Accreditation within the National Registration and Accreditation Scheme (NRAS) – a paper developed by the Accreditation Liaison Group

The Accreditation Liaison Group (ALG) is an advisory group comprised of representatives of the National Boards, Accreditation Authorities and the Australian Health Practitioner Regulation Agency (AHPRA).

The ALG initially developed this paper in July 2014 and submitted it as a background paper to the NRAS review team to inform its public consultation processes. The ALG approved this version of the background paper for submission by the Health Professions Accreditation Councils’ Forum, the National Boards and AHPRA as an appendix to their responses to the NRAS public consultation in October 2014.
Contents

Introduction

Governance
   Model of accreditation
   Independence
   Accreditation Authorities
   Review of accreditation arrangements
   Accreditation and the objectives and guiding principles of the National Law
   Other bodies involved in accreditation
   Accountability

Functions and infrastructure
   Overview of accreditation functions under the National Law
   Funding accreditation
   Mechanisms to support accreditation functions
   Agreement for the accreditation functions
   Terms of reference for accreditation committee
   AHPRA Procedures for the development of accreditation standards

Change and achievements
   Change since the National Scheme
   Achievements against the objectives and guiding principles of the National Law
   The Quality Framework for the Accreditation Function
   Routine reporting on accreditation functions against the Quality Framework
   Processes streamlined
   Publicly available information
   Joint meetings

Future opportunities
   Collaboration and multi-profession approaches

Conclusion

Attachments

Attachment A:  Ministerial Council 8 May 2009 communiqué

Attachment B:  Report to Ministerial Council on review of accreditation arrangements

Attachment C:  Overview of accreditation functions by profession
Introduction

The National Registration and Accreditation Scheme has established a common statutory framework for accreditation bodies that had previously operated within a diversity of profession-specific models. Since the Scheme commenced, the accreditation functions have been exercised within the statutory context of the National Law and the approach to independent accreditation functions within the National Scheme agreed by Ministers. Within the parameters of this model, much has been achieved by the Accreditation Authorities, National Boards and AHPRA.

The objectives and guiding principles of the National Law are broad and extend from matters specific to education and training, workforce sustainability and access to services. The objectives and guiding principles all apply to any body exercising functions under the National Law, including Accreditation Authorities, National Boards and AHPRA, and provide a shared context for the accreditation functions and work on accreditation issues. The Accreditation Authorities, National Boards and AHPRA collectively have worked to develop a common understanding of the National Scheme and its accreditation function, and to effectively implement the accreditation functions of the Scheme.

AHPRA, the National Boards and Accreditation Authorities have increasingly worked collaboratively to identify opportunities for improvement, aspects of accreditation that need some consistency of approach, such as the Quality Framework for the Accreditation Function and reporting and areas within accreditation that lend themselves to cross-professional approaches. Steady progress continues and there is work that is either in the early stages of implementation or that is planned, with the aim of further demonstrating good practice in health profession accreditation.

Governance

Model of accreditation

Judgements about the effectiveness of accreditation need to be made in the context of the model Ministers deliberately established.

The model of accreditation in the National Scheme changed as the National Scheme evolved from the 2008 Intergovernmental Agreement for a National Registration and Accreditation Scheme for the health professions (the IGA). This is evident from consultation documents on key aspects of the Scheme, Ministerial announcements and the National Law, which embodies the final Scheme agreed by Health Ministers. In particular, the model of independent accreditation functions established by the National Law has important differences from both the recommendations on accreditation in the 2005 Productivity Commission Report on the health workforce and the IGA.

In addition to independence, which is discussed separately below, there are other important aspects of the model of accreditation that evolved as the Scheme developed. For example, as the IGA acknowledges, the Productivity Commission recommended that there should be a single national registration board for health professionals, as well as a single national accreditation board for health professional education and training. However, the IGA specifies that there will be boards for each of the professions covered by the scheme and that the boards will be responsible for both the registration and accreditation functions. The IGA goes on to state that “…as a transitional measure, the Ministerial Council … will assign accreditation functions to existing accreditation bodies, with the requirement that within the first 12 months of the new scheme they meet standards and criteria set by the national agency for the establishment, governance and operation of external accreditation bodies.”

Similarly, there was a change from the IGA to the National Law in relation to the ongoing decisions about the bodies to perform accreditation functions. Initially the IGA proposed that following a review of accreditation arrangements, ongoing decisions about whether external bodies should continue to perform accreditation functions would be taken by the Ministerial Council following consultation with the National Boards. However, as announced by Ministers in a communiqué on 27 August 2009 (see http://www.ahwo.gov.au/natreg.asp) and reflected in the National Law, ongoing decisions about the bodies to perform accreditation functions are solely a matter for the National Boards.
Independence

The concept of independent accreditation functions is critical to the model of accreditation in the National Scheme and evolved as the Scheme developed. The IGA explains the concept of independent accreditation as:

“Governance arrangements that provide for community input and promote input from education providers and the professions but provide independence in decision-making”

By the time a consultation paper about accreditation arrangements was issued by the National Registration and Accreditation Implementation Project in late 2008¹ (the accreditation consultation paper), the concept of independence explicitly included independence from government (see statement of principles on p. 6 of the accreditation consultation paper). The accreditation consultation paper referred to the World Health Organisation/World Federation of Medical Education Guidelines for Accreditation of Basic Medical Education (2005) statement that “The legal framework must secure the autonomy of the accreditation system and ensure the independence of its quality assessment from government, the medical schools and the profession”.

Ultimately, Health Ministers further modified the model of independent accreditation to remove their role in approving accreditation standards, as reflected in their 8 May 2009 communiqué (see Attachment A). Under the National Law, Ministers do not approve accreditation standards and only have the power to issue a direction to a National Board about a proposed accreditation standard or proposed amendment of an accreditation standard if (a) in the Council’s opinion, the proposed accreditation standard or amendment will have a substantive and negative impact on the recruitment or supply of health practitioners and (b) the Council has first given consideration to the potential impact of the Council’s direction on the quality and safety of health care.

Consistent with this concept of independence, the accreditation consultation paper proposed that accreditation decisions would be reviewable through a process of internal review by the accreditation body followed by an external appeal. Elsewhere the consultation paper implies that the reference to external appeals implies continuation of the appeal arrangements before the National Scheme, in which education providers ultimately had recourse to review through the courts. The Quality Framework has built on this approach, by requiring accreditation authorities to have complaints, review and appeals processes which are rigorous, fair and responsive, and to report to their National Board on the complaints made.

Ministers have clearly expressed the intention that accreditation functions be independent of all stakeholders including government through the IGA, accreditation consultation paper and the National Law. National Boards, Accreditation Authorities and AHPRA have worked to implement the model of independent accreditation functions consistent with Ministers’ intentions.

Accreditation Authorities

There are currently 11 external Accreditation Authorities and three accreditation committees exercising accreditation functions in the Scheme (see www.ahpra.gov.au/Education/Accreditation-Authorities.aspx). All Accreditation Authorities, whether external authorities or committees, are independent in making accreditation decisions.

Ministers assigned accreditation functions to external Accreditation Authorities for the first ten professions to be regulated under the Scheme, for the first three years of the Scheme. In December 2008, the Ministerial Council appointed Accreditation Authorities for chiropractic, dental care, medicine, optometry, osteopathy, pharmacy, physiotherapy and psychology. In March 2009 an Accreditation Authority was appointed for podiatry and then for nursing and midwifery in 2010.

In contrast, Ministers provided for the National Boards for the 2012 professions to decide whether their accreditation function is to be exercised by an external accreditation entity or a committee established by the National Board. The 2012 professions are relatively small and were not regulated in all jurisdictions before the Scheme commenced (two professions were only regulated in one state or territory prior to the National Law). For two 2012 professions there was not an obvious or well-established body to take on accreditation functions.

The National Law also provided for the review of the accreditation arrangements for the first ten professions after three years.

