Dementia Australia

Support. Change. Prevention.

HumanAbility review of aged care worker qualifications

October 2026

What needs to change?

- People living with dementia make up a significant proportion of those using aged care services. Dementia is also expected to drive much of the future demand for aged care.
- There is currently no requirement in aged care legislation or regulation for aged care workers to have a baseline qualification in dementia care.
- Current regulatory requirements require some aged care providers to provide competency-based dementia education, but do not set clear expectations for the content, standard or level of training.
- Qualifications need a stronger focus on practical, person-centred dementia support, supported decision-making, trauma-informed care and responding to changed behaviour.

What is Dementia Australia recommending?

- Maintain CHCAGE011M Provide support to people living with dementia as a core unit in the new Certificate III in Person Centred Support and Certificate IV in Ageing Support.
- Make CHCCCS044 Follow established person-centred behaviour support a core unit for both residential aged care and aged care in the home and community specialisations in the Certificate III.
- Strengthen training in human rights, supported decision-making, trauma-informed care, responding to distress and changed behaviour, and reducing the use of restrictive practices.
- Make dementia training at Certificate III level more practical and reduce complex knowledge requirements that do not reflect workers' hands-on care skills.

If actioned, what impact could these recommendations have?

- Aged care workers could be better equipped to provide high-quality, person-centred dementia care.

- Workers could be better prepared to support people experiencing distress or changed behaviour and use the least restrictive approach to care.
- Training could better support the rights, choices and involvement in decision-making of people living with dementia.
- More practical assessment could better reflect the skills aged care workers need in their day-to-day work.

How has Dementia Australia advocated for this position?

- Dementia Australia provided a submission to the HumanAbility Aged Care, Disability, Leisure and Health Qualification Review, calling for stronger dementia capability across aged care qualifications that is more focused on the practical requirements of person-centred dementia care.

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HumanAbility review of the Aged Care, Disability, Leisure and Health Qualification training products

Dementia Australia submission October 2026

Dementia Australia welcomes the opportunity to provide feedback to this important review, as the national peak body for people living with dementia, their families and carers. Our submission is informed by our direct engagement with people impacted by dementia, as well as our extensive engagement across aged care, health and disability sectors.

Dementia Australia is also a Registered Training Organisation and, through the Australian Government funded Dementia Training Program, one of the largest providers of dementia-specific education and training in Australia.

This unique combination of advocacy, service delivery, consumer engagement and workforce development provides us with direct insight into the challenges, opportunities and capability needs of the aged care workforce. The feedback and recommendations in this submission are grounded in both the lived experience of people impacted by dementia and our practical experience delivering dementia capability and workforce development initiatives at scale.

Dementia is the leading cause of death nationally and one of the leading causes of disability[1]. There are 446,500 Australians living with dementia, expected to increase to more than 1 million by 2065 [2]. People living with dementia make up a significant proportion of those accessing aged care services and dementia is expected to drive much of the demand for future residential care [3].

The skills and training of aged care workers are a significant driver of care outcomes and quality of life for older people living with dementia. System wide strategies focussed on uplifting workforce capability are an opportunity to improve care quality. Dementia capability is also important for the disability workforce when supporting people living with dementia aged under 65 and people who age within the National Disability Insurance Scheme who develop dementia in later life.

Currently, there is no requirement in aged care legislation or regulation for aged care workers to have a baseline qualification in dementia care. Some aged care providers require that staff have or are willing to obtain a Certificate III in in Individual Support. No data is available showing how many aged care workers hold a Certificate III in Individual Support or whether they have completed the dementia unit of competency.

A recommendation was made by the Royal Commission into Aged Care Quality that the aged care workforce should be trained in dementia care [4]. In 2025 the Inspector-General of Aged Care also called for the Government to mandate trauma-informed dementia training for all aged-care workers [5].

There have been some positive developments, including the requirement under the Aged Care Quality Standards that aged care providers in registration categories 4, 5 and 6 which deliver higher intensity services, ensure that their workforce has access to competency-based training in caring for people living with dementia. However, the requirements fall short by not specifying the expected content, standard or intensity of training or acceptable performance against the criteria.

Dementia Australia maintains that education and training in dementia should be mandatory for all aged care workers. We regularly received feedback from people living with dementia and carers about individual experiences and systemic issues related to workforce capability which impact on quality of life for people living with dementia accessing aged care services, particularly in relation to supporting people with changed behaviour.

Below we provide detailed feedback on the units of competency comprising the Dementia Support Skill Set as well as broader comments on the structure and content of the qualifications Certificate III in Person Centred Support and Certificate IV in Ageing Support.

