



RWAV Statement on the National Allied Health Workforce Strategy

April, 2025

Rural Workforce Agency Victoria (RWAV) welcomes the National Allied Health Workforce Strategy (the Strategy) and broadly supports the draft proposed. RWAV is heartened by the explicit support for allied health workforce growth and support across the diversity of rural and regional communities, and strongly supports national action towards advancing effective, accessible, and holistic healthcare for all Australians.

RWAV hopes to see the thread of advocacy for rural and remote clinicians and communities flow through each of the actions under Priority Five, and similarly a presence of rural and remote voices throughout delivery under the other four Priorities.

Increasing alternate pathways to tertiary study through the VET sector will be an important element to supporting the rural allied health pipeline. Existing effective strategies could be scaled up to capitalise on already realised benefits and strategies, such as cadetship models which engage allied health students in employment as allied health assistants to keep them engaged with employers in priority health demand locations through to their entry to the workforce. However, the role of the assistant workforce and other VET-qualified professions should be fostered in addition to actions surrounding cultivating alternate pathways to allied health qualifications – treating the allied health assistant role as only a waypoint on the journey to tertiary qualifications may be a risk. RWAV supports and advocates for the Allied Health Assistant workforce to be recognised in the Strategy for its valuable contribution to the health workforce.

Place-based and in-community pathways into the workforce are vital to strengthening the rural health workforce pipeline. Introducing quotas for entry into allied health courses for students of rural origin could be considered for both regional and metro universities. Moreover, universities should be both required and supported to increase and continue to provide allied health offerings in rural settings. This should be a strategic planning decision made in consultation with policy makers and regional stakeholders, rather than a commercially driven one. In addition to rural course offerings, the implementation of the strategy could encourage the provision of flexible course delivery to assist rural students to remain in community while studying. However, in an age of increasingly virtual delivery, the location of the university may not necessarily reflect the student cohort and their population, meaning consideration should be given to the data captured and means of verifying changes in rural education participation over time.

Alongside any intention to grow supervision, teaching and mentoring support, needs to be strategies to support supervisors, teachers and mentors (financially and with additional workforce resourcing) – as it is a current limitation within the existing workforce, and scaling up is not currently possible without intervention. To better support the delivery of supervision, a national accreditation framework could be established.

The intention to grow research that focuses on allied health workforce capability, models of care and their contribution to best practice healthcare is positive, however, RWAV encourages a focus on broadening and deepening the research on the multitude of existing workforce model pilots, projects and initiatives – to build on rather than replicate meaningful work currently underway to support the allied health sector. RWAV also hopes that embedded within this action item would be the creation of pathways to share research findings with not only policy and decision makers, but with the workforce to support place-based workforce development and continuous improvement projects on the macro and micro scale.

RWAV hopes to see mechanisms for further tailoring incentives and structured supports with input from the stakeholders charged with administering the incentives and supports. Future enhancement could better align existing supports with the dynamic nature of allied health care in rural and regional locations, where the strict boundaries of setting and fundholder may be incongruent with the on-the-ground reality. This work should be done in conjunction with efforts to enhance allied health professional mobility across settings.

While in-principal support is certainly present for the Strategy, the implementation plan and associated resourcing will be critical to the success of the Strategy. RWAV looks forward to future opportunities to contribute workforce expertise and supporting implementation planning.



Contact details

E-mail: info@rwav.com.au

Phone: +61 3 9349 7800