



July 2008

**Submission from the Dietitians Association of Australia
Review of Australian Higher Education**

The Dietitians Association of Australia (DAA) commends the Australian government on their commitment to reviewing high education policies.

DAA is the National Association of the dietetic profession and is a leader in nutrition and advocates for better food, better health, and better living for all. DAA represents over 3500 members. DAA accredits the Australian dietetic tertiary courses and is therefore vitally interested in ensuring that standards are high and that courses generate graduates in sufficient numbers to meet workforce needs.

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1. Higher education in modern Australia

1. How adequate is the statement of functions and characteristics of higher education in modern Australia?
 - DAA agrees that the statement of functions and characteristics (pages 2,3) addresses issues of concern relevant to the professional education of dietitians.
 - As a large part of dietetic training occurs outside universities, it is important that the functions and characteristics of the higher education sector are complemented by industry to ensure that a vibrant vocational component of training programs can be delivered, and that the needs of industry with respect to development of its workforce are met.

Section 3.1 Meeting labour market and industry needs

2. Are there impediments to the higher education sector being able to innovate in the development of courses and programs? What are these impediments and how could they be removed?
 - Practicum (or placements) in acute care, public health and community health settings is an essential component in undergraduate professional preparation as it links the lessons of the classroom with the complexities of applied theory in

practice. However placements are also a rate-limiting step because despite some innovations in nutrition and dietetics teaching there is a limit to the number of students who can be placed. Additional impediments to innovation relate to the availability of practitioners who can also fulfil the role of supervisor, where availability is limited absolutely by numbers of practitioners in the workforce, and by their competing demands for service delivery. There is also a need for training of supervisors in new models of supervision, and research into new models of supervision. Removing the barriers will require the health sector to take more responsibility for employing sufficient practitioners for service delivery and training of student dietitians, and for universities to provide staff to support supervisor development and research.

- Further to the point above relating to a shortage of workforce to train dietitians in the practicum component of programs (clinical, community and food service management) there is also a shortage of an academic workforce for dietetic training within the higher education sector. Impediments to the growth of the academic workforce are lack of positions, inadequate remuneration and inadequate pathways from clinical, public health or food service management specialists from the health sector to the higher education sector. Namely, experienced clinicians would have to take a severe reduction in remuneration and invest in many years of training (for a higher degree) to develop a career in academia. Greater flexibility in academic positions and joint health sector/academic senior appointments would facilitate growth in this workforce.
 - The training of dietitians in Australia is generalist in nature and this limits specialist training at the undergraduate level. This is appropriate given Australia's limited market in comparison to countries such as the United States of America where more specialised courses can be undertaken with good prospects of employment in the relevant areas on graduation. The higher education sector, in conjunction with DAA, has a role in developing post-graduate courses to support early career development and to support specialist training.
3. What are the appropriate mechanisms at the national and local level for ensuring higher education meets national and local needs for high level skills? What is the role of state and territory governments in this area?
- National accreditation bodies, such as the Dietitians Association of Australia (DAA), have an important role in ensuring that graduates from any course in Australia can be employed in any state or territory. The good relationship between DAA and industry at a local level as well as the national level has been essential in ensuring that higher education meets national and local needs for high level skills. State and territory governments have a role in providing workforce infrastructure for allied health professions, such as nutrition and dietetics, to monitor workforce needs and to advocate for change.
 - The Dietitians Association of Australia, as the accrediting agency of dietetic programs, has the responsibility to monitor changes in skills and competency requirements of graduates to meet the changing health needs of the population. The DAA is in a position to advocate and mandate specific training requirements of graduates to meet special needs, for example requirements to meet standards in

relation to Indigenous health and mental health are being introduced in response to identified need.