**Review of accreditation arrangements**

In 2012, there was a review of the accreditation arrangements for each of the first ten professions to be regulated under the National Law. The process for these reviews was considered jointly by the National Boards, AHPRA and the Accreditation Authorities (initially through the Accreditation Liaison Group) and the agreed process provided for a submission from the Accreditation Authority and wide-ranging consultation by the National Board. In this review process, each Accreditation Authority prepared a detailed submission explaining their roles and functions, and providing evidence of their performance against the domains of the *Quality Framework for the Accreditation Function*. These submissions were available publicly and National Boards consulted widely in making a decision about the review of the accreditation arrangements for their profession.

There was significant additional work undertaken by the Accreditation Authorities to prepare for this assessment at short notice, and the very substantial submissions developed had resource implications for the authorities. The submissions continue to be available publicly and are a useful reference on the work of the authorities.

As a result of these reviews, each National Board determined that its Accreditation Authority was meeting the domains of the Quality Framework for the accreditation function and would continue to exercise accreditation functions, most commonly for a five year period. In some cases, individual National Boards have required the relevant Accreditation Authorities to make changes to better meet the Quality Framework and model of independent accreditation decision-making.

The review processes highlighted how much has been achieved in implementing the accreditation component of the National Registration and Accreditation Scheme and demonstrated that the business of accreditation had transitioned well into the new framework. Prior to 2010, health profession accreditation operated outside a national regulatory framework, and although there was a regulatory framework for several professions there was considerable diversity in their operation. The reviews document how Accreditation Authorities have reviewed their governance structures to strengthen their operations as independent entities consistent with the accreditation model established by the Scheme.

Issues raised in the review by stakeholders such as Health Workforce Australia were identified as areas for further consideration by Accreditation Authorities and National Boards (and articulated in the renewed Agreements), such as:

- opportunities to increase cross-profession collaboration and innovation and address the guiding principle of the National Law that the Scheme is to operate in a transparent, accountable, efficient, effective and fair way, for example, opportunities involving joint projects with other accreditation entities or the Health Professions Accreditation Councils’ Forum (the Forum)
- opportunities for each Accreditation Authority to facilitate and support inter-professional learning in its work
- opportunities for each Accreditation Authority to encourage use of alternative learning environments, including simulation, where appropriate.

Individual Accreditation Authorities are reporting separately to their National Boards on their response to these issues.
Accreditation within the NRAS

– a paper developed by the Accreditation Liaison Group 2014

More information is available in the attached report of the review of accreditation arrangements (see Attachment B) which was submitted to Ministerial Council, through the Australian Health Ministers’ Advisory Council and its Health Workforce Principal Committee.

Accreditation and the objectives and guiding principles of the National Law

Accreditation Authorities have worked within the framework, structure and provisions of the National Law to deliver accreditation functions that meet the objectives and guiding principles of the National Law assisted by collaborative work with National Boards and AHPRA.

The objectives and guiding principles in section 3 of the National Law apply equally to all those exercising functions under the National Law i.e. National Boards, Accreditation Authorities and AHPRA. In exercising their functions each must have regard to the objectives and guiding principles.

Objectives directly related to accreditation functions

Section 42 defines accreditation functions quite broadly. The objectives relating to facilitating the provision of high quality education and training of health practitioners (s3(2)(c)) and facilitating the rigorous and responsive assessment of overseas qualified practitioners (s3(2)(d)) relate directly to accreditation functions. Accreditation standards and accreditation of programs of study against those standards are fundamental determinants of the quality of the education and training of health practitioners. Accreditation Authorities develop processes to assess overseas qualified practitioners and undertake those processes, and therefore control the responsiveness and rigorousness of those assessments.

Other objectives

Parts of section 3 dealing with protection of the public, workforce mobility, public access to services, the development of the workforce and innovation in the education of, and service delivery by, health practitioners are also relevant to accreditation functions, as described below.

Protection of the public

The quality of the assessment of overseas qualified practitioners, accreditation standards and accreditation of programs of study determines whether practitioners who complete programs of study or are assessed as qualified for registration have the knowledge, skills and professional attributes to practise their professions and is critical to protecting the public.

Facilitate workforce mobility

The establishment of the National Scheme has facilitated workforce mobility, including by establishing national accreditation standards and processes where in some cases they did not previously exist.

Facilitate access to services in the public interest

If the registration standards, codes and guidelines developed by national boards are unnecessarily onerous or restrictive, this could impact on access to services. Similarly, if the assessment process for overseas practitioners is unnecessarily onerous or unduly restrictive, it could impact on the number of overseas qualified practitioners from professions in shortage who are able to enter Australia to provide services. If accreditation standards are unnecessarily onerous, institutions may decide not to offer courses, impacting on the supply of practitioners and ultimately on access to services.

Continuous development of a flexible, responsive and sustainable workforce

Registration standards, codes and guidelines as well as accreditation standards, the quality of accreditation of programs of study and assessment of overseas qualified practitioners may all influence the attainment of this objective.
Other bodies involved in accreditation

The Health Professions Accreditation Councils’ Forum

The Health Professions Accreditation Councils’ Forum (the Forum) is the coalition of the accreditation councils of the external Accreditation Authorities for the professions regulated under the National Law. The Forum has been meeting regularly since 2007, prior to the commencement of the Scheme, to consider matters of common interest, principally matters concerning the accreditation of education and training programs in the health professions and advocating for good accreditation practices. The Forum has worked to ensure that the requirements of best practice in accreditation and the independence of the accreditation bodies is reflected in the National Law and in the implementation of the Law, and engages with AHPRA and the National Boards in relation to the operation of the Scheme, particularly in the area of accreditation, education and training.

Forum of National Board Chairs

The Forum of National Board Chairs (the Chairs Forum) supports the national boards and AHPRA to achieve good regulatory performance and decision-making by bringing cross-professional leadership and focus to the administration and strategic development of the National Scheme. The Chairs Forum comprises all National Board Chairs, the Chair of AHPRA’s Agency Management Committee and AHPRA’s National Executive. It has a number of committees, including the Accreditation Liaison Group.

Chairs of Accreditation Committees

The Chairs of Accreditation Committees also meet regularly to share their experience and learnings from exercising accreditation functions through Committees and to facilitate collaboration.

Accreditation Liaison Group

The National Boards, Accreditation Authorities and AHPRA have established an Accreditation Liaison Group (ALG) to facilitate effective delivery of accreditation within the National Scheme. The ALG is a committee of the Forum of National Board Chairs and provides an important mechanism to consider shared issues in accreditation across National Boards, Accreditation Authorities (nominated through the Forum) and AHPRA. It is an advisory group which has developed a number of reference documents to promote consistency and good practice in accreditation while taking into account the variation across entities. These documents have been approved by National Boards and Accreditation Authorities. Examples include the Quality Framework for the Accreditation Function.

Accountability

Under the model of accreditation functions established by the National Law, National Boards are ultimately accountable for overseeing accreditation functions through their decisions about the body which will perform accreditation functions. In turn, National Boards are accountable to the Australian Health Workforce Ministerial Council. Accreditation Authorities are accountable for the performance of accreditation functions and their decisions may be subject to appeal through the courts. AHPRA has a role in relation to the agreements with external bodies for accreditation functions, content in the Health Professions Agreements in relation to accreditation committees and the establishment of procedures, such as the Procedures for the development of accreditation standards.

Functions and infrastructure

Overview of accreditation functions under the National Law

Accreditation is the second of the two branches of the National Registration and Accreditation Scheme. The National Law defines accreditation functions as:

- develop accreditation standards and recommend them to the relevant National Board for approval
- accredit and monitor education providers and programs of study to ensure that graduates are provided with the knowledge, skills and professional attributes to safely practise the profession in Australia.
Accreditation within the NRAS

– a paper developed by the Accreditation Liaison Group 2014

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- provide advice to National Boards about issues relating to their accreditation functions
- assess overseas qualified practitioners
- assess overseas accrediting authorities.

Attachment C sets out the accreditation functions exercised by each Accreditation Authority.

