

A four-step method you can run yourself

Reclassifying your team under the new HPSS structure

The Health Professionals and Support Services Award classification structure changed on 1 October 2026. It is not a pay rise. It is a reassessment of every health professional you employ, one person at a time, and the rate is the last thing you work out, not the first.

Written for clinics and practices employing psychologists, speech pathologists, occupational therapists and other health professionals. Work through it at your own pace. Each step ends with a short check before you move on.



Before you start, check the award covers them

This guide deals with health professionals covered by the HPSS Award. Where someone's week is mostly coordination or case management rather than clinical work, a different award may apply. Settle that in writing first. Getting it wrong makes everything after it wasted effort.

Step one

Build the facts base from three sources, and expect them to disagree

You need three things for every affected employee, and you need all three because no single one of them is reliable on its own.

Source one

Wage tracker

Current rate, hours, start date, award and classification as recorded today.

This is your baseline, and it is usually the one with errors in it.

Source two

Role profile

What the role is required to do, reviewed and signed off by whoever leads the clinical side.

Not what the role did three years ago.

Source three

Employee survey

Qualifications, registrations, how their week actually splits, who they supervise and who supervises them.

Completed by the employee, in their own words.

**Reconcile the three. Do not treat them as three separate records.**

They exist to be checked against each other. A tracker and a survey can disagree on something as basic as how many hours someone works, or on a start date. Hours change the pay calculation. The start date changes the progression point. Where they disagree, that disagreement is the finding, and it has to be resolved before anyone is mapped to a level.

Before you move on

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|---|---|
| ☐ All three sources held for every affected employee | ☐ Role profiles reviewed and signed off, not inherited |
| ☐ Every disagreement between sources resolved in writing | ☐ Hours and start dates confirmed against payroll |

Step two

What actually decides the level

Four factors. New health professional Levels 1 to 4 map to AQF 5 to 9, with revised minimum qualifications set out in Schedule B of the award.

01	Qualification What level is it, not what field	The AQF level of the actual qualification held, not the field of study. Verify it where you are relying on it.
02	Right to practise Can they practise here, now	Registration, or membership of the relevant professional body, or a completed overseas qualification assessment. Without it, the person may not be a health professional under the award.
03	Duties Required, and corroborated	What the role requires, evidenced by the role profile and corroborated by the employee's own description of their week.
04	Supervision Required, not just happening	Who they are required to supervise, how often, and whether those people describe it the same way. This is the usual evidence for Level 2 and above.
→	The level	The four factors together decide where a person lands. Work the factors, then the rate.

The level does more than set the base rate

It drives progression, allowances, overtime, penalties and leave loading. That is why the classification is the decision and the rate is the consequence.

Before you move on

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|--|--|
| ☐ AQF level verified for every qualification you are relying on | ☐ Right to practise confirmed for each person |
| ☐ Required supervision documented, not assumed | ☐ A level decided for every affected employee |

Six traps

Each of these is a reasonable assumption that the award does not share. All six cost nothing to check and a great deal to get wrong.

Trap 01

The job title

Titles are internal shorthand. The award classifies by qualification, duties and responsibility. Two clinicians with the same title can sit at different levels, and often do.

Trap 02

What they were paid last year

A rate carried over from a previous employer, or set by a predecessor, is not evidence of anything. It tells you what someone decided once, not what the award requires.

Trap 03

Paying above the award

You can pay well above the minimum and still have the classification wrong. The level drives progression, allowances, overtime, penalties and leave loading, not just the base rate.

Trap 04

Assuming the qualification level

An honours degree is AQF Level 8, not 7, and carries a higher minimum. Check the actual qualification, not the field of study.

Trap 05

Overseas registration

A qualification obtained overseas does not automatically make someone a health professional under the award. They must meet the requirements to practise in Australia. Check where any eligibility assessment is up to.

Trap 06

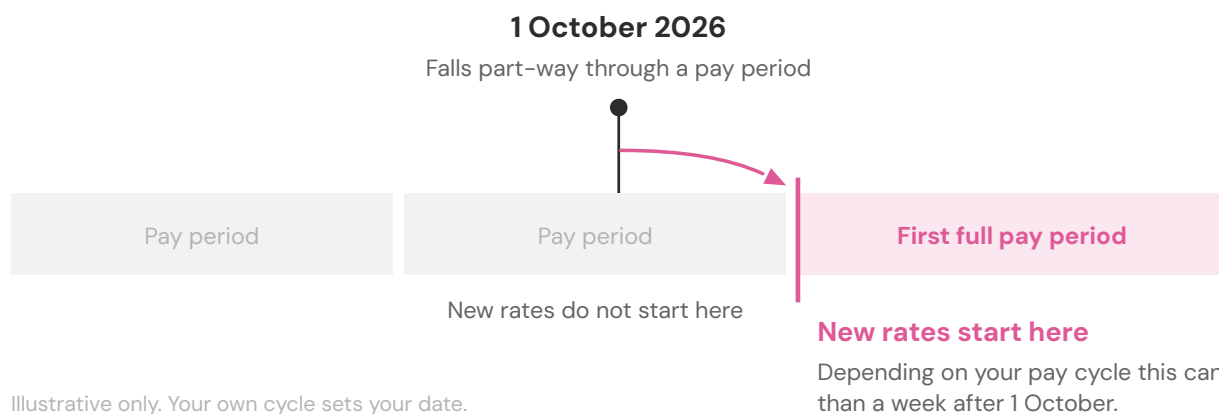
Supervision that is not required

Supervision is the usual evidence for a higher level, but it has to be a requirement of the role, not something the person does informally. Get it in writing, and check that the people being supervised describe it the same way.

Step three

The date most people get wrong

The new rates apply from the first full pay period starting on or after 1 October 2026. That is not 1 October. Applying it early and applying it late are both errors.



Work out your own date and write it down before you touch payroll. The 1 October minimum rates are final and published in the Fair Work Ombudsman pay guide. Check the current guide for your classifications rather than relying on a summary, including this one.

Step four

Finish it properly

A reclassification that lives in a spreadsheet is not finished. Two documents close it out.

Document one

Classification report

Every affected employee, the level they land on, and the evidence that put them there. This is what you produce if anyone ever asks.

Document two

Individual employee letter

What their classification is, what it means, and what happens to their pay. People will hear about this from colleagues. Better they hear it from you first, in writing.

This is general guidance, not advice on your situation

Classification outcomes depend on facts specific to your practice. We recommend you reach out for tailored support before you finalise yours.

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