4. How adequate are the mechanisms for aligning supply and demand of graduates? How do pricing and labour market signals impact on student choices?
 - The mechanisms for aligning supply and demand of graduates are not coordinated. There will be an increasing demand for dietitians as the extent of problems of nutrition-related diseases such as malnutrition, diabetes, obesity and cardiovascular disease are understood, and programs are developed to respond to such problems at a clinical and public health level. However the university sector independently determine whether they will offer a dietetics program, although they do not always appreciate how important it is to gain the cooperation of local industry. Needs assessments undertaken by universities do investigate demand for graduates.
 - There are many drivers of workforce growth and workforce location (eg private or public sector), for example access to Medicare rebates introduced 5 years ago has lead to more than a doubling of dietitians working in the private practice sector since the introduction of the Medicare items for allied health.
 - If Medicare is further enhanced to give better access to allied health the private practice sector will continue to expand.
 - Access to professional placements and the relatively low funding to universities for allied health students (compared with other health professions) are the key limitations to growth.
5. Are there particular examples of good practice where you can demonstrate either rapid response to skill shortages or successful initiatives to improve generic skills?
 - The DAA has recently completed a revision of the national competency standards for entry-level dietitians. The standards are a fundamental component of the accreditation manual for training schools. This revision will ensure that graduates have the required knowledge, skills and attitudes to enter the profession competently, safely and confidently with skills applicable to the contemporary health environment.
6. How effectively are Australian higher education institutions responding to demographic change, especially in providing lifelong learning to meet the challenge of the ageing population and the need for upgrading of skills and re-training?
 - Nutrition and dietetics is a female-dominated profession and a number of practitioners take a career break while their families are young. However there are no formal re-entry programs to support the return of this valuable resource to the workforce, primarily because demand is low and therefore they are not financially viable for the university sector. More joint initiatives between the higher education sector and industry are needed to support re-entry programs for nutrition and dietetics, and other allied health professions.

- A number of universities have recently introduced post graduate programs specifically designed to develop advanced practice skills.
7. What is the relevance and applicability of the findings and approaches proposed in the United Kingdom paper, Higher Education at Work, for increasing skills levels in the workforce to Australia?
- The UK paper highlights important problems that are relevant to dietetic training such as up-skilling the current workforce and increasing movement between the business sector (in the case of dietetics primarily the health sector) and academia. There are currently a number of initiatives in Australia such as the DAA run Advanced Practitioner Model that recognises high level expertise in dietetic practice, and the rapid growth in conjoint appointments between the health sector (primarily public hospital) and academic sector.
 - Up-skilling the current workforce using a traditional higher education format (e.g. Masters programs, PhDs) can be difficult due to time and cost constraints. If there were better cooperation between the business sector (health and industry) and academia and appropriate funding available (such as targeted scholarships) this will enable more practising dietitians to access higher education programs particularly for formal research skill development.

Section 3.2 Opportunities to participate in higher education

8. Should there be a national approach to improving Indigenous and low SES participation and success in higher education?
- Undoubtedly there should be a national approach to improving Indigenous and low SES participation and success in higher education. Approaches should operate on a number of levels, from encouraging general participation in primary and secondary education, to identifying individuals or groups with potential for progression to higher education. For students who complete secondary education, the higher education sector should put great emphasis on making tertiary education available as close to home as possible, and where this is not possible there must be programs in place to support Indigenous students away from home academically and socially.
 - The higher education sector has a role to play in providing career options for Indigenous graduates who aspire to roles beyond Aboriginal Health Worker or Environmental Health Worker i.e. there are options in both the VET sector and university sector for professional advancement. Making the career pathways clear and accessible is important.
 - More support to students once in university programs to reduce current high attrition rates is important.
 - Professional associations should be funded to work with the vocational and higher education sector in developing systems to support Indigenous and low SES students (eg. Professional mentoring programs)

- Access to fee support and living allowance would be critical to the successful participation of low SES and Indigenous Australians in higher education programs.
 - Dietetic training, particularly the final year, is very intensive and currently only offered on a full time basis. This makes it very difficult for students to engage in any form of employment during this final year. This places considerable financial strain on students which is exacerbated when placements are undertaken in rural and remote regions which impose transport and accommodation costs in addition to ordinary living expenses. Specific funding support programs for this intensive year or greater flexibility in teaching are important considerations to alleviate this financial strain.
9. If you support a national approach to improving Indigenous and low SES participation and success how do you see it being structured, resourced, monitored and evaluated?
- Improvements in this area must be led by the active involvement of Indigenous and low SES stakeholders.

Section 3.3 The student experience of higher education

10. How can the quality of the student experience within Australia's higher education institutions be monitored nationally? Is there evidence that declining student: staff ratios have impacted on the quality of the student experience?
- Surveys of all undergraduates and post-graduate students, or in-depth interviews with sample populations of these groups would be useful and can be implemented easily with modern on-line surveys.
 - DAA monitors these surveys as part of their accreditation process and has developed significant knowledge on this issue in relation to the dietetics profession.
 - DAA consults with dietetic educators who report increasing pressure to train more students with reduced staffing levels. Dietetic educators are forced to look at alternative teaching modes with less face to face contact. The effectiveness of alternative teaching modes and the impact on student satisfaction and competency skill development needs to be evaluated.
11. How can the quality of learning outcomes in Australian higher education be measured more effectively?
- Surveys or in-depth interviews of employers and graduates could measure the quality of learning outcomes in Australian higher education.
12. How do institutions measure the quality of their learning outcomes and how do they know they are nationally and internationally competitive?
- Being nationally and internationally competitive is not only a function of the quality of graduates but also of the rules imposed by countries on overseas workers. Dietitians have access to labour markets in the UK by having their education and work experience reviewed by the Health Professions Council.

