



Consultation

20 September 2012

Review of accreditation arrangements for the medical profession

This consultation paper seeks feedback on the Medical Board of Australia's review of accreditation arrangements for the medical profession.

Please:

1. provide general feedback and/or complete the attached paper, preferably electronically, using the spaces and tick boxes provided
2. save the document/s with your name and the name or acronym of the council (in this case AMC) in the document name and
3. email the document to accreditationreview@ahpra.gov.au by **Friday 2 November 2012**.

How submissions will be handled

Detailed information about how submissions will be handled can be found on page 6.

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Consultation paper

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Accreditation arrangements for the medical profession

1. Summary

The Medical Board of Australia (the Board) is required to review the arrangements for the exercise of the accreditation functions no later than 30 June 2013. The Board has written to its appointed accreditation authority, the Australian Medical Council (the AMC or the Accreditation Council), inviting them to indicate whether they wished to continue exercising accreditation functions, and if so, to provide a report to the Board. The National Board has reviewed this report (available on the Board's website at www.medicalboard.gov.au under "News") and has formed a preliminary view that the current arrangements for the accreditation function are satisfactory, taking into account the National Board's experience with the AMC over the past two years. The Board is consulting about its preliminary view through this consultation paper.

2. Background

The Health Practitioner Regulation National Law Act as in force in each state and territory (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 have been in place since before the commencement of the National Law and involve the appointment of an external Accreditation Council for each of the first ten professions to join the National Registration and Accreditation Scheme (the National Scheme) on 1 July 2010¹.

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'.

The National Law provides that:

- *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 (s.43), 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 (s.253 (5)).*

Given that there are already arrangements in place, the review process will begin with an assessment of the way each Accreditation Authority has performed its functions. It will also take account of the differences in size of the health professions as well as in the volume and range of accreditation activities undertaken.

¹ 18 October 2010 in Western Australia

Note on terminology

There are a number of words used to describe the accreditation entities that have been appointed to exercise functions under the National Law. The National Law uses the words 'external accreditation entity' and 'accreditation authority', and these words are used in other documents referred to in this paper. However, more commonly these organisations are referred to as Accreditation Councils, and this term is generally used in this paper.

Review principles

The key principles guiding the approach to the review are set out below. The *Quality Framework for the Accreditation Function* (the Quality Framework), which outlines the benchmarks agreed to by the National Boards and Accreditation Authorities, is also a fundamental consideration in the review process.

The key principles include:

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

Review process

The review commenced with the Board writing to the Council inviting them to indicate whether they wished to continue exercising accreditation functions, and if so, to provide a report to the Board. The Board has reviewed this report and has formed a preliminary view that the current arrangements for the accreditation function are satisfactory, taking into account the Board's experience with the Council over the past two years. The Board is consulting about its preliminary view through this consultation paper.

3. History of the assignment and requirement for the review of the accreditation arrangements

Accreditation functions assigned

In December 2008, the Australian Health Ministers Council appointed the AMC to conduct the accreditation functions under the National Law in relation to the medical profession for three years from 1 July 2010 to 30 June 2013.

Past history of accreditation functions prior to the National Scheme

The Australian Medical Council was established in 1985 following a decision by the Australian Health Ministers' Conference in 1984. Its initial functions were to advise and to make recommendations to the state and territory medical boards on accreditation of medical schools and of courses leading to basic medical qualifications; assessment of suitability for practice in Australia of international medical graduates; and uniform approaches to registration.

The AMC has taken on new functions since its establishment, such as specialist medical education accreditation and advising on the recognition of new specialties.

In August 2008, the AMC changed from an incorporated association to a company limited by guarantee, subject to the *Corporations Act 2001*. It operates in accordance with its constitution (as amended November 2010).

Background to accreditation under the National Law

National Boards and accreditation authorities (through the Forum of Australian Health Professions Councils) have developed a document which provides a background to accreditation under the National Law.