Accreditation is an important quality assurance and quality improvement mechanism for health practitioner education and training. It is also the key quality assurance mechanism to ensure that graduates completing approved programs of study have the knowledge, skills and professional attributes to practise the relevant profession in Australia. Accreditation standards and accreditation of programs of study against those standards are fundamental determinants of the quality of the education and training of health practitioners; and by international benchmarking Accreditation Authorities ensure best practice in accreditation standards. Accreditation Authorities develop and undertake processes to assess overseas qualified practitioners, and therefore are responsible for the responsiveness and rigorousness of those assessments.

Accreditation Authorities and National Boards have separate, but complementary, functions under the National Law. For example, as discussed below, the National Law provides that:

- the Accreditation Authority develops the accreditation standards which are then approved by the National Board
- the Accreditation Authority accredits a program of study and the relevant National Board approves the accredited program of study for the purposes of registration.

Development of accreditation standards

Accreditation standards are used to assess whether a program of study, and the education provider that provides the program of study, provides graduates of the program with the knowledge, skills and professional attributes to practise the profession. Each Accreditation Authority publishes on its website the approved accreditation standards for the profession and information about any reviews of the standards and opportunities for stakeholder input to those reviews.

Accreditation Authorities are required to develop accreditation standards for the education and training for the profession through a wide-ranging consultation process and taking into account the requirements of the Procedures for the Development of Accreditation Standards (the Procedures) (see www.ahpra.gov.au/Publications/Procedures.aspx). The Procedures also apply to amendments to an accreditation standard. The Procedures are currently being updated to include engaging with the Office of Best Practice Regulation about regulatory impacts, and this step is occurring in anticipation of the revised Procedures. Proposed accreditation standards are submitted by the Accreditation Authority to the National Board for approval.

The National Board must decide whether or not it approves the proposed accreditation standards submitted by the Accreditation Authority.

Assessment and accreditation of education programs and providers

The Accreditation Authority:

1. assesses education and training programs of study, and the education providers that provide the programs of study, against the approved accreditation standards to determine whether the programs meet the approved accreditation standards, and
2. advises the National Board of its accreditation decision – i.e. whether program of study, and the education provider that provides the program of study, meet an approved accreditation standard for the profession; or the program of study and provider substantially meet an approved accreditation standard for the profession and the imposition of conditions on the approval will ensure the program meets the standard within a reasonable time.
Approval of the accredited programs of study for registration purposes

When a program of study has been accredited, the relevant National Board considers whether it will approve, or refuse to approve, the accredited program of study for the purposes of registration. Only graduates of approved programs are qualified for registration under s. 53(a) of the National Law. A searchable list of approved programs of study is available on this website.

Monitoring of accredited programs and education providers

The National Law requires Accreditation Authorities to monitor accredited programs and education providers to ensure that the authority continues to be satisfied that the program and provider meet an approved accreditation standard for the profession. Although Accreditation Authorities already had monitoring processes in place before the National Scheme commenced, the introduction of statutory requirements for monitoring strengthen consistency and improve its effectiveness as a quality assurance mechanism to ensure that graduates of approved programs of study have the knowledge, skills and professional attributes to practise the relevant profession.

Effective approaches to monitoring involve substantial work for Accreditation Authorities and education providers. Regulation of monitoring is changing the dynamic of accreditation and has brought much more of a focus on ongoing review against the standards. Accreditation Authorities are now providing more thorough reporting on their monitoring work.

Assessment of overseas qualified practitioners

Ten Accreditation Authorities (see Attachment C) assess overseas qualified practitioners, with varying approaches and requirements which typically include a desktop qualifications assessment and clinical examination, but also often involve a written examination, and may involve a portfolio assessment or requirement for orientation to Australian practice.

Assessment of overseas assessing authorities

Nine Accreditation Authorities (see Attachment C) assess overseas assessing authorities, and have established competent authority pathways, which provide streamlined assessment processes for certain cohorts of overseas qualified practitioners. The competent authority pathways are necessarily specific to the particular characteristics of the relevant professions and assessing authorities.

Funding accreditation

Each of the Accreditation Authorities that existed prior to the Scheme had a different model of funding their accreditation activities although there were some common features. These models included contributions from the relevant state and territory registration boards on whose behalf the authorities carried out accreditation activities – albeit generally without a statutory basis. It is clear from the IGA and consultation documents from the development of the Scheme that the Scheme would be self-funding from registration and accreditation fees. The IGA states (at para 12.6): Where appropriate, registration fees will continue to contribute to the accreditation function and transitional arrangements will apply as necessary.

The guiding principles of the National Law require the Scheme to operate in a transparent, accountable, efficient, effective and fair way, and fees paid under the Scheme (including Accreditation Authorities’ fees to education providers) must be reasonable having regard to the efficient and effective operation of the Scheme. The Quality Framework for the Accreditation Function requires that, in setting its fee structures, each Accreditation Authority balances the requirements of the principles of the National Law and efficient business processes.

Proportionally, accreditation is a modest cost to the National Scheme. For most National Boards a small percentage of their income is distributed to Accreditation Authorities to carry out their required functions under the National Law.

Under current arrangements, each Accreditation Authority derives all or part of its revenue from:

- fees paid by education providers for program assessment and accreditation, and
- a contribution from the relevant National Board.
Some Accreditation Authorities also receive fees for service activities in relation to assessing overseas qualified practitioners.

Each Accreditation Authority sets the fees paid by education providers in accordance with their respective business model and in consultation with the provider. The fees contribute towards (but do not cover) the cost of accreditation being: initial and re-accreditation of a program; monitoring to ensure continued compliance with Standards; and, other activities arising from the accreditation function such as advice to the provider.

The Accreditation Authorities submit their requests for a contribution by the relevant National Board as part of the Boards’ annual budgeting processes. AHPRA, as agreed with the relevant National Board, may approve an adjusted funding amount each year having regard to the activity to be undertaken by the Accreditation Authority, and in consultation with the Accreditation Authority and agreement wherever possible. Where the accreditation function is exercised by an external entity, this amount is included as part of the profession’s Agreement for the Accreditation Function between AHPRA and the Accreditation Authority. Where the accreditation function is exercised by a committee established by the Board, the amount is reflected in the Board’s budget as a net cost of accreditation.

The costs of accreditation vary between professions and reflect the variable complexity of professions, education providers and programs of study across the 14 professions within the Scheme. For example, the length of programs varies, the number of divisions of the National Boards’ registers vary, the providers themselves range from small private registered training organisations to large public and private universities, and the education and training pathways differ in terms of their complexity and any relevant international benchmarks.

Mechanisms to support accreditation functions

A number of mechanisms have been established to support the statutory framework and facilitate accreditation functions meeting the objectives and guiding principles of the National Law. These include:

- agreements for the accreditation functions between AHPRA, in consultation with the relevant National Board, and each external Accreditation Authority
- AHPRA Procedures for the development of accreditation standards
- the work of the Accreditation Liaison Group on key shared accreditation issues
- annual meetings between representatives of all National Boards, Accreditation Authorities and AHPRA to discuss common accreditation issues
- terms of reference for each Accreditation Committee.

Agreements for the accreditation functions

The agreements for the accreditation functions between AHPRA, on behalf of the relevant National Board, and each external Accreditation Authority is the formal document which describes the details of the accreditation functions, reporting, funding and work program for the Accreditation Authority. The agreement and/or work program is a mechanism to highlight priority issues for Accreditation Authorities to consider in their work.

Terms of reference for accreditation committees

The terms of reference for each accreditation committee set out the functions, reporting, process to identify annual funding and work program for the Accreditation Authority. While the National Board establishes an accreditation committee and sets its terms of reference, the committee’s statutory decision-making functions are conferred directly by the National Law and are not delegated by the National Board.

The terms of reference for each accreditation committee are published on the relevant National Board’s website.

