



# HumanAbility

**26-003 HLT Health  
Administration and Practice  
Management Qualification  
Review  
Consultation Strategy**

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## Document Modification History

Version	Status	Release date	Summary of changes
V1	Current		Document published

# 1. Introduction

## 1.1 Project details

Project full name and code:	26-003 HLT Health Administration and Practice Management: Qualification Review
Project shortform name:	Health Admin and Practice Management
Project Sponsor:	Warren Hill
Project Director:	Rosalie Staggard
Project Manager:	Lee Wheeler
Project Coordinator	Alyssa Warland
Technical Writer	Jasmeet Kaur
Quality Assurance Manager	Cristina Ferrari
Stakeholder Engagement Coordinator:	Emily Roberts
Project Communication Adviser:	Abbey Robertson

## 1.2 Purpose of the Consultation Strategy

The purpose of the Consultation Strategy (strategy) is to support the review of:

### Qualifications

- HLT47715 Certificate IV in Medical Practice Assisting
- HLT57715 Diploma of Practice Management
- HLT37315 Certificate III in Health Administration
- HLT47321 Certificate IV in Health Administration

### Skill set

- HLTS00043 Telehealth Administration skill set

The strategy includes identification and mapping of key stakeholder groups, and outlines consultation objectives, methods and timing of engagement activities. It also includes communication objectives and methods. The strategy is underpinned by the HumanAbility Stakeholder Engagement Strategy.

## 1.3 Audience

The audience for this strategy is the Project Sponsor, Project Director, Project Team, Technical Committee, Stakeholder Engagement Advisor, Department of Employment and Workplace Relations (DEWR) and key stakeholder groups.

## 2. Background

### 2.1 Project overview

The healthcare sector is experiencing a rapid integration of digital technologies, requiring both current and future staff to develop strong digital skills. The adoption of systems like electronic health records, telehealth platforms, practice management software, and electronic prescribing demands familiarity with these tools to ensure efficient patient care and management. As patient-centred care models become more widespread, there is a significant shift towards integrated care, particularly focusing on chronic disease management and patient advocacy. This evolution calls for qualifications that align with these new care frameworks, emphasizing the need for healthcare professionals to adapt to changing patient needs and service delivery methods.

At the same time, healthcare professionals must navigate increasingly complex regulatory requirements. With heightened standards in privacy law, infection control, and practice accreditation, qualifications must be updated to meet the latest compliance and quality standards. The healthcare workforce also faces challenges related to attraction and retention, particularly in rural and remote areas, where shortages are particularly severe. Addressing these challenges involves improving job satisfaction, offering career progression opportunities, and developing specialisation pathways. Emerging micro-credentials and industry-specific specialisations offer a solution, providing quick and flexible ways to upskill and reskill, thus enhancing workforce responsiveness and adaptability in an ever-evolving healthcare landscape.

With this background in mind, **this project aims to critically evaluate and update the qualifications in health admin and practice management, to:**

1. ensure they meet with current and future needs of employers, consumers and unions,
2. ensure they are aligned with current and regulatory requirements, patient centred models of service delivery, safety and wellbeing outcomes
3. clarify existing and improve future career pathways to address workforce shortages.

### 2.2 Importance of stakeholder engagement for project success

Successful stakeholder engagement is critical to the project's success and value.

This means hearing from a wide range of people: training providers, employers, industry bodies, unions, government agencies, people working in health admin and practice management, students – ensuring we reflect the specific needs of First Nations communities, culturally and linguistically diverse organisations and services in regional, remote and rural Australia.

HumanAbility will engage with key stakeholders through in-depth consultation activities to gather insights, and the broader community. Feedback will play a vital role in shaping the project and inform changes to the qualifications in scope.

HumanAbility is conscious of importance of ensuring different groups can engage in ways that work best for them, within timelines, and will endeavour to take a tailored approach when hearing from others.