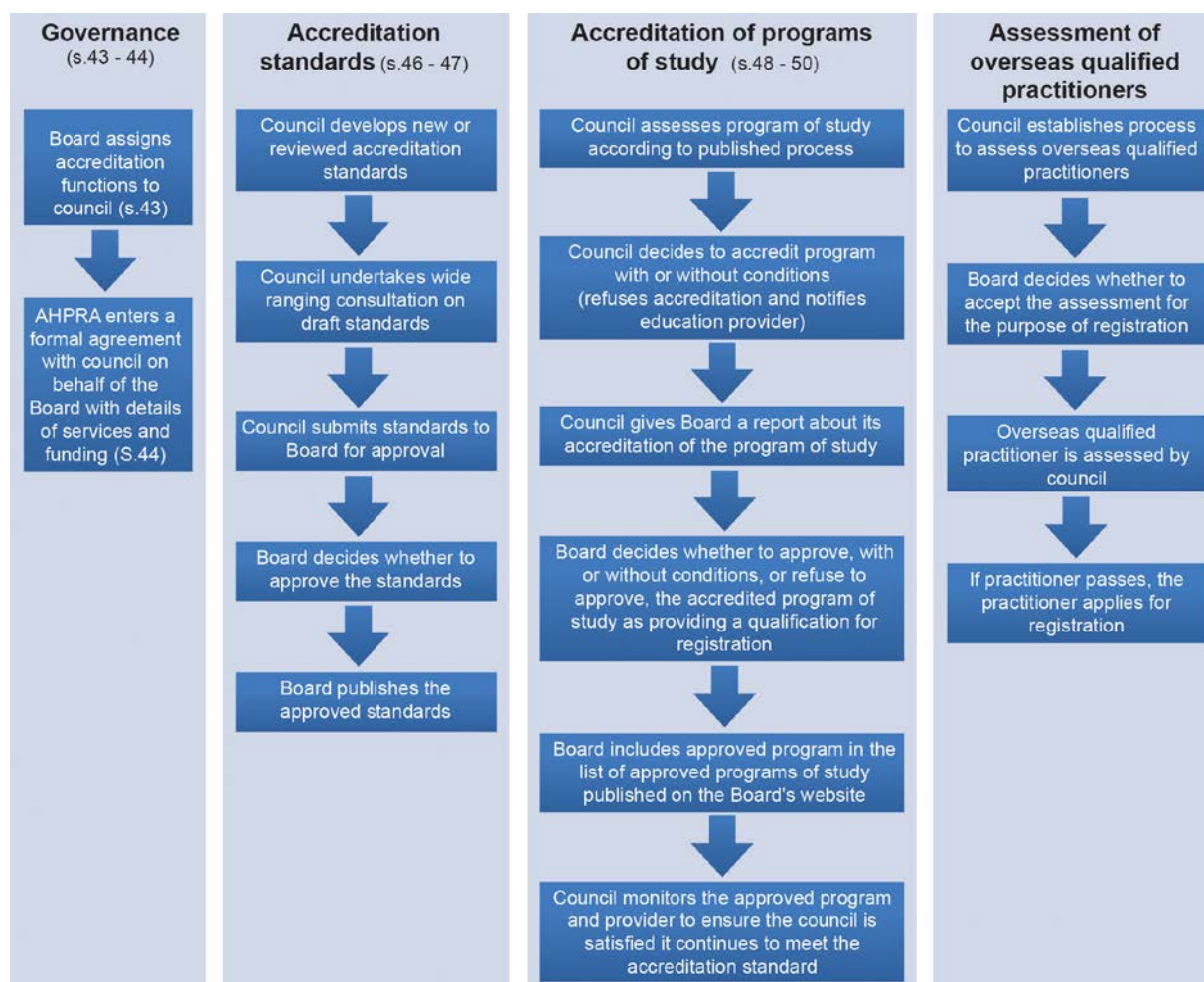
This is available at: www.healthprofessionscouncils.org.au/AHPRA-Reference-Accreditation-under-the-Health-Practitioner-Regulation-National-Law-Act.pdf.

