

FORUM OF AUSTRALIAN HEALTH PROFESSIONS COUNCILS

SUBMISSION TO THE SENATE COMMUNITY AFFAIRS COMMITTEE'S INQUIRY INTO NATIONAL REGISTRATION AND ACCREDITATION SCHEME FOR DOCTORS AND OTHER HEALTH WORKERS

The Forum of Australian Health Professions Councils

The Forum of Australian Health Professions Councils (the Forum) is a coalition of the Councils of the regulated health professions. It comprises the:

Australian Dental Council
Australian Medical Council
Australian Nursing and Midwifery Council
Australian Osteopathic Council
Australian Pharmacy Council
Australian Physiotherapy Council
Australian Psychology Accreditation Council
Australian and New Zealand Podiatry Accreditation Council
Council on Chiropractic Education Australasia
Optometry Council of Australia and New Zealand.

The collective expertise of the Councils is in:

- setting educational standards for health professionals to develop safe and competent practitioners able to adapt to changes in professional practice over time
- encouraging improvements in the education and training of health professionals to respond to evolving health needs and practices
- assessing and accrediting education programs
- assessing overseas qualified practitioners
- collaborating and consulting with a wide range of stakeholder bodies and actively engaging members of their profession in the regulation of professional practice
- regional and international developments, capacity building and partnerships.

The Forum supports the aim of national registration for the regulated health professions, and that of national accreditation schemes to ensure practitioners are educated to appropriate standards.

The National Registration and Accreditation Scheme

The Forum welcomes the opportunity to comment on the proposed national arrangements for accreditation of health professional education and training under the National Registration and Accreditation Scheme (NRAS). In doing so it acknowledges the opportunities the Forum has had to engage constructively with members of the National Registration and Accreditation Implementation Project Team and the Project Director, Dr Louise Morauta PSM, and to make submissions during the consultation period.

In this paper the Forum is concerned to comment primarily on 9 (c) in the terms of reference of the Senate Inquiry - *the effect of the scheme on standards of training and qualification of relevant health professionals* while acknowledging that the NRAS will have an effect and impact as indicated in the terms of reference.

This submission, which constitutes a consensus response of the Forum, is confined to issues that are common to all the health professions. Making a submission from the Forum does not substitute for, nor preclude, submissions by each of the member Councils. Each of the organisations will be likely to make separate submissions on issues more germane to themselves.

As the Councils representing the then nine, now ten, health professions named in the NRAS the Forum was established in November 2007 primarily to share expertise and to work collaboratively across several areas of common interest, particularly on good practice in accreditation of education and training and the assessment of overseas-trained health practitioners, and the way in which accreditation and practitioner registration are best linked. Each Council see this development of a means of working collaboratively as a positive outcome of the development of the NRAS and the Forum will continue to work together to develop best practice in accreditation and assessment of overseas trained practitioners across the professions. As other health professions are added to the NRAS the relevant Councils will be welcomed to the Forum.

During the development and consultation phase of the NRAS the Forum has also had observer status in each of the Professions Reference Group and the Registration Reference Group and in their consultations with the National Registration and Accreditation Implementation Project Team.

Accreditation

The accreditation body in accrediting a professional education and training program and provider is undertaking a process that ensures that a university or training body has in place the academic and clinical educators, the education and training facilities, and the processes and resources required to demonstrate quality in graduate outcomes, and teaching and learning outcomes. The focus of accreditation is on quality systems and outcomes, and the inputs, processes, content and outputs related to fundamental aspects of the teaching and learning environment, the operating environment and the education and training program. The accreditation body also encourages flexibility and innovation in training programs and self assessment and evaluation by training bodies leading to continuous improvement of teaching and learning. The Inter-government Agreement (IGA) set out as objectives of the NRAS (5.3) (5.3.a) providing protection of the public by ensuring that registered practitioners are those suitably trained and qualified to practice in a competent and ethical manner and (5.3.c) facilitating the provision of high quality education and training. Rigorous accreditation processes, adequately funded to allow them to be undertaken to the highest standards, undertaken by experienced assessors and best suited to the particular health profession will provide for the quality education and training.

Accreditation standards framework

The Forum welcomes the intention that the Agency will utilise the *Standards for Professional Accreditation Processes* (June 2008) developed by Professions Australia and endorsed by the Forum which outline the principles of accreditation processes as these are in accord with best practice in the health and other professions and with international standards such as the *World Health Organisation/World Federation of Medical Education Guidelines for Accreditation of Basic Medical Education*. These include the critical stipulations that accreditation should operate within a legal framework and should be independent of government and other stakeholders (1.6 and 3.1).