Australian dietetic graduates have a high degree of success in entry to the HPC and are highly sought after by employers in the UK. Australia now has mutual recognition with New Zealand, thus demonstrating international competitiveness. At present DAA is also investigating mutual recognition with Canada and the United States.

- DAA monitors the quality processes of programs via the accreditation process so the identification of national and international benchmarks would be useful.

Section 3.4 Connecting with other education and training sectors

13. To what extent should vocational education and training and higher education continue to have distinctive missions and how should these missions be defined?

- These sectors should have distinctive missions but opportunities to move from the vocational education to the higher education should be further developed, particularly for Indigenous students.

Section 3.5 Higher education's role in the national innovation system

14. By what mechanisms should research activities in Australian universities be supported?

- Research activities can be supported by project grants, particularly to support applied research projects which improve the efficiency and effectiveness of undergraduate preparation. Capacity building grants are another mechanism. Both types of grants should be flexible however to ensure that part-time research is possible, given many practitioners are female with primary home-maker roles.
- Competitive grants that are available to the university sector are often out of reach for practising dietitians who cannot compete with full time academic staff. The availability of more 'early researcher' grants where selection criteria focus on clinical/ work experience and potential for collaboration rather than purely publication record would enable more practising dietitians to engage in research. These types of research funding programs tend to be available (on a smaller scale) through the public hospital sector.

Section 3.6 Australia's higher education sector in the international arena

15. Are there any unintended consequences of the current approach to internationalisation of higher education in Australia?

- One unintended consequence is that considerable resources are expended by the Australian health sector, including dietetics, in providing placements for undergraduates. However, up to 50% of those enrolled in post-graduate dietetic training programs are full-fee paying students from overseas. Such students may not stay in Australia after graduation, but rather will return to their home country.
- Because of the nature of training health professionals, overseas students are often reported to be more time consuming (particularly on professional placement) due to language and cultural difference. Better approaches to supporting these students and acknowledging the potential need to higher levels for teaching/support should be recognised.

16. What is an appropriate role for government in assisting the Australian higher education system to internationalise? On what principles should this role rest and what purposes should it serve?

- In supporting mutual recognition of courses or by assisting in developing recognition systems for international courses.

17. Can you provide any examples of good practice in encouraging local students to undertake study in other countries?

- As post-graduates, not as under-graduates or for entry-level training.

Section 3.7 Higher education's contribution to Australia's economic, social and cultural capital

18. Do you believe that knowledge transfer and community engagement are legitimate and appropriate roles for contemporary higher education institutions? If so, how do you see this additional role for the higher education sector blending with its traditional roles and are there limits to these additional roles?

- There would be roles for certain courses and areas of study, for example health or education. These aspects are essential to allow completion of the objective of some courses.

19. If you think that knowledge transfer and community engagement are appropriate roles for higher education institutions, how do you believe these functions should be funded?

- These functions could be funded through competitive program grants

Section 3.8 Resourcing the system

20. What incentives or unintended consequences are there in the current arrangements for higher education funding?

- Current arrangements for higher education funding limit the supply of graduates onto the market.
- The lower rate of funding per student for allied health (as opposed to nursing and medicine) has a significant impact on the capacity for universities to increase their student numbers even when demand from students and the market is high.
- At present there are few dietitians working in a consultant capacity or as private practitioners in private health care settings who accept undergraduate students on placement. There may be additional opportunities to expand placement programs, but it will require sufficient resources for places in the private sector as well as an attitude that this is acceptable.
- There is currently no funding arrangement for dietetic student training in the public health (community) sector or in food service management facilities. Practitioners in these facilities donate their time to train students. This limits the opportunity to expand these training programs.

21. To what extent are the current funding models adequate to secure the future of Australia's higher education sector? If there are better models, what are they?
- For certain community sectors this may be adequate, but it is not sufficient to encourage participation in Indigenous or disadvantaged groups.