

## Senate Standing Committee on Education Employment and Workplace Relations

### QUESTIONS ON NOTICE Budget Estimates 2011-2012

#### Agency - Comcare

DEEWR Question No. EW0114\_12

Senator Abetz provided in writing.

#### Question

Refers to previous Question No [EW0723\\_11](#)

Follow up questions: 1. Did the review recommend that HSR training be exclusively face to face? 2. Comcare writes in this answer that the majority of survey respondents liked face to face training. Everyone did not want face to face training. Given that there was not an exclusive preference for face to face training, simply a majority, this clearly explains the review recommendation that it remain "predominantly" face to face simply to serve the HSRs needs. Clearly the expression predominantly was not meant to exclude other options which were wanted by some people. Now that his mistake has been identified will Comcare conduct an urgent review and reinstate courses under the previous arrangement?

#### Answer

*Comcare has provided the following response.*

It is correct that the recommendation in the report stated 'that HSR training be predominantly face-to-face; five days in length delivered as one block or two short blocks.'

It is also correct that the 2010 Guidelines require that 'full courses should comprise a minimum of 35 hours face to face training over a minimum of five days, with some flexible options available to accommodate the needs of the HSR providing that flexible arrangements offer the minimum of 35 hours of face to face training and include the mandatory practical skills development activities.'

The Guidelines also state 'flexible options could include one block of five consecutive days, two days plus three days or one day per week over five weeks, and that once commenced, the training must be completed within a six week period.'

It should be noted that Comcare considers the supervised workplace inspection activity to be 'face-to-face' training. Comcare does not consider that the wording of the Guidelines is inconsistent with the recommendation of the report.

Dr Culvenor's course is approximately 53 per cent 'self-directed' learning. It would not be considered 'predominately face-to-face' even if that phrase had remained in the Guidelines. That type of delivery was not endorsed by the reviewers as delivering on the required learning outcomes for HSRs.

In any event, the report was tabled at the December 2009 Commission meeting. The draft guidelines were discussed at the March 2010 Safety, Rehabilitation and Compensation (SRCC) meeting; referred to a sub-committee; and then agreed to in an out-of-sessions meeting in April 2010. The SRCC is a tripartite body with representatives from employers (including licensees), unions, government and community.

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Dr Culvenor has not applied to have his course reaccredited under the revised Guidelines, despite being granted an extensive extension of time to do so. As such, his accreditation expired on 31 December 2010.