## 3. Stakeholder engagement objectives and scope

### 3.1 Stakeholder engagement objectives

- Propose changes to the qualification to deliver on the technical needs of key stakeholder groups through the establishment of a technical committee.
- Draw on work already complete by HumanAbility, to minimise duplicative consultation and maximise quality and quantity of engagement.
- Through ongoing engagement, align changes to the training products in scope to the broader perspectives and objectives of key stakeholders in health admin and practice management, considering linkages with government reforms as appropriate.
- Collect thorough, detailed feedback from across health administration and practice management to inform potential changes to the training products in scope.
- Support different stakeholder groups to engage with the review process through tailored outreach methods, and bespoke opportunities for consultation.
- Provide effective, timely, accessible and transparent communication with stakeholders about consultation opportunities, progress and outcomes of the project.
- Ensure stakeholders are valued, included and heard throughout the project – from its early exploratory stages to its final outcomes.
- Monitor and review the impact of the project.

The scope of stakeholder engagement is identified in Section 5. Any forms of stakeholder engagement not identified in Section 5 should be considered “out of scope”.

## Stakeholder identification and analysis

### 4.1 Stakeholder identification and analysis

The table below outlines the key stakeholders for this project and the value their involvement brings to the project. Stakeholders have been identified in accordance with the International Association of Public Participation (IAP2) principles and practices of engagement.

The benefits of engagement inform how we will engage with each stakeholder group (outlined in Section 5). Through the project lifecycle, we will continue to identify key stakeholder organisations and individuals to consult and the appropriate methods of engagement, in consultation with the technical

committee. Other jobs and skills councils are not listed below, as the project scope is limited to reviewing units in HumanAbility's remit.

Stakeholders	Organisations	Benefits of involvement
<b>Health Industry Advisory Committee (IAC).</b>	See HumanAbility website for list of current IAC members.	Strategic advice via expert representatives across healthcare sectors on project progress.
<b>Technical Committee</b>	Technical Committee is half constituted of the training sector (a balance of TAFE and private and public RTO representatives), as well as workforce, provider, peak bodies, and lived experience representatives. See Terms of Reference for full Technical Committee list.	Technical advice based on sector expertise and direct experience and understanding of the qualifications in scope
<b>Subject matter expert (SME) pool/s</b>	SMEs from across health admin and practice management services that can provide targeted feedback on emerging issues of importance identified prior or during the project. Multiple pools may be established depending on the granular detail level, segmentation of units and required expertise for consultation.	Technical insight through specialist knowledge of identified issues relating to the health admin and practice management qualifications and/or related occupations, or through their lived experience.
<b>RTOs and educational experts</b>	Including, but not limited to, TAFEs and RTOs that deliver or intend to deliver the qualifications, trainers and assessors, and curriculum maintenance managers.	Insights from direct experience delivering the qualifications in scope.
<b>Industry peak bodies</b>	Including but not limited to the Australian Association of Practice Managers	Insights on opportunities to improve uptake or value of the qualifications, training and career pathways, regulatory compliance, and emergent, related sector-wide developments.
<b>Employers</b>	Employers of health administration and practice management utilising or affected by the qualifications.	Insights on opportunities to improve uptake or value of the qualifications, training and career pathways, regulatory compliance, and

Stakeholders	Organisations	Benefits of involvement
		emergent, related sector-wide developments.
<b>Workers and unions with relevant coverage</b>	<p>Workers with an interest in the training products, and their representative unions, including, but not limited to:</p> <ul style="list-style-type: none"> <li>• Health Services Union and branches</li> <li>• Australian Services Union and branches</li> </ul>	Ensure changes to the qualifications support improved career progression, safety, recognition, workforce support, attraction and retention.
<b>Relevant federal, state and territory government departments and agencies</b>	<p>Including, but not limited to:</p> <ul style="list-style-type: none"> <li>• Department of Employment and Workplace Relations (Commonwealth)</li> <li>• Centres of Excellence</li> <li>• State Training Authorities</li> <li>• Relevant providers or Government stewards of health admin and practice management</li> </ul>	Input on the project as funders of training placements, incentives and initiatives, as well as health admin and practice management professionals and as market stewards.
<b>Assurance and regulatory bodies</b>	<p>Including but not limited to:</p> <ul style="list-style-type: none"> <li>• Australian General Practice Accreditation Limited</li> </ul>	Insight into how training overlaps with/ensures compliance with regulations for safeguarding, appropriate skills and quality of services.
<b>Industry Training Advisory Boards / Councils (ITABs)</b>	<ul style="list-style-type: none"> <li>• Community Services and Health ITAB (NSW)</li> <li>• CommunitySkills WA</li> <li>• CheckUP Australia (QLD)</li> <li>• Industry Skills Advisory Council NT</li> <li>• South Australian Skills Commission</li> <li>• Victorian Skills Authority</li> </ul>	Direct experience and understanding of the qualifications and related occupations, strong state-based connections with industry and training providers
<b>Priority cohort - Aboriginal and Torres Strait Islander people</b>	Including, but not limited to Aboriginal Community Controlled Health Organisations, including ACCHO RTOs and NACCHO, First Nations people working in health admin and practice management	Ensures the training product meets the specific needs of First Nations employers, workers and service users.