AHPRA Procedures for the development of accreditation standards
AHPRA’s *Procedures for the development of accreditation standards* (the procedures) are an important mechanism for articulating a common process for the development and approval of accreditation standards, and the interrelationships between the National Registration and Accreditation Scheme entities on this function. The procedures were developed with input from the Australian Health Professions Councils’ Forum and others. They inform National Boards, Accreditation Authorities and AHPRA about the matters:

- that an Accreditation Authority should take into account in developing accreditation standards or changing accreditation standards
- which an Accreditation Authority should explicitly address when submitting accreditation standards to a National Board for approval
- that a National Board should consider when deciding whether to approve accreditation standards developed by the Accreditation Authority, and
- which National Boards should raise with Ministerial Council as they may trigger a Ministerial Council policy direction and the timing for this to occur.

**Change and achievements**

Before 1 July 2010, health profession accreditation functions were largely conducted outside a statutory framework. Accreditation Authorities reflected considerable diversity, which has continued under the Scheme, however all the Accreditation Authorities are now operating within the framework of the National Law. Many Accreditation Authorities have been undertaking accreditation of programs and assessment of overseas qualified practitioners for many years. While many of the established accreditation policies and procedures continue, Accreditation Authorities have evolved and adapted to the requirements of the Scheme. Achievements include: stronger governance and operating structures including the contribution of a wide range of stakeholders; reporting directly against the accreditation standards; and the ongoing monitoring of education providers.

Differences between the Accreditation Authorities include the following:

- some Accreditation Authorities have been operating as independent national bodies for many years while some operated on a state and territory basis and became national bodies only after the Scheme commenced, others have been in place for only around 18 months
- some Accreditation Authorities accredit large numbers of programs (over 400) while others accredit very small numbers (eg less than ten)
- some Accreditation Authorities operate in Australia only while others are joint Australia/New Zealand bodies and some operate in other countries, for example, where an Australian education provider delivers part or all of an approved program of study in another country,
- eleven Accreditation Authorities are independent external organisations while three are committees established by National Boards
- some authorities exercise functions for professions with complex structures, including multiple divisions of the register, specialties, endorsements, examinations systems and compulsory vocational pathways, while others exercise functions for professions with less complex regulation
- ten Accreditation Authorities assess overseas qualified practitioners, with varying approaches and requirements
- nine Accreditation Authorities assess overseas assessing authorities

**Change since the National Scheme**

Accreditation Authorities (and the relevant National Boards) have made very significant organisational and operational adjustments to effectively deliver accreditation functions within the new statutory framework. The relationships between Accreditation Authorities, and the National Boards and AHPRA have developed and matured since 1 July 2010. Each of the National Boards and their Accreditation Authorities have agreed to the process for reporting of accreditation decisions and have further enhanced this communication by developing their own arrangements for engagement within the framework of the National Law and the shared understanding built between National Boards, Accreditation Authorities and AHPRA. These relationships have also been supported by the Forum, which now includes discussions
with all the Accreditation Authorities as well as discussions amongst the external authorities only, the Accreditation Liaison Group and meetings of the Chairs of the three accreditation committees.

**Achievements against the objectives and guiding principles of the National Law**

The uninterrupted delivery of accreditation functions through the transition to the National Scheme is a significant achievement. The Accreditation Authorities in particular, with National Boards and AHPRA, worked to support a seamless transition from the diverse range of accreditation approaches pre-1 July 2010, to the delivery of accreditation functions by independent Accreditation Authorities within a single statutory framework.

The importance of including accreditation as a fundamental part of the Scheme cannot be underestimated. The change flowing from applying the objectives and guiding principles of the National Law to accreditation is profound, and has important and far-reaching implications for the delivery of accreditation functions. Similar to other areas of the Scheme, perceptions of the extent of this change vary and may not always reflect the significant shift that has occurred.

**Comments on specific objectives**

The effective delivery of accreditation functions directly achieves objective (c) facilitating the high quality education and training of health practitioners and (d) the rigorous and responsive assessment of overseas-trained health practitioners. Individual Accreditation Authorities will provide examples of their achievements in these areas. However, since the Scheme commenced, accreditation has made an important contribution to objective (f) enabling the continuous development of a flexible, responsible and sustainable Australian health workforce and innovation in the education of, and service delivery by, practitioners.

For example, the accreditation standards for all professions contribute to the objectives and guiding principles particularly objective (f), by:

- not precluding the use of interdisciplinary supervision models for student clinical placements. The focus of standards is more that the supervisor has the required competencies, skills, knowledge, authority, time and resources to provide the supervision appropriate to the learning outcomes the student is to achieve. In some professions supervision by health professionals from alternative disciplines is an established practice.
- allowing the use of simulated learning (SLE). The role of simulation as a learning method is recognised; its use should be supported by evidence for achieving the learning outcomes the student is to achieve. For several Accreditation Authorities it is particularly recognised that SLE could be used to enhance, support and in certain circumstances replace some direct clinical involvement.

The outcomes focus of accreditation standards generally facilitates innovation by education providers.

Including accreditation in the National Scheme made a significant contribution to the objective of facilitating workforce mobility. The availability of national accreditation standards, and nationally accredited and approved programs of study are fundamental elements to support workforce mobility across Australia which were not always in place before the National Scheme commenced.

**Other key achievements**

Other key achievements include:

- developing a Quality Framework as the primary measure of quality accreditation functions under the National Law
- documenting an agreed understanding of the shared responsibilities in the accreditation function under the National Law, promoting efficiency and effectiveness
- developing a Framework for Accreditation Authorities and National Boards on Communicating Accreditation and Program Approval Decisions and Requests for Changes to Accreditation Standards and other reference documents which reflect the objectives and guiding principles of
the National Law and promote a consistent framework for the performance of accreditation functions
• developing an agreed process for the consultation and review of the assignment of the accreditation functions
• work to develop a Guideline on the management of complaints relating to accreditation functions under the National Law
• availability of additional data – including significant work to provide information for inclusion in the searchable register of approved programs of study on each National Board and AHPRA’s website, promoting transparency.

Other matters that have been the subject of joint work include:
• the agreements between AHPRA, for the National Boards, and the external Accreditation Authorities
• the issues related to accreditation of new programs of study
• AHPRA’s Policy for approved programs of study
• the Forum regularly discusses good practice in accreditation and has shared approaches such as procedural guides contributing to commonality across authorities. Some Forum members have also provided assistance to the accreditation committees and their support unit
• the Forum has delivered multi-profession workshops for accreditation assessors, and the Forum Chair contributed to assessor training for accreditation committees
• some Accreditation Authorities have undertaken joint work on the development of accreditation standards
• jointly considering the principles for the development of accreditation standards and processes for prescribing
• the three accreditation committees have largely common processes.

Key achievements are discussed in more detail below.

The Quality Framework for the Accreditation Function

The Accreditation Authorities, National Boards and AHPRA have agreed to a Quality Framework for the Accreditation Function to support quality assurance and continuous quality improvement of accreditation under the National Law.

The framework identifies eight domains of good practice:
1. Governance
2. Independence
3. Operational management
4. Accreditation standards
5. Processes for accreditation of programs and providers
6. Assessing authorities in other countries
7. Assessing overseas qualified practitioners
8. Stakeholder collaboration.

The Quality Framework is the principal reference document for National Boards and AHPRA to assess the work of Accreditation Authorities. Accreditation Authorities provide six-monthly reports to their National Boards on developments relevant to the domains of the Quality Framework. The Quality Framework was also used in 2012, when the performance of the Accreditation Authorities of the first ten professions to be regulated under the National Law was assessed during the review of accreditation arrangements.
The Quality Framework is an important document in promoting consideration of the objectives and guiding principles of the National Law. It emphasises that the National Law requires those exercising functions under the National Law to do so having regard to the objectives and guiding principles. In addition, the Quality Framework itself promotes effectiveness and efficiency in accreditation functions.

The Quality Framework will be reviewed at least every three years. The Accreditation Liaison Group has begun work on its first review, and is planning consultation with key stakeholders such as government.