Terminology

The Forum has drawn the attention of the Implementation Project Team to the potential for ambiguity and confusion arising from the use of the term 'standards'. It is used to refer to 'accreditation standards' and also to refer both to governance *and* operational standards set by the National Agency (as set out in the IGA clauses 1.34 and 1.35) and profession-specific

educational and training standards (as defined in Bill A s9(2)) that are the province of the National Boards and their accreditation bodies.

Accreditation panels

The current accreditation bodies consider that the composition of an accreditation panel must remain very flexible and able to be tailored for the circumstances. Each program to be accredited can require unique skills and experience from a panel, and lacking such knowledge can jeopardise the integrity of the accreditation process.

The members of the Forum suggest that the selection of members for accreditation panels be less defined, and be the responsibility of the accreditation body. The Professions Australia *Standards for Professional Accreditation Processes* (June 2008) outlines the responsibility of the accreditation body in having '*policies on the selection, appointment, training and performance review of team members*'..... providing '*... for the use of competent and knowledgeable individuals, who are qualified by experience and training, to assess professional education and training programs.*' (page 5)

The assurance of transparency, independence and accountability by way of wide representation from within and outside the profession in relation to accreditation will come in the several layers within the accreditation body through which accreditation recommendations of the assessment panels are made.

Aims of accreditation

The Forum seeks the inclusion of a statement to the effect that the aims of accreditation include both quality assurance and quality improvement. To achieve this dual purpose it should be explicitly recognised that accreditation is a collegial process based on self- and peer-assessment. Thus the processes of accreditation should provide both public accountability for the quality of training and should also encourage further improvement in the quality of training.

This dual function of accreditation is explicitly recognised in the dual standards for quality assurance and quality improvement set by WHO / WFME for medical education and training and in the section *Aims of the accreditation process* (page 3) of Professions Australia's *Standards for Professional Accreditation Processes* (June 2008).

The Forum is also concerned that where reference is made to, for example '*The purpose of accreditation of education and training courses is to ensure that graduates have the required skills, knowledge and competence to practice safely and meet registration requirements*' such statements should also incorporate the phrase "relevant professional attitudes and behaviours" (in addition to skills, knowledge and competence).

Functions of existing accreditation bodies

A clearer distinction needs to be made between program accreditation and assessment of individual qualifications (usually overseas). These are dual functions of many existing accreditation bodies but they are distinct processes that are undertaken through separate committees.

To avoid confusion between the two terms it is recommended that the term *accreditation* in this context should refer only to program accreditation as different processes are necessary for *assessment* of individual qualifications.

Respective powers of ministerial council, national boards and accreditation bodies.

Ministers have recently assigned existing national accreditation bodies to continue with this function, and that the accreditation body will provide the accreditation standards to the

National Board for approval and recommendation to the Ministerial Council. Where there is no existing national accreditation body a Committee will be established for the purpose. The existing accrediting bodies have been assigned the accreditation functions for a period of three years and it is the view of the Forum that it would be beneficial to extend the mandate of the existing accreditation bodies from the three years to a full accreditation cycle, which in most professions is between five and seven years.

There exists concern regarding the possibly opposing interests of the accreditation bodies and the National Board and Ministerial Council. The accreditation bodies have previously set accreditation and assessment standards through extensive stakeholder consultation. Standards are based on the maintenance and improvement of education and training. By contrast, the interests of the National Board and Ministerial Council are likely to be workforce pressures and funding issues, potentially prompting a compromise in education and training standards and public safety. The Forum believes that there would be considerable improvement in the Scheme to be gained and the independence of the accreditation bodies assured by not requiring the national professional boards to seek Ministerial Council approval of the professional accreditation standards and processes in each of the professions.

Funding

Due to the nature of the tasks involved, the frequent emergence of unforeseen new programs and the collegial model of continual improvement, the expenditure related to accreditation is inconsistent and unpredictable on an annual basis. Funding from the NRAS to accreditation bodies should continue to be based on the current capitation model to ensure the accreditation body is able to cover infrastructure and operating costs associated with the accreditation role. The accreditation functions of the Councils are utterly dependent on the huge pro bono work of the professionals and the goodwill of the expert teams and committees involved.

Governance

The Forum reinforces the need for the bodies undertaking the accreditation and assessment process to be accountable for the use of funds and transparency of processes and decision making. Nevertheless it is concerned that the Councils not be subject to micro management and onerous reporting requirements which would mitigate against their effective functioning.

Contacts

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