## 5. Strategic approach

## 5.1 Engagement methods

Method	Purpose	Who	Timing
<b>Industry Advisory Committee consultation</b>	Provide strategic advice to HumanAbility via expert representatives across health admin and practice management on project progress.	As listed in section 4.1	As requested in IAC meetings
<b>Technical Committee consultation</b>	Support development work and provide technical advice and feedback on the consultation strategy. The Committee will include representatives from key stakeholder groups and national coverage.		Throughout the project
<b>Virtual Functional analysis interviews and functional analysis workshops</b>	Discuss settings, current roles, functions and tasks, identify jurisdictional and other relevant nuances, and identify opportunities for improving skills gaps, workforce attraction, retention and career pathways. Participants will be drawn from all states and territories from metropolitan, regional, and remote areas.	Employers, unions and identified SMEs	
<b>Government and Public consultation workshops</b>	<p>Group discussions to understand needs, challenges, gaps, solutions and improvements for the qualifications.</p> <p>This includes:</p> <ul style="list-style-type: none"> <li>Virtual workshops held at a range of various times of day (morning/ afternoon/ evening) to allow different stakeholders to attend at a convenient time</li> <li>And face to face workshops held in each state and territory focusing on different qualifications in scope.</li> </ul> <p>Further workshops will take place as required in a second phase of consultation.</p>	All groups affected/ involved in training or service delivery. Technical experience, understanding of the qualifications preferred	
<b>Engagement with subject matter expert (SME) pools</b>	Consultation with identified subject matter experts to understand specific needs and improvements for the qualifications. This may include reference groups who experience challenges with health administration and practice management	SMEs with specialist knowledge to inform project findings.	As required
<b>Site visits</b>	Effectively consult worker and employers by reaching them in their workplaces.	Employers and unions	

Method	Purpose	Who	Timing
<b>Sector-facilitated workshops</b>	Receive feedback through workshops hosted by sector organisations, such as through conferences or gatherings, especially to reach stakeholders who are otherwise difficult to engage.	All stakeholders	
<b>Surveys, online feedback and submissions</b>	Stakeholders can provide a response to a survey, freeform feedback or full policy submissions in response to the project, to add value to feedback already provided in workshops, or in place of it.		
<b>Leveraging existing meetings with critical partners</b>	Establishing or utilising periodic meetings with TAFE Centres of Excellence and Government Departments and industry stakeholders to strengthen project participation and ensure alignment to government reforms and objectives.		
<b>External events</b>	Attending events with larger gatherings of critical stakeholders.		
<b>Virtual professional development workshops</b>	Focus on the new qualification and how good practice for delivery and assessment will be conducted. Workshop recordings will be available on the HumanAbility website.	Trainers and assessors	

## 5.2 Timing

Timeframe	Activity	
<b>Stage 1 – Project set up (Milestone)</b> 4 Aug '25 – 26 Sep '25	8	<ul style="list-style-type: none"> <li>Establish project team</li> <li>Develop draft Project Plan and Consultation Strategy</li> <li>Establish Technical Committee (TC)</li> <li>Hold Technical Committee meeting, seeking feedback on draft Consultation Strategy (Meeting 1)</li> <li>submit Project Plan and Consultation Strategy to DEWR (Milestone 1)</li> <li>create a project page on website, publishing the Consultation Strategy and timelines.</li> </ul>
<b>Stage 2 Initial Development</b> 29 Sep '25 – 16 Jan '26	16 weeks	<ul style="list-style-type: none"> <li>Undertake desktop research</li> <li>16 x virtual interviews with employers/key stakeholders held</li> <li>Functional analysis workshop held</li> <li>functional analysis report finalised and consultation paper developed</li> <li>develop draft qualification and units of competency</li> <li>Hold Technical Committee meeting seeking feedback on consultation paper and draft qualification and units of competency (Meeting 2)</li> </ul>

<b>Stage 3 Consultation</b> 19 Jan '26 – 27 Mar '26 (Milestone)	9 weeks	<ul style="list-style-type: none"> <li>Upload to HumanAbility's website draft qualification and units of competency (Milestone 2)</li> <li>Send communique to all key public and government stakeholders including RTOs currently delivering the nationally accredited qualification that consultation is open and details on how feedback can be submitted.</li> <li>Conduct: <ul style="list-style-type: none"> <li>8 face to face workshops</li> <li>3 virtual workshops</li> </ul> </li> <li>Consultation log made visible on HumanAbility's website with the log regularly updated with feedback.</li> </ul>
<b>Stage 4 Incorporating Feedback</b> 30 Mar '26 - 24 Apr '26	4 weeks	<ul style="list-style-type: none"> <li>Review all feedback received</li> <li>Meet with Technical Committee to inform decisions around conflicting stakeholder feedback and proposed treatment (Meeting 3)</li> <li>Update consultation register and actions taken including justification where required</li> <li>Summary of consultation feedback and actions taken published on HumanAbility's website</li> <li>Draft qualification and units of competency finalised</li> </ul>
<b>Stage 5 Senior Officials Check</b> 27 Apr '26 – 22 May '26	4 weeks	<ul style="list-style-type: none"> <li>Consultation held with Commonwealth and state/territory Senior Responsible Officers</li> <li>Feedback incorporated into final documentation</li> </ul>
<b>Stage 6 Finalisation and Submission to Assurance Body</b> 25 May '26 – 17 July '26	8 weeks	<ul style="list-style-type: none"> <li>Internal QA of materials conducted</li> <li>Qualification and units of competency uploaded onto the VET National Training Register in draft format</li> <li>Companion volume updated to reflect changes to the training package and including mapping information</li> <li>Draft submission finalised and submitted to the Assurance Body for consideration</li> </ul>
<b>Stage 7 Assurance Body and Skills Minister's Endorsement (milestone)</b> 8 Jun '26 - 17 Jul '26	6 weeks	<ul style="list-style-type: none"> <li>Provision of any additional information the Assurance Body requires</li> <li>Submission presented to Skills Ministers for endorsement (Milestone 3)</li> </ul>
<b>Stage 8 Post endorsement</b> 20 Jul '26 – 28 Aug '26	6 weeks	<ul style="list-style-type: none"> <li>Endorsed training products and associated companion volume released on the National Register of VET</li> <li>Website updated with final outcomes of the project</li> <li>Communique sent to all RTOs delivering the qualification and ASQA advising of the entry requirement changes</li> <li>3 virtual professional development workshops held on the new qualification</li> </ul>

### 5.3 Consultation questions

Consultation questions will be developed by the project team and refined by the Technical Committee. Consultation with stakeholders will be structured to:

- Understand changes to the sector and the skills, knowledge, practice and requirements needed for the training products under revision, as well as the current workforce, skills gaps, challenges, shortages, opportunities and potential solutions.
- Identify functions that are common across all settings/specific settings and pathways within the sector, and inform changes for the qualifications, units of competency and skill sets.
- Provide advice on the development of resources, guidance on delivery and pathways information.

## 6. Communications

### 6.1 Communications objectives

- Raise awareness of the project and its objectives among health admin and practice management stakeholders.
- Promote genuine, inclusive consultation opportunities, key dates, project progress and outcomes to stakeholders through a variety of communications channels.
- Foster the involvement of a diverse range of stakeholders to gather rich and valuable industry insights, experience and expertise to inform the project.
- Build stakeholder trust and credibility through effective, timely, and transparent communication.
- Ensure an accessible and inclusive communications approach in line with the Australian Government Style Guide (<https://www.stylemanual.gov.au/accessible-and-inclusive-content>).

### 6.2 Communications methods

Communications channel / tool	Purpose / Details
<b>Fact sheet</b>	Provide an overview of the project and how to participate. Includes link to website/project page.
<b>HumanAbility website</b>	Provide a dedicated webpage where all project information and activities can be accessed easily, outline key details of the project, timelines, activities in preparation for consultation and communication across all channels. Links for stakeholders to register interest, provide submissions and feedback, register for consultation sessions and access project updates.
<b>Emails</b>	Provide information to stakeholders around participation opportunities and project's progress.
<b>HumanAbility newsletter articles</b>	Provide project updates in HumanAbility's monthly newsletter.
<b>Social media</b>	Publish project consultation opportunities, updates, and other activities on HumanAbility's LinkedIn and Facebook accounts to alert followers, increase HumanAbility's social media reach through stakeholders sharing content.

Communications channel / tool	Purpose / Details
	Direct people to the project webpage and encourage project engagement.
<b>Industry news media</b>	Leverage relationships with key stakeholder organisations and ask them to share our project consultation opportunities and other activities.
<b>Connect and communicate with networks</b>	<p>Contact and link in with industry networks, peak bodies, existing workforce committees/groups and IAC networks to promote consultations.</p> <p>Identify and connect with communications departments of industry stakeholders to encourage promotion of consultation activities</p> <p>Email key messages about the project, image/s, information sheet</p> <p>Tag organisations in social media where relevant – link to website consultation page.</p> <p>Link in with industry events/meetings and hand out material (e.g. info sheet)</p>
<b>Regular updates and meetings with STAs, /ITABs/CMM</b>	Provide status reports and updates via emails and regular meetings. These activities will occur throughout the project to ensure STAs/ITABs/CMM are kept informed and abreast of any issues or concerns raised during the project.
<b>Events/speaking engagements</b>	Attend external events/speaking engagements or host HumanAbility events, online or in person – providing updates to stakeholders
<b>Resources</b>	Publish resources - the companion volume will be updated to reflect the new qualifications, skill sets and units of competency, along with guidance on delivery, pathways and mapping information.

## 7. Feedback and Consultation Log

Stakeholder feedback will be gathered primarily through consultations, workshops and engagements, as well as surveys, and then quantified, analysed qualitatively (thematic analysis), with outcomes/response tracked as required by the Training Package Organising Framework.

Stakeholders may also submit feedback via the Training Product Advice Service (web form) and the project email address [trainingproducts@humanability.com.au](mailto:trainingproducts@humanability.com.au), which appears on the project page.

The consultation log will capture individual feedback, the organisation name, stakeholder type and the method of communication/consultation. Stakeholder names and contact details will also be collected to enable HumanAbility to clarify and follow up on the feedback if needed. However, these are not included in the published version of the log and are not submitted to the funding body.

As the feedback is reviewed, the action taken in response to the feedback will be documented in the consultation log. Where feedback is not incorporated, the rationale for this will also be documented.

Where feasible, the themes identified from consultation workshops will be added to the consultation log. The consultation log will be published on the project page after consultations and incorporation of feedback is complete.

## 8. Evaluation

The effectiveness of the Consultation Strategy will be evaluated using the following measures:

- analysis of stakeholder type and locations
- number of interviews achieved in pre-draft and functional analysis work
- attendance at consultation workshops
- number of dedicated website page visits and submissions made in the portal
- social media posts, engagement and reach (on HumanAbility social media pages and other social media pages)
- newsletter articles / news items published by stakeholders
- meetings held / attendance / topics
- an increase in enrolments and completions of the relevant qualifications.

The Technical Committee and Industry Advisory Committee will also be asked to provide advice relating to the effectiveness of the Consultation Strategy in driving project outcomes.