**Routine reporting on accreditation functions against the Quality Framework**

The agreement between AHPRA, in consultation with the relevant National Board, and external Accreditation Authority for the accreditation functions specifies the reporting requirements for the authority. The reporting requirements for accreditation committees mirror these requirements with minor modifications to take into account that an accreditation committee is not a separate legal entity (eg its financial accounting is part of the National Board/AHPRA’s accounts).

Accreditation Authorities report against the domains of the Quality Framework for the Accreditation Function. The Accreditation Liaison Group has developed a *Sample guide for a report by an Accreditation Authority* with input from National Boards and Accreditation Authorities. The Sample guide indicates that an Accreditation Authority will provide two reports per year:

1. a retrospective report, which includes:
   - a copy of the annual report prepared on behalf of the authority’s governing body for the previous period including the publicly available financial statements
   - a detailed financial report on revenue and expenditure relevant to the accreditation function and any other projects or work funded by the relevant National Board through AHPRA
   - a report, as outlined in the sample guide, against domains in the Quality Framework
   - a half yearly update on activity against the work program; and

2. a prospective report, with a draft work plan and budget for the next financial year.

Since the Scheme commenced, the quality, consistency and comprehensiveness of reporting has continued to develop. Accreditation Authorities also report to National Boards each time they make an accreditation decision and when they review, or develop new, accreditation standards.

Reporting against the Quality Framework is an important accountability mechanism and contributes to the guiding principles of efficiency and effectiveness.

**Processes streamlined**

*Communication framework for accreditation decisions*

The Accreditation Liaison Group has developed a *Framework for Accreditation Authorities and National Boards on Communicating Accreditation and Program Approval Decisions and Requests for Changes to Accreditation Standards* (the Framework).

The National Law requires communication between the Accreditation Authorities and the National Board when certain decisions are made or required. The Framework provides guidance on what Accreditation Authorities should report to National Boards to enable the Boards to discharge their separate roles and how National Boards and Accreditation Authorities can work collaboratively to facilitate good decision-making.

The Framework provides a set of guiding principles for Accreditation Authorities and National Boards on (i) matters to address in reporting an accreditation decision; and (ii) reporting on new or revised accreditation standards. It facilitates consistent approaches that promote good decision making and the objectives and guiding principles of the National Law. It is expected to be published on the AHPRA and Health Professions Accreditation Councils’ Forum websites shortly.
The Framework contributes to the effectiveness and efficiency of accreditation functions and the respective decision-making roles of National Boards and Accreditation Authorities.

Complaints

The Accreditation Liaison Group is developing a template complaints protocol, as a resource for all Accreditation Authorities and National Boards. The template protocol aims to clarify the respective roles, responsibilities and processes of Accreditation Authorities, National Boards and AHPRA in the management of complaints about matters relevant to accreditation functions. It aims also to describe good practice in managing complaints relating to accredited programs and providers of those programs. The guidance document is expected to be completed shortly and will be published as a reference document. It will contribute to the guiding principle of fairness, and as with all resource documents will promote efficiency and effectiveness and avoid duplication.

Publicly available information

A feature of the National Law is the requirement for published information about accreditation functions. The establishment of the Quality Framework has also facilitated the development of consistent reporting requirements. In addition, there are now published reference documents which document and expand upon some of the obligations of all Accreditation Authorities within the statutory framework of the Scheme such as the Quality Framework and wide-ranging public consultation on the accreditation standards. This contributes to the guiding principle of transparency.

The AHPRA website publishes a list of Accreditation Authorities and which functions they exercise under the National Law (http://www.ahpra.gov.au/Education/Accreditation-Authorities.aspx).

The National Law provides that each Accreditation Authority must publish how it exercises the accreditation function. Each Accreditation Authority publishes information online about its functions (see Attachment C for links).

National Boards must publish the accreditation standards they approve. National Boards do this by publishing the standards on their websites or publishing via a link to where the approved standards are published by the relevant Accreditation Authority.

National Boards, Accreditation Authorities and AHPRA have also developed a reference document Accreditation under the National Law, which is published on the AHPRA website (http://www.ahpra.gov.au/Publications/Accreditation-publications.aspx). The Quality Framework and information about the reviews of accreditation arrangements are also published on the AHPRA website. As further reference documents describing agreed good practice approaches are developed, they are progressively published to build more transparency over time.

Joint meetings

Joint meetings are held annually between representatives of all National Boards, Accreditation Authorities and AHPRA on an annual basis. These meetings provide a formal mechanism to discuss common accreditation issues. They aim to facilitate shared understandings of accreditation under the National Law to address the objectives and guiding principles of the National Scheme. For example, previous joint meetings have focussed on routine reporting requirements, reporting on accredited programs of study and the potential for cross-profession approaches in accreditation. This work has contributed to the efficiency and effectiveness of accreditation arrangements.

Future opportunities

Collaboration and multi-profession approaches

Opportunities for collaboration in accreditation continue to be actively explored by the Health Professions Accreditation Councils Forum, individual Accreditation Authorities and Committees and the Accreditation Liaison Group.
For example, the ALG workplan for 2014 includes:

- Support for interprofessional education, and consideration of the scope for a cross-profession workshop on interprofessional education
- 2014 Joint Meeting, to consider facilitation and achievements in relation to simulation, interprofessional education and collaboration that can be presented to the NRAS review
- Review of Quality Framework and Sample Reporting Guide

There is scope to continue to build collaboration between Accreditation Authorities within the framework of the National Law. Accreditation functions are currently delivered through separate profession-specific structures. External Accreditation Authorities are separate organisations, although in two cases their Secretariat and administrative services are delivered by the same service company. Accreditation Committees are also profession-specific and are supported by AHPRA. However, these arrangements are not the only possibilities within the existing framework of the National Law, which allows for greater collaboration and shared administrative arrangements if appropriate. For example, the National Law is not an impediment to two or more Accreditation Authorities agreeing to combine their administrative functions. However, the criteria when this would be appropriate would need to be articulated and sustainability, efficiency and effectiveness would be important considerations.

The implications of these opportunities, identifying exemplars of good practice, whether there is potential to build greater collaboration or consistency or whether diverse approaches are more appropriate are issues for further consideration by the Accreditation Authorities, and other bodies in the National Scheme.

**Conclusion**

Accreditation Authorities in particular, with National Boards and AHPRA, have worked hard to develop a shared understanding of the model for accreditation established by the National Law and to effectively deliver the accreditation functions under the Law. Accreditation Authorities, National boards and AHPRA have proactively established liaison mechanisms to facilitate joint understanding, share good practice and build common resources where appropriate. This work continues to progress steadily and contributes to the critical work of individual Accreditation Authorities to ensure that graduates of accredited and approved programs of study have the knowledge, skills and professional attributes to practise their profession and overseas qualified practitioners are subject to rigorous and responsive assessment.
Australian Health Workforce Ministerial Council

Communiqué
8 May 2009

DESIGN OF NEW NATIONAL REGISTRATION AND ACCREDITATION SCHEME

The Ministerial Council has today reached a national consensus on how the new National Registration and Accreditation Scheme for the Health Professions will work. This will deliver improvements to the safety and quality of Australia’s health services through a modernised national regulatory system for health practitioners.

The Ministerial Council acknowledged and welcomed the very high level of participation by consumers, practitioners and regulatory bodies in the consultation process to date. Over 1,000 people have attended forums around the country and over 650 written submissions have been received in response to the consultation papers issued in 2008 and 2009.

As a result of the consultation process and the feedback received, the Ministerial Council has determined that a number of changes should be made to the original proposals put forward, in particular in the areas of accreditation, the role of state bodies and complaints handling. The following sections outline the main matters on which Ministers have made decisions today.

Independent accreditation functions

The Ministerial Council agreed today that the accreditation function will be independent of governments. Accreditation standards will be developed by the independent accrediting body or the accreditation committee of the board where an external body has not been assigned the function.

The accrediting body or committee will recommend to the board, in a transparent manner, the courses and training programs it has accredited and that it considers to have met the requirements for registration. The final decision on whether the accreditation standards, courses and training programs are approved for the purposes of registration is the responsibility of the national board. The accrediting body will have the ability to make its recommendations publicly available in the circumstance that agreement between the accrediting body and the national board cannot be achieved.

The Ministerial Council will have powers to act, for instance, where it believes that changes to an accreditation standard, including changes to clinical placement hours or workplace and work practice, would have a significantly negative effect.

National accreditation standards which exist prior to the commencement of the new scheme are to continue until they are replaced by new standards.
Existing external accrediting bodies such as the Australian Medical Council and the Australian Pharmacy Council are expected to continue. The specific governance arrangements for these bodies will be a matter for them, although they will be expected to meet modern governance standards.

**Changes to registers**

Ministers today agreed there will be both general and specialist registers available for the professions, including medicine and dentistry, where ministers agree that there is to be specialist registration. Practitioners can be on one or both of these registers, depending on whether their specialist qualification has been recognised under the national scheme. Ministers agreed specialist registers will not cover practitioners registered to practice in an area of need.

Ministers have also decided that there will now be separate registers for nurses and for midwives.

**Support for continuing professional development**

The Ministerial Council has agreed that there will be a requirement that, for annual renewal of registration, a registrant must demonstrate that they have participated in a continuing professional development program as approved by their national board.

Each profession’s requirements will be set by the relevant board. A board may use its accrediting body to set standards for such programs and approve providers of such programs (including, in the case of medicine, specialist medical colleges) where that is the best arrangement for that profession.

**Extension of scheme to other professions**

The Ministerial Council also decided that, from 1 July 2012, Aboriginal and Torres Strait Islander health practitioners, Chinese medicine practitioners and medical radiation practitioners will be regulated under the scheme. These are in addition to the ten professions already agreed for inclusion in the national scheme from 1 July 2010 (chiropractors; dental (including dentists, dental hygienists, dental prosthetists and dental therapists); medical practitioners; nurses and midwives; optometrists; osteopaths; pharmacists; physiotherapists; podiatrists and psychologists).

**Other improvements to quality and safety of health services**

The Ministerial Council also agreed a number of other changes to registration arrangements in order to improve the quality and safety of health services being delivered to the public. These are set out below.

*Mandatory reporting of registrants*

The Ministerial Council agreed on 5 March 2009 that there will be a requirement that practitioners and employers (such as hospitals) report a registrant who is placing the public at risk of harm.
Ministers agreed that reportable conduct will include conduct that places the public at substantial risk of harm either through a physical or mental impairment affecting practice or a departure from accepted professional standards. Practitioners who are practising while under the influence of drugs or alcohol, or have engaged in sexual misconduct during practice must also be reported.

This requirement will deliver a greater level of protection to the Australian public.

**Criminal history and identity checks**
National agreement was reached on 5 March 2009 on criminal history and identity checks to apply to registered health professionals.

Mandatory criminal history and identity checks will apply to all health professionals registering for the first time in Australia. All other registrants will be required to make an annual declaration on criminal history matters when they renew their registration and these declarations will be audited on a random basis by an independent source.

Ministers also agreed that national boards will have the power to conduct ad hoc criminal history and identity checks on registrants.

**Simplified complaints arrangements for the public**
Assistance will be provided to members of the public who need help to make a complaint. Ministers agreed that this new arrangement will not affect the services provided by health complaints commissions across the country. However it will help make the complaints process simpler for members of the public.

**Student registration**
The Ministerial Council agreed that national boards will be required to register students in the health professions. Boards will decide at what point during their programs of study students will be registered, depending on the level of risk to the public.

Ministers agreed the national scheme will enable national boards to act on student impairment matters or where there is a conviction of a serious nature which may impact on public safety. This requirement will come into effect at the beginning of 2011.

Students will be registered by a deeming process based on lists of students supplied to boards by education providers

**Handling of complaints**
Given the diversity of arrangements in Australia at this time, Ministers have agreed to a flexible model for the administrative arrangements for handling complaints.

The National Law and/or State or Territory law, depending on each jurisdiction’s choice, will provide the legislative framework for investigations and prosecutions and the definitions of offences and contraventions and outcomes will be recorded as part of a single national framework.

Where the national legislative framework is adopted, it will also be up to each State and Territory to decide whether the prosecution and investigation functions remain with the national boards or be undertaken by an existing State or Territory health complaints arrangement.
The Ministerial Council also agreed a number of other elements related to the effective functioning of the new scheme.

**Appointments to national boards**

Ministers confirmed the arrangements set out in the *Health Practitioner Regulation (Administrative Arrangements) National Law Act 2008* (the Act), that boards will be appointed by the Ministerial Council with vacancies to be advertised. At least half, but not more than two thirds, of the members must be practitioners and at least two must be persons appointed as community members.

Adding to the Act, Ministers have also agreed that the National Law will require all national boards to contain at least one practitioner member from each of the larger jurisdictions (Queensland, New South Wales, Victoria, South Australia and Western Australia) and at least one other practitioner member drawn from the three smaller States and Territories (Tasmania, the Australian Capital Territory or the Northern Territory). Members of existing boards and State and Territory boards under the national scheme (see below) will be eligible for appointment to national boards. Members of the Agency Management Committee may not hold an appointment to a national board.

Ministers have also agreed that each national board will have at least one member from a rural or regional area.

**State and Territory boards (previously “State and Territory committees”)**

Ministers agreed that the main committee of a national board in each State or Territory where a committee is appointed will be known as a State or Territory board, for example the South Australian Board of the Pharmacy Board of Australia. Each national board will need to determine where State or Territory boards will be appointed, taking into account the need to provide efficient processes in each profession.

The role of these State and Territory boards will be to oversee registration and complaints processes in that State or Territory where these functions are delegated to them by the national board. State and Territory boards will perform these functions under the national legislation for the scheme. Appointments to State boards will be made by State Ministers following an open and transparent process.

Ministers also agreed that from 1 July 2010 (and subject to the decision of a national board that there will be a State or Territory board of that national board located in a jurisdiction), members of the existing board in that jurisdiction will comprise that State or Territory board for the balance of the terms of their appointment.

**New national regulation of cosmetic lenses**

To protect the public from injuries arising from the misuse of cosmetic contact lenses, the Ministerial Council has agreed that the prescribing of cosmetic lenses will be restricted to optometrists and medical practitioners. These are the same restrictions that will apply to the supply of other contact lenses under the new scheme.
Area of need arrangements

The Ministerial Council agreed that national boards will be required to consider applications for registration from practitioners seeking to work in a location or position that has been declared by the relevant State or Territory Minister as an area of need. Boards will determine whether the practitioner is eligible for registration and, if registration is granted, what conditions will apply.

Privacy protections for practitioners and consumers

Ministers agreed to build on the Commonwealth’s leadership and adopt under the national scheme the Commonwealth National Privacy Principles and privacy regime (or its successor). This will provide practitioners and consumers with the protection needed in relation to information collected by the national boards and the national agency.

Location of national office

Ministers agreed that the national office of the new Australian Health Practitioner Regulation Agency will be located in Melbourne.

Next steps

Ministers agreed that these decisions should be included in the exposure draft of the Health Practitioner Regulation National Law Bill 2009, which will provide the legal framework for the national scheme. The exposure draft of the legislation will be released by the Ministerial Council later in 2009 for a further round of public consultations.

When comments have been received on the exposure draft, the Ministerial Council will determine the final form the legislation should take.

Melbourne
8 May 2009
Reviews of accreditation arrangements

1. Introduction

This report describes and evaluates the reviews of accreditation arrangements for the first ten professions to be regulated under the Health Practitioner Regulation National Law Act as in force in each state and territory (the National Law).

Context

Section 253 of the National Law requires National Boards to review the arrangements for the exercise of the accreditation functions no later than 30 June 2013. These arrangements were generally established before the commencement of the National Law and involve the appointment of an external Accreditation Authority for each of the first ten professions to join the National Registration and Accreditation Scheme (the Scheme). When Health Ministers appointed the first of the Accreditation Authorities, they indicated that the assignment of accreditation functions would be ‘subject to the requirement to meet standards and criteria set by the national agency for the establishment, governance and operation of external accreditation bodies’.

Boards and Authorities collectively have worked to develop a common understanding of the Scheme and how it operates. The relationships between boards, authorities and AHPRA have evolved and matured during the period of assignment. Each of the profession-specific Boards and Authorities have developed their own arrangements for communication, including meetings, reporting etc. Within the common framework and shared understanding agreed by all Boards and Authorities, they have also each developed specific reporting and operating processes that reflect the complexity, volume and nature of the particular accreditation business.

Accreditation functions after the reviews

Although Ministers initially appointed the Accreditation Authorities, the National Law provides that Boards must make subsequent decisions about how accreditation functions are to be exercised:

- the National Board…… must decide whether an accreditation function for the health profession for which the Board is established is to be exercised by (a) an external accreditation entity; or (b) a committee established by the Board (s43), and
- the National Board must ensure the process for the review includes wide-ranging consultation about the arrangements for the exercise of the accreditation functions (S253 (5)).

Accordingly, the reviews considered both how the accreditation arrangements had been operating and what arrangements should continue from 1 July 2013.

2. How the review process was developed

The review process was developed by the Accreditation Liaison Group (ALG) in consultation with National Boards and Accreditation Authorities. The ALG is a joint body of the National Boards, the Health Professions Accreditation Councils’ Forum (the Forum) and AHPRA, with members from each group. The ALG provides an opportunity for collaborative work on matters related to the accreditation functions under the National Law.
When the ALG started to develop a proposed review process, it carefully considered the wording of s. 253. The ALG's interpretation was that s. 253 conveys a focus on the existing arrangements and whether they should continue, rather than starting from a “blank page”.

Accordingly, given the arrangements already in place, the ALG considered that the review process should begin with an assessment of the way in which the Accreditation Authority appointed for each profession had performed the accreditation functions. The ALG was aware that the process would also need to take account of the differences in size of the health professions, the volume of accreditation activity and the range of accreditation functions undertaken by the accreditation entities.

The proposed review process developed by the ALG was agreed by National Boards and Accreditation Authorities.

3. Overview of the review process

The scope of the review was defined by the objectives of the National Law, in particular those objectives most relevant to the accreditation functions, as well as the elements of the Quality Framework, which is essentially an agreed list of aspirational principles for the accreditation work of the Accreditation Authorities, previously developed and agreed by the National Boards and the Accreditation Authorities.

Principles

The key principles of the review process included:

- an agreed and transparent process for the review
- an appropriate focus on the current accreditation arrangements
- an agreed cross-profession framework with the capacity to take differences between the professions into account
- weighing of relative risks, benefits and costs
- evaluation of the suitability of the process for future reviews required under the National Law.

The principles which informed the development of the Quality Framework for the Accreditation Function (the Quality Framework) also applied.

The review process drew on the information already accumulated about how the accreditation arrangements are working for each profession and provided the Accreditation Authority and the National Board an opportunity for open dialogue as part of the review.

Key questions for the review

The review considered the following key questions:

1. What accreditation functions has the Accreditation Authority undertaken under the National Law?
2. How well has the Accreditation Authority undertaken each of these functions under the eight domains of the Quality Framework since it was appointed?
3. Taking into account the context for the profession and the complexity of registration and accreditation arrangements for the profession, how has the Accreditation Authority addressed its responsibilities under the National Law (or - aligned its delivery of accreditation functions with the National Law)?
4. Has the Accreditation Authority demonstrated that it is effectively undertaking the accreditation functions and that it is likely to continue to do so? Are the current arrangements satisfactory?
5. Considering the costs, risks and benefits, on balance, is continuing with the current arrangements for exercising the accreditation functions or changing the arrangements appropriate?
6. Is there a clear justification for any proposed changes to the current arrangements for exercising the accreditation functions?
Outline of the review process

Key steps in the review process were:

1. accreditation authority made a submission to the Board, if it wished to continue exercising the accreditation functions
2. Board assessed the submission and made a decision about its proposed direction
3. wide-ranging consultation
4. Board made final decision

A full description of the steps in the review process is in Attachment One.

Submission from accreditation authority

The reviews started with the Board writing to its accreditation authority, inviting it to make a submission if it wished to continue exercising accreditation functions. The submission was intended to build on existing information where appropriate and to take into account the way the Authority had discharged the accreditation functions since its first period of assignment commenced. Each accreditation authority prepared a detailed submission explaining their roles and functions. The submission also specifically addressed the Quality Framework and the progress made by the Authority in moving toward alignment with the Framework.

After the Accreditation Authority made its submission to the National Board, representatives of the Board and Accreditation Authority met to discuss the submission and any other issues relevant to the review.

Assessment of submission and decision about proposed direction

The National Board then considered the submission and discussions with the Accreditation Authority against the key questions for the review to make a preliminary decision about whether the current arrangements for the exercise of the accreditation functions were satisfactory and therefore should be continued. The National Board’s proposed direction (eg to continue the current arrangements) formed the basis of consultation, but allowed stakeholders to express their views about the direction including any alternative options for exercising the accreditation functions.

Wide ranging consultation

The Boards included “wide-ranging consultation about the arrangements for the exercise of the accreditation functions” (s. 253 (5)) as part of this review process. (See the next section for more information about the consultation process).

National Board makes final decision

The National Board provided the Accreditation Authority with an opportunity to discuss any issues from the stakeholder feedback. The National Board reviewed the feedback from the consultation process and any further information provided by the Accreditation Authority against the key review questions to make its final decision about the review outcome. The National Board communicated the review outcome and reasons for its decision to its Accreditation Authority. It then publicly announced the decision.

Review timing

While the review did not need to be completed until 30 June 2013, the aim was to complete the review earlier to allow certainty for National Boards and for Accreditation Authorities wishing to continue exercising these functions. It would also allow a transition to any new arrangements, should they be necessary. For this reason, the review process started in August 2012, with the aim of completing the reviews by the end of 2012, while recognising that some reviews may be more complex and take longer to complete.
4. Consultation process and submissions

Each board conducted preliminary and public consultation, using a profession-specific consultation paper which drew on a template consultation paper and the submission made by the Accreditation Authority.

The consultation paper:

1. explained the history of the assignment and the requirement for the review of the accreditation arrangements
2. explained the options open to the National Board, its preliminary conclusion about whether the current arrangements are satisfactory and the proposed direction based on a preliminary review of the current arrangements, including an analysis of the risks, benefits and costs
3. attached the public part of the submission from the Accreditation Authority
4. linked the Reference Document - *Accreditation Under the Health Practitioner National Law Act* and included a diagram of the respective roles of the National Board, Accreditation Authority and AHPRA
5. invited comments on the accreditation functions and the domains of the Quality Framework and provided an opportunity for any other comments.

Boards consulted according to the published National Boards Consultation Process ([http://www.ahpra.gov.au/Legislation-and-Publications/AHPRA-Publications.aspx](http://www.ahpra.gov.au/Legislation-and-Publications/AHPRA-Publications.aspx)). Each Board published its public consultation paper on its website inviting feedback. It also alerted its key stakeholders to the consultation process. The Boards also invited the Accreditation Authorities to suggest any additional stakeholders to be directly approached by the Boards to participate in the review. In some cases the Accreditation Authority also encouraged its stakeholders to participate in the consultation process.

Submissions

Boards received 92 submissions during the public consultation process across all ten professions. A breakdown of the submissions is at [Attachment 2](#).

Each Board has published the submissions from the public consultation process on its website, except where stakeholders requested non-publication. The submissions are accessible from links on the AHPRA or each Board website eg [http://www.medicalboard.gov.au/News/Past-Consultations/2012/Consultation-September-2012.aspx](http://www.medicalboard.gov.au/News/Past-Consultations/2012/Consultation-September-2012.aspx). All submissions were made available to the accreditation authority.

Health Workforce Australia and the Health Workforce Principal Committee also made confidential submissions to the reviews.

5. Review outcomes

All Boards have decided that their accreditation authority will continue to exercise accreditation functions, with some variations in the continuation period:

- seven boards decided on a five year period
- one board decided on a three year period with a possible two year extension
- one board decided on a three year period
- one board decided on a one year period but is prepared to consider a longer period subject to some governance issues being addressed

6. Implementing the review outcomes

The review outcomes were implemented through:

1. the National Board advising the accreditation authority of its decision
2. the National Board announcing its decision
3. extending the existing agreements for the exercise of accreditation functions to cover the new period from 1 July 2013, recognising the context of health reform issues and opportunities for collaboration
4. each National Board establishing a workplan with its Accreditation Authority which includes issues from the review process and a timeframe for future work.

80% of the reviews were completed within the target timeframe (by the end of 2012). The extension of nine of the ten existing agreements was completed by late June 2013.
As was previously the case, the accreditation arrangements are subject to the reporting requirements in:

1. the agreement between AHPRA on behalf of the National Board and the Accreditation Authority
2. the sample guide report, which provides guidance about the content for regular reports under the agreement, and
3. the annual workplan and funding arrangements.

7. **Assessing the review against the objectives**

The following table analyses the review against the key principles:

<table>
<thead>
<tr>
<th>Principle</th>
<th>Evaluation of review</th>
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| An agreed and transparent process for the review                          | The ALG developed a proposed review process which was clearly documented. National boards and accreditation authorities agreed on the proposed review process.  
                                                                                       | The preliminary and public consultation papers included a description of the review process. The submissions to public consultation were published and each Board publicly communicated the outcome of the review process. |
| An appropriate focus on the current accreditation arrangements            | The review focused on the current accreditation arrangements, but enabled any recommendations for changes to the existing arrangements to be raised, including proposals from any organisation who wished to be considered as an alternative to the accreditation authorities appointed by Ministers (none were received). |
| An agreed cross-profession framework as outlined in this paper with the capacity to take differences between the professions into account | The review process and template consultation paper provided an agreed cross-profession framework with the capacity to take differences between professions into account. There was also enough flexibility in the process to enable adjustment for profession-specific issues. This resulted in two boards completing their review to a longer timeframe than the other eight boards. |
| Weighing of relative risks, benefits and costs                           | Boards made their decisions according to the key questions for the review, which required a weighing of relative risks, benefits and costs                                                                                      |
| Evaluation of the suitability of the process for future reviews required under the National Law | This report specifically considers the suitability of the review process for future reviews required under the National Law.                                                                                             |

8. **Suitability of the process for future reviews required under the National Law**

Many aspects of the review process would be suitable for future multi-profession reviews required under the National Law, including:

- collaborative planning and implementation
- an agreed process between the National Boards and Accreditation Authorities
- coordinating processes and timeframes across professions to assist stakeholders of multiple professions.
9. Opportunities for improvement/ lessons learnt

Key learnings from the review include:

1. Detailed planning and coordination of the review process was important. The review aimed to coordinate the review process for stakeholders of multiple National Boards such as governments. This included providing a multi-profession submission template for these stakeholders to use.

2. The ALG’s design, oversight and leadership role was an important element in achieving agreement about the review process and 80% of the reviews being completed within the target timeframe.

3. It was important for National Boards, Accreditation Authorities and AHPRA to have a shared understanding about the process and timeframes. An agreed, clearly documented review process helped participants and stakeholders all understand the process, and enabled effective coordination.

4. The submissions from the Accreditation Authorities were very large documents, up to 20 mb. This presented challenges in the preliminary consultation phase, as the documents could not be emailed. Drop-box style web access was used but some stakeholders had difficulties using the site and were provided with the submissions on a usb stick. There is an opportunity to make this process more user-friendly and simpler in future.

10. Conclusion

The reviews of accreditation arrangements were completed by 30 June 2013 as required by the National Law, although implementation of the reviews is continuing into 2013. The review processes highlighted how much has been achieved in implementing the accreditation component of the National Registration and Accreditation Scheme. The review also provided useful opportunities for National Boards and Accreditation Authorities to consider key issues that will be important factors for the future of accreditation within the National Registration and Accreditation Scheme.
Attachment One

Outline of Review Process

1. Boards/AHPRA wrote to Accreditation Authority asking whether Accreditation Authority wishes to continue undertaking the accreditation functions and if so, to send a submission to Board
2. The Accreditation Authority provided a submission to the Board advising that it wished to continue exercising the accreditation functions
3. Representatives of the Board and Accreditation Authority met to discuss any key issues arising from the submission
4. National Board formed preliminary view about whether the current arrangement is satisfactory and approves consultation paper for preliminary consultation
5. National Board advised Accreditation Authority of its preliminary view
6. Preliminary consultation with key stakeholders
7. National Board considered outcome of preliminary consultation and advised accreditation authority of any change in approach from preliminary consultation
8. National Board approved consultation paper for public consultation
9. Public consultation on the preliminary view on whether or not the arrangements appeared to be satisfactory
10. National Board provided the Accreditation Authority with an opportunity to discuss any issues from the stakeholder feedback
11. National Board made final decision, communicated the decision and its reasons to the Accreditation Authority and then announced the decision
12. Implementation
Attachment two Submissions received in public consultation

Attachment two has been removed from this public consultation version of the paper because it lists submissions that organisations and individuals identified as confidential. Submissions received in public consultation that were not identified as confidential are published on the National Boards’ websites that can be accessed via www.ahpra.gov.au
### Attachment C

#### Summary of accreditation functions and roles

The Accreditation Authority for each health profession is listed in the table below with information about the accreditation functions they perform. Information about the accreditation process is also available on the website of each external authority and Accreditation Committee.

#### Accreditation Authorities

This table lists the Accreditation Authorities that exercise accreditation functions under the National Law and work with the National Boards.

<table>
<thead>
<tr>
<th>National Board</th>
<th>Accreditation Authority</th>
<th>Functions undertaken under the National Law</th>
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</thead>
<tbody>
<tr>
<td>Aboriginal and Torres Strait Islander Health Practice Board of Australia</td>
<td>Aboriginal and Torres Strait Islander Health Practice Accreditation Committee</td>
<td>Development and review of accreditation standards&lt;br&gt;Assessing programs of study and education providers against the standards, including monitoring accredited programs and providers&lt;br&gt;Providing advice to National Board on accreditation functions</td>
</tr>
<tr>
<td>Chinese Medicine Board of Australia</td>
<td>Chinese Medicine Accreditation Committee</td>
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<td>Council on Chiropractic Education Australasia Inc.</td>
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| Dental Board of Australia | Australian Dental Council | Development and review of accreditation standards  
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Assessing overseas assessing authorities  
Assessing overseas qualified practitioners  
Providing advice to National Board on accreditation functions |
| Medical Board of Australia | Australian Medical Council Limited | Development and review of accreditation standards  
Assessing programs of study and education providers against the standards, including monitoring accredited programs and providers  
Assessing overseas assessing authorities  
Assessing overseas qualified practitioners  
Providing advice to National Board on accreditation functions |
| Medical Radiation Practice Board of Australia | Medical Radiation Practice Accreditation Committee | Development and review of accreditation standards  
Assessing programs of study and education providers against the standards, including monitoring accredited programs and providers  
Providing advice to National Board on accreditation functions |
| Nursing and Midwifery Board of Australia | Australian Nursing & Midwifery Accreditation Council | Development and review of accreditation standards  
Assessing programs of study and education providers against the standards, including monitoring accredited programs and providers  
Assessing overseas assessing authorities  
Assessing overseas qualified practitioners (National Board is also undertaking this function)  
Providing advice to National Board on accreditation functions |
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**More information about accreditation under the National Law**

A reference document *Accreditation under the National Law* has been developed by Accreditation Authorities, National Boards and the Australian Health Practitioner Regulation Agency (AHPRA) to provide information about accreditation under the *Health Practitioner Regulation National Law Act* as in force in each state and territory (the National Law).