMF supports upgrading existing databases, rather than launching a new system. This will keep our systems simple and efficient. However, in the longer term, rationalisation of the IT infrastructure supporting this initiative would be appropriate and desirable to maximise the effectiveness of the scheme. Safety can be



reinforced through strong governance which could include limited spot audits by the government to make sure the system is working as intended.

Are there specific barriers to, or opportunities for, improving worker screening to make it more efficient and suitable for groups or organisations, such as First Nations care workers or Aboriginal Community-Controlled Organisations?

17. To minimize potential negative or unintended effects for Aboriginal and/or Torres Strait Islander peoples, the ANMF recommends a co-design approach with Aboriginal and Torres Strait Islander health organizations and leaders. This approach will ensure ongoing community consultation and appropriate feedback loops. We expect that such consultation and coordination will have already occurred as part of the worker screening process within First Nations and Aboriginal Community Controlled Organisations.

Are these key design elements comprehensive? What other considerations should be included and why?

18. The ANMF agrees that the current design elements for the national screening are comprehensive, but we recommend the following to be included. The costs for our members must be eliminated, so they are not discouraged from remaining and continuing to be employed in aged care. Ongoing consultation with the ANMF will ensure that the system is not overwhelmed and that foreseeable problems are fixed.

What synergies and tensions do you see between these elements? How should these be addressed?

19. The ANMF recognizes that the three design elements: transferability, continuous monitoring, and efficiency, work well together to support a simpler and safer screening system. However, the primary tension is the affordability of the screening checks for our members. If screening processes are too expensive or convoluted to follow, they may deter low-paid or casual workers from entering or remaining in the sector. To mitigate this risk, the ANMF recommends that screening costs be either covered by employers or waived by government,



rather than passed on to individual workers. This approach would help maintain workforce accessibility while upholding safety standards.

How should these key design elements be incorporated into a national approach? Which elements will be most important to ensure proper operation and sustainability of the scheme?

20. The project must be phased in carefully, initially using existing systems to avoid delay. The most essential elements are the incorporation of continuous monitoring, so our aged care population is kept safe, and employee compliance when using the check is enhanced. There also needs to be easy access through both digital and non-digital options. The government needs to ensure strong data security in the national approach whilst incorporating cultural safety, and consistent processes across states and territories. These functions are essential features to ensure that the scheme is trusted and sustainable.

Do the common design features appropriately and effectively support a national approach to worker screening? Please provide reasons why/why not.

21. The ANMF the common design features still require some improvement. It is essential that continuous monitoring and reporting is easily achieved within the checking process. The transferability of the check between workplaces will allow the screening check to be simplified for our members, who must have access to both digital and non-digital options so there is no disadvantage due to lack of available technologies. If these three areas are done well, the scheme will be trusted and sustainable.

Are there additional design features that we should include under both options? Are there any gaps or opportunities that have not been identified yet?

22. Yes. The ANMF recommends the inclusion of culturally safe practices within the screening system. As stated earlier the ANMF expects that initiatives to minimize potential negative or unintended effects on any marginalised populations and Aboriginal and/or Torres Strait Islander peoples have already been considered. The ANMF recommends a co-design approach with Aboriginal and Torres Strait Islander health organizations and leaders. The ANMF



recommends the scheme be evaluated accordingly for its efficiencies with appropriate feedback cycles incorporated within its integration to the aged care workforce.

Which proposed model do you prefer? Please provide reasons why/why not.

23. The ANMF prefers Option 2 – a single national check, noting the qualifications outlined above which need to be considered in the move to a single national screening check. While a single national system offers clear benefits in consistency, equity, and administrative simplicity, as noted above, its implementation may face challenges due to the non-homogeneous nature of the workforce—with workers holding varied qualifications, responsibilities, and roles—and the equally diverse needs of the clients they serve. The ANMF therefore stresses that consultative, staged implementation is essential, supported by robust governance, strong IT infrastructure, and clear communication. Ongoing engagement with unions and providers will also be critical to address workforce and sector-specific complexities and to safeguard worker rights throughout the transition. (Please refer to attached list of unions’ endorsed principles.)

Are there alternative models which improves efficiency and labour mobility, while enhancing safety and quality? If so, please outline your proposal.

24. The ANMF recommends a phased or hybrid transition building on existing worker screening models. This approach would strengthen current processes while allowing time to develop the infrastructure required for a full single national check. It would provide immediate benefits for workers by reducing duplication and administrative burden, while also supporting progressive compliance with the future national system.

What risks, challenges or unintended consequences could arise when implementing a national approach to worker screening? How should we mitigate them?

25. The ANMF is concerned with how delays within the system and/or employee confusion will be managed once the new system is implemented. The ANMF is also concerned how unexpected costs will be managed, as well as potential IT failures of current systems that



cannot manage increased IT traffic. To avoid these pitfalls, the scheme needs to be rolled out in stages with appropriate government funding, so costs are kept to a minimum. A feedback cycle should be integrated from the beginning of the system integration, so any real time challenges are managed effectively and in a timely manner.

What transitional arrangements may be required when implementing a national approach to worker screening? This may include a phased introduction, grandfathering of existing checks until expiry, and/or public education program to clearly outline the changes.

26. As stated earlier a staged rollout will be essential for success The ANMF recommends that existing checks are honoured until they expire (“grandfathering”), while new applicants move onto the national system. The ANMF recommends that mutual recognition across all states, territories, and sectors is honoured as an interim step. The ANMF supports the introduction and sharing of readily available resources for our members explaining the national screening approach and what this means for them in their role. These resources should be in multiple formats to ensure understanding of and compliance with the national approach to worker screening. For example, a recorded webinar with FAQ resources would be of assistance for workers.



Conclusion

27. The ANMF supports a national, single check for all workers in the care and support economy as an effective way to implement safe screening for all aged care workers. We recommend a phased rollout supported by strong funding, good structural governance, and appropriate safeguards to ensure the system is fair, transparent, and accessible to all workers. By reducing duplication, strengthening monitoring, and embedding cultural safety, this reform has the potential to enhance trust in community and aged care worker screening practices. While this submission focuses on the design of a national worker screening scheme, the ANMF draws attention to the government's commitment to implement the Aged Care Royal Commission's recommendation for aged care worker registration. This reform must not be delayed as a result of the inquiry into a national working screening scheme for the care and support economy. The ANMF looks forward to continuing to work with the government to ensure this reform is implemented in a way that protects vulnerable Australians while supporting the critical work of our care and support workforce.