The respective roles of the National Board, Accreditation Council and AHPRA

Section 42 of the National Law defines the accreditation function as:

- (a) developing accreditation standards for approval by a National Board
- (b) assessing programs of study, and the education providers that provide the programs of study, to determine whether the programs meet approved accreditation standards,
- (c) assessing authorities in other countries who conduct examinations for registration in a health profession, or accredit programs of study relevant to registration in a health profession, to decide whether persons who successfully complete the examinations or programs of study conducted or accredited by the authorities have the knowledge, clinical skills and professional attributes necessary to practise the profession in Australia; or
- (d) overseeing the assessment of the knowledge, clinical skills and professional attributes of overseas qualified health practitioners who are seeking registration in a health profession under this Law and whose qualifications are not approved qualifications for the health profession; or
- (e) making recommendations and giving advice to a national board about a matter referred to in paragraph (a), (b), (c) or (d).

The following diagram describes the respective roles of the National Board, Accreditation Council and AHPRA.



4. Scope of the National Board review

Options open to the Board

The following options are open to the Board:

1. continue the existing arrangements of assigning accreditation functions to the Council
2. appoint an alternative external accreditation entity, where an entity with the appropriate skills, expertise and infrastructure exists and is willing to take on the role
3. establish an accreditation committee of the National Board.

A combination of some of the above options may also be possible.

5. Consultation process

Making a submission

Section 6 of this consultation paper sets out each domain of the Quality Framework and refers to the evidence that the Board has considered in forming its view about how the current accreditation arrangements are working. Information provided by the accreditation council describing how it has undertaken the accreditation functions is attached and referenced for each domain.

There are spaces for comments throughout the paper. Please:

1. complete the paper, preferably electronically, using the spaces and tick boxes provided
2. save the document with your name and the name or acronym of the council (in this case AMC) in the document name and
3. email the document to accreditationreview@ahpra.gov.au by **Friday 2 November 2012**.

How submissions will be handled

As part of the consultation process, the Board will acknowledge submissions received.

Submissions will generally be published unless those making submissions request otherwise. The Board publishes submissions on its website to encourage discussion and inform the community and stakeholders.

However, the Board will not place on its website, or make available to the public, submissions that contain offensive or defamatory comments or which are outside the scope of reference. Before publication, the Board may remove personally-identifying information from submissions, including contact details.

The views expressed in the submissions are those of the individuals or organisations who submit them and their publication does not imply any acceptance of, or agreement with, these views by the Board.

The Board also accepts submissions made in confidence. These submissions will not be published on the website or elsewhere. Submissions may be confidential because they include personal experiences or other sensitive information. Any request for access to a confidential submission will be determined in accordance with the *Freedom of Information Act 1982* (Cth), which has provisions designed to protect personal information and information given in confidence. Please let the Board know if you do not want us to publish your submission, or want us to treat all or part of it as confidential.

However, due to the nature of this review, while there may be a request not to publish a submission publicly, the Board will provide all submissions to the Accreditation Council.

The Board may choose to consult with key stakeholders individually in addition to the Board's broader consultation processes published at <http://www.ahpra.gov.au/Legislation-and-Publications/AHPRA-Publications.aspx>.

6. Your submission

Name of person or organisation making the submission

Contact person

Telephone

Email

Information about you

Are you responding as a/an (please tick all that apply)

Education provider

Peak professional organisation

Health consumer

Community member

Employer

Government (eg Health Department)

Government agency

Health Workforce Australia

TEQSA

ASQA/State based VET sector regulatory authority

Individual practitioner

Other (please specify)

What experience have you had with the accreditation council? (please tick all that apply)

Education Providers

The Council has undertaken an accreditation assessment of one or more of our education programs since the introduction of the National Scheme

The Council undertook an accreditation assessment of one or more of our education programs before the introduction of the National Scheme

We are currently planning for, or undergoing, an accreditation assessment on one or more of our education programs

We are new to the accreditation process

We have been through an accreditation process previously with a different accreditation body previously

Stage of accreditation assessment (if you are currently involved in an accreditation process)

Nearing completion

Half way

Just commenced

Intention to apply submitted

Planning and preparation underway

Have sought information or advice from the Council

Overseas qualified practitioner

Assessment completed

Assessment nearing completion

Assessment just commencing

Have sought information or advice from the Council

Other stakeholders

Have sought information or advice from the Council on other matters

Council has consulted with us/me on Accreditation Standards, policy or individual accreditation assessments

