

ARCS Australia Submission – 2025 Core Skills Occupations List (CSOL) Consultation

Introduction and Authorisation

This submission is provided on behalf of ARCS Australia, the national peak body for lifesciences professionals advancing innovation in healthcare within Australia¹. It is authored and authorised by [REDACTED] in response to Jobs and Skills Australia's consultation on the 2025 Core Skills Occupations List (CSOL). Our comments focus on the critical workforce needs in the clinical research sector, specifically highlighting Clinical Research Associates (CRAs) and related life science roles that currently lack clear occupation classification. We appreciate the opportunity to contribute evidence-based input on occupations vital to Australia's clinical trials industry.

Occupations of Interest: Clinical Research Roles Lacking Clear Classification

Clinical Research Associates and related roles – such as clinical trial coordinators, clinical project managers, and other clinical research professionals – are not explicitly defined in ANZSCO/OSCA, and thus are typically captured under broader “not elsewhere classified” categories. The key occupation groupings relevant to our sector include:

- Life Scientists nec (not elsewhere classified) – *OSCA Code 244699*. This broad category (encompassing various specialisations like *Pharmacologist* and others) has been used to nominate roles such as CRAs and clinical research project staff in the absence of a dedicated occupation code. We urge that Life Scientists nec remain on the CSOL for 2025, with explicit recognition that it covers critical clinical research roles (e.g. *Clinical Research Associate*, *Clinical Trial Monitor*).
- Registered Nurses nec – *OSCA Code 265499*. Experienced Registered Nurses play essential roles in clinical trials (for example, as clinical trial coordinators and research nurses overseeing patient care in studies). Given the importance of these specialised nurses, we support retaining Registered Nurses (nec) on the CSOL to ensure skilled migration pathways for nurses who contribute to clinical research. This is especially important as Australia faces widespread nursing shortages² and those with clinical trial expertise are in particularly short supply.

Note: Due to the absence of specific ANZSCO/OSCA codes for many clinical trial occupations, employers often resort to a combination of generic classifications. For instance, a CRA position might be classified under *Life Scientists nec* or even as a Program or Project Administrator (formerly ANZSCO 511112) to reflect project management duties. This highlights the classification gap – clinical research roles lack a clear, singular occupation title in official taxonomy. ARCS Australia welcomes Jobs and Skills Australia's guidance that submissions should identify specialisations under “nec” codes, and we herein identify “Clinical Research Associate/Clinical Trial Monitor” as a critical specialisation under Life Scientists nec (244699), and “Clinical Trial Coordinator/Research Nurse” under Registered Nurses nec (265499).

Evidence of Skill Shortages in the Clinical Research Sector

The Australian clinical trials workforce is facing an acute skills shortage, particularly in roles such as CRAs and trial coordinators. Multiple data points and reports reinforce this reality:

- **Industry Surveys and Summit Findings:** An ARCS Australia-led national summit in 2025 highlighted an “*urgent capacity challenge*” in the clinical trials sector, with a chronic shortage of skilled trial coordinators and research associates that has become “a critical impediment to Australia’s competitiveness”³. Graduates entering the field are often ill-prepared and view clinical research as a short-term stopover rather than a career, leading to high turnover and a “leaky pipeline” of talent³.
- **MTPConnect & ACTA Analysis:** The Medical Technologies and Pharmaceuticals growth centre (MTPConnect), in collaboration with the Australian Clinical Trials Alliance (ACTA), has documented severe workforce gaps. Their studies (including the REDI Initiative Skills Gap Analysis) conclude that “*there is now a critical shortage of experienced Clinical Research Associates (CRAs) and Clinical Trial Coordinators (CTCs) across the sector*”, and warn that “if unaddressed, these shortages have the potential to severely constrain the sector’s ability to expand”⁴⁵.
- **Current Labour Market Indicators:** Real-time job market data further illustrate the demand-supply mismatch. As of September 2025, there were over 200 job advertisements for Clinical Research Associates in Australia⁶, indicating strong employer demand. Jobs and Skills Australia’s own Occupation Shortage data also show that many scientific and health roles are in nationwide shortage, including numerous allied health professions². While “Life Scientist (nec)” is a broad category, we note that it was included on the 2024 CSOL (albeit flagged for further consultation)⁷. Our on-the-ground experience is that the clinical research specialisations within that category are absolutely in shortage.
- **Stakeholder Testimonies:** ARCS Australia’s membership – comprising clinical trial sponsors, contract research organisations (CROs), hospital research units and individual clinical researchers – consistently report prolonged vacancies and high staff turnover in CRA and trial coordinator roles. For example, at major public hospitals, “*high vacancy rates leave remaining staff overburdened*” and positions can go unfilled for many months⁸. CROs have described needing to redistribute trial monitoring workloads due to unfilled CRA positions, risking burnout of existing staff and delays in trial execution.