Recommendations

1. Maintain *CHCAGE011M Provide support to people living with dementia* as a core unit in both the Certificate III in Person Centred Support and the Certificate IV in Ageing Support.
2. Make *CHCCCS044 Follow established person-centred behaviour support* a core unit for both the residential aged care and aged care in the home and community specialisations of the Certificate III in Person Centred Support.
3. Include a stronger focus on human rights, supported decision-making, trauma-informed care, behaviour de-escalation and support, and minimisation of restrictive practices throughout units in the Certificate III Person Centred Support and the Certificate IV in Ageing Support.
4. Recalibrate the knowledge evidence requirements for *CHCAGE011M Provide support to people living with dementia* to be better aligned to Certificate III competency level and increase the focus on assessment of practical skills.

Dementia Support Skill Set

The Dementia Support Skill Set includes the units of competency *CHCAGE011M Provide support to people living with dementia* and *CHCCCS044 Follow established person-centred behaviour support*.

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Dementia Australia strongly supports *CHCAGE011M Provide support to people living with dementia* being a core unit in the new Certificate III in Person Centred Support and anticipates that this will make a positive contribution to the skills and experience of both disability and aged care workers.

We recommend that C*HCCCS044 Follow established person-centred behaviour support* be a core unit for both the Residential Aged Care and Aged Care in the Home and Community specialisations. Given the significant likelihood that aged care workers in both contexts will be supporting people with changed behaviour, this unit should not be an elective.

A stronger focus on minimisation of restrictive practices should be included with a sufficiently developed requirement for aged care workers to understand causes of distress and changed behaviour, trauma informed approaches, positive behaviour support, implementing least restrictive approaches, inappropriate use of restrictive practices, and the regulatory and reporting obligations for restrictive practices in aged care settings.

We are also concerned that the Certificate IV in Ageing Support does not include *CHCCCS044 Follow established person-centred behaviour support* or other training in support for people with changed behaviour or related to the use of restrictive practices. These are essential skills for aged care workers and critical to the provision of quality dementia care and which do not appear to be sufficiently developed in *CHCAGE011M Provide support to people living with dementia*.

Dementia Australia also notes that there is insufficient emphasis on human rights and supported decision-making in dementia across the Certificate III in Person Centred Support. There should be stronger reference to understanding fluctuating capacity and supporting people with cognitive impairment to participate in decision-making, communicate preferences and exercise capacity. Content on working with family and carers should include understanding and working within substitute decision-making arrangements. This would be consistent with the new Aged Care Act and strengthened rights-based approach.

CHCAGE011M Provide support to people living with dementia

In our capacity as a Registered Training Organisation, Dementia Australia's general feedback on *CHCAGE011M Provide support to people living with dementia* is that the level of the unit is pitched above Certificate III competency. It is conceptually heavy and assessment-intensive and would seem more applicable at Certificate IV level. The unit should be more oriented to providing skills, training and assessment in practical, person-centred support to people living with dementia.

Assessment requirements – Performance Evidence

- This is a heavy assessment load, and it can sometimes be hard for participants to access two or more people living with dementia for assessment purposes

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- Provide more extensive and clearer instructions about how one of the two cases may be completed via a high-fidelity simulation or an interactive, role-play scenario

Assessment criteria – Knowledge evidence

- The unit leans heavily on knowledge evidence to a depth which is not correctly aligned to Certificate III level. For example, the knowledge evidence currently requires complex, academic written explanations about the neurodegenerative pathologies of the various types of dementia. For many people in the aged care workforce for whom English is not their first language, this may create a barrier to learning and does not reflect their actual hands-on care skills.
- In relation to the conditions that cause dementia, there should be clearer direction to focus on 4 to 5 main types.
- The role, scope and breadth of assistive technologies should be more clearly specified, and in plain language.
- The knowledge evidence should directly map to the wording used in the Aged Care Quality and Safety Commission's Strengthened Quality Standards and guidelines to ensure consistency.
- Consider reducing the amount of information in the knowledge evidence and other criteria to be more aligned to Certificate III level.

Assessment Conditions

- Consider adding to the Assessment Conditions an allowance stating that some of the more complex information required in the knowledge evidence can be assessed using verbal questioning, structured professional interviews, or other visual identification methods and guidance.

Conclusion

Dementia will continue to shape the scale and demand profile of aged care services in coming decades. People living with dementia already comprise a substantial proportion of those accessing both residential and in home care, yet the workforce responsible for supporting them is not consistently equipped with the skills, training or support required to deliver high-quality, person-centred care.

Implementing our recommendations would assist in aligning the training packages more closely with the rights-based approach underpinning the new Aged Care Act, the Strengthened Quality Standards and the need for an aged care workforce capable of providing high-quality dementia care to an increasingly prevalent cohort.

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Thank you again for the opportunity to provide feedback. We would be happy to discuss our submission in more detail if that would be useful. The Dementia Australia Policy and Advocacy Team can be contacted on **policy@dementia.org.au**

References

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