Involved Council activities eg accreditation or assessment processes

Little or no direct engagement with Council

Other (please specify)

Review of Accreditation Council against the Quality Framework for the Accreditation Function

6.1 Governance (Domain 1):

The Accreditation Council effectively governs itself and demonstrates competence and professionalism in the performance of its accreditation role

Attributes

- The Accreditation Council is a legally constituted body and registered as a business entity.
- The Accreditation Council's governance and management structures give priority to its accreditation function relative to other activities (or relative to its importance).
- The Accreditation Council is able to demonstrate business stability, including financial viability.
- The Accreditation Council's accounts meet relevant Australian accounting and financial reporting standards.
- There is a transparent process for selection of the governing body.
- The Accreditation Council's governance arrangements provide for input from stakeholders including input from the community, education providers and the profession/s.
- The Accreditation Council's governance arrangements comply with the National Law and other applicable legislative requirements.

Governance – Accreditation Council submission

The evidence that the Board has taken into account in forming its preliminary view about governance is primarily at pages 3 – 11 of the report from the AMC published on the Board's website at www.medicalboard.gov.au.

Comments

6.2 Independence (Domain 2):

The Accreditation Council carries out its accreditation operations independently

Attributes

- Decision making processes are independent and there is no evidence that any area of the community, including government, higher education institutions, business, industry and professional associations - has undue influence.
- There are clear procedures for identifying and managing conflicts of interest.

Independence – Accreditation Council submission

The evidence that the Board has taken into account in forming its preliminary view about independence is primarily at pages 12 – 14 of the report from the AMC published on the Board's website at www.medicalboard.gov.au

Comments

6.3 Operational Management (Domain 3):

The Accreditation Council effectively manages its resources to carry out its accreditation function

Attributes

- The Accreditation Council manages the human and financial resources to achieve objectives in relation to its accreditation function.
- There are effective systems for monitoring and improving the authority's accreditation processes, and identification and management of risk.
- The authority can operate efficiently and effectively nationally.
- There are robust systems for managing information and contemporaneous records, including ensuring confidentiality.
- In setting its fee structures, the Accreditation Council balances the requirements of the principles of the National Law and efficient business processes.

Operational management – Accreditation Council submission

The evidence that the Board has taken into account in forming its preliminary view about operational management is primarily at pages 15 – 20 of the report from the AMC published on the Board's website at www.medicalboard.gov.au

Comments

6.4 Accreditation standards (Domain 4):

The Accreditation Council develops accreditation standards for the assessment of programs of study and education providers

Attributes

- Standards meet relevant Australian and international benchmarks.
- Standards are based on the available research and evidence base.
- Stakeholders are involved in the development and review of standards and there is wide ranging consultation.
- The Accreditation Council reviews the standards regularly.
- In reviewing and developing standards, the Accreditation Council takes account of AHPRA's Procedures for Development of Accreditation Standards and the National Law.

Accreditation standards - Accreditation Council submission

The evidence that the Board has taken into account in forming its preliminary view about accreditation standards is primarily at pages 21 - 24 of the report from the AMC published on the Board's website at www.medicalboard.gov.au

Comments

6.5 Processes for accreditation of programs of study and education providers (Domain 5):

The Accreditation Council applies the approved accreditation standards and has rigorous, fair and consistent processes for accrediting programs of study and their education providers

Attributes

- The Accreditation Council ensures documentation on the accreditation standards and the procedures for assessment is publicly available.
- The Accreditation Council has policies on the selection, appointment, training and performance review of assessment team members. It's policies provide for the use of competent persons who are qualified by their skills, knowledge and experience to assess professional programs of study and their providers against the accreditation standards.
- There are procedures for identifying, managing and recording conflicts of interest in the work of accreditation assessment teams and working committees.
- The Accreditation Council follows documented processes for decision-making and reporting that comply with the National Law and enable decisions to be made free from undue influence by any interested party.
- Accreditation processes facilitate continuing quality improvement in programs of study by the responsible education provider.
- There is a cyclical accreditation process with regular assessment of accredited education providers and their programs to ensure continuing compliance with standards.
- The Accreditation Council has defined the changes to programs and to providers that may affect the accreditation status, how the education provider reports on these changes and how these changes are assessed.
- There are published complaints, review and appeals processes which are rigorous, fair and responsive.