Contributing Factors and Impacts

- **Lack of Formal Recognition & Pathways:** Unlike nurses or pharmacists, who have well-defined roles and accreditation, a “*Clinical Research Associate*” or “*Clinical Trials Coordinator*” is not an officially registered profession in Australia³. This ambiguity has contributed to weaker professional identity, making it harder to attract and retain talent³. Career progression is often seen as limited, leading many to exit mid-career³. High turnover further exacerbates the talent shortage⁸.
- **Training Pipeline and Experience Gap:** The nature of CRA/CTC work is such that experience is highly valued – it can take 1–2 years for a new graduate hire to become fully effective⁵. Many CRAs enter as new graduates and require extensive on-the-job training; however, due to the demanding nature of the role and attractive opportunities elsewhere, many do not stay long enough in the position, leading to a perpetual deficit of “experienced CRAs”⁵.

- **Sector Growth and National Interest:** Australia’s clinical trials sector brings investment, innovation, and improved health outcomes. However, workforce capacity is now the rate-limiting factor for growth³. Trial sponsors increasingly cite shortages of trial personnel as a barrier to running studies in Australia³.

Why Migration Support is Needed

- **Evidence of Shortage:** The shortage of CRAs, CTCs, and similar roles is well documented^{3 4 5}.
- **Appropriateness of Migration:** Skilled migration is a highly suitable mechanism to alleviate the short-term shortfall, while domestic training pipelines are being strengthened⁹.
- **Relative Importance and Salary:** CRA salaries typically fall within \$80,000–120,000, exceeding CSOL salary thresholds, demonstrating the appropriateness of skilled migration pathways.
- **Domestic Pipeline:** Despite hundreds of applicants for entry-level coordinator jobs, “few had the necessary skills, and those hired often left within 1–2 years”⁸. This shows why migration support is needed while training pathways mature.

Recommendations and Conclusion

ARCS Australia strongly recommends that Jobs and Skills Australia:

- **Keep “Life Scientists nec” (OSCA 244699) on the CSOL** and explicitly note that it covers *Clinical Research Associates, Clinical Trials Managers and similar life science roles*.
- **Keep “Registered Nurses nec” (OSCA 265499) on the CSOL**, to cover nurses specialising in clinical research.
- **Acknowledge the specialisations of interest** – *Clinical Research Associate, Clinical Trial Coordinator, Clinical Data Manager, Clinical Trials Project Manager*.
- **Support migration policy settings** that allow employers to sponsor skilled CRAs and related staff in shortage.

Australia’s clinical trials sector delivers economic value, investment, and patient benefits, but cannot grow without sufficient workforce. By retaining these roles on the CSOL, JSA can help alleviate immediate shortages while supporting long-term training reforms.

Date: 17 September 2025

References

1. ARCS Australia Clinical Trials Workforce White Paper (2025 Summit Findings).
2. Jobs and Skills Australia – Occupation Shortage Insights (2024–2025).

3. ARCS White Paper Summit Findings (2025).
4. MTPConnect Report “Australia’s Clinical Trials Sector” (2021).
5. MTPConnect REDI Initiative Skills Gap Analysis (2021–22).
6. Seek Australia – Clinical Research Associate job openings (search results, Sep 2025).
7. JSA 2024 CSOL Key Findings Report, Appendix A.
8. ARCS Workforce Summit Case Studies (2025) – Stakeholder testimony.
9. ARCS & MTPConnect Workforce White Paper (2022) – Recommendations on visa settings.