Processes for accreditation of programs of study and education providers – Accreditation Council submission

The evidence that the Board has taken into account in forming its preliminary view about processes for accreditation of programs of study and education providers is primarily at pages 25 – 34 of the report from the AMC published on the Board's website at www.medicalboard.gov.au) and is also based on the experience of the National Board in receiving accreditation reports for the accreditation decisions reported to the Board in the period 1 July 2010 to 1 August 2012.

Comments

6.6 Assessing authorities in other countries (than Australia) (Domain 6):

Where this function is exercised by the Accreditation Council, the authority has defined standards and procedures to assess examining and/or accrediting authorities in other countries

Attributes

- The assessment standards aim to determine whether these authorities' processes result in practitioners who have the knowledge, clinical skills and professional attributes necessary to practice in the equivalent profession in Australia.
- Stakeholders are involved in the development and review of standards and there is wide ranging consultation.
- The procedures for initiating consideration of the standards and procedures of authorities in other countries are defined and documented.
- There is a cyclical assessment process to ensure recognised authorities in other countries continue to meet the defined standards.
- The Accreditation Council follows documented systems for decision-making and reporting that enable decisions to be made free from undue influence by any interested party.
- There are published complaints, review and appeals processes which are rigorous, fair and responsive.

Assessing authorities in other countries (than Australia) – Accreditation Council submission

The evidence that the Board has taken into account in forming its preliminary view about assessing authorities in other countries is primarily at pages 35 - 38 of the report from the AMC published on the Board's website at www.medicalboard.gov.au

Comments

6.7 Assessing overseas qualified practitioners (Domain 7):

Where this function is exercised by the Accreditation Council, the authority has processes to assess and/or oversee the assessment of the knowledge, clinical skills and professional attributes of overseas qualified practitioners who are seeking registration in the profession under the National Law and whose qualifications are not approved qualifications under the National Law for the profession

Attributes

- The assessment standards define the required knowledge, clinical skills and professional attributes necessary to practise the profession in Australia.
- The key assessment criteria, including assessment objectives and standards, are documented.
- The Accreditation Council uses a recognised standard setting process and monitors the overall performance of the assessment.
- The procedures for applying for assessment are defined and published.
- The Accreditation Council publishes information that describes the structure of the examination and components of the assessments.
- The Accreditation Council has policies on the selection, appointment, training and performance review of assessors. Its policies provide for the use of competent persons who are qualified by their skills, knowledge and experience to assess overseas qualified practitioners.
- There are published complaints, review and appeals processes which are rigorous, fair and responsive.

Assessing overseas qualified practitioners – Accreditation Council submission

The evidence that the Board has taken into account in forming its preliminary view about assessing overseas qualified practitioners is primarily at pages 39 – 55 of the report from the AMC published on the Board's website at www.medicalboard.gov.au

Comments

6.8 Stakeholder collaboration (Domain 8):

The Accreditation Council works to build stakeholder support and collaborates with other national, international and/or professional accreditation authorities

Attributes

- There are processes for engaging with stakeholders, including governments, education institutions, health professional organisations, health providers, national boards and consumers/community.
- There is a communications strategy, including a website providing information about the Accreditation Council's roles, functions and procedures.
- The Accreditation Council collaborates with other national and international accreditation organisations.
- The Accreditation Council collaborates with accreditation authorities for the other registered health professions appointed under the National Law.
- The Accreditation Council works within overarching national and international structures of quality assurance/accreditation.

Stakeholder collaboration - Accreditation Council submission

The evidence that the Board has taken into account in forming its preliminary view about stakeholder collaboration is primarily at pages 56 - 63 of the report from the AMC published on the Board's website at www.medicalboard.gov.au

Comments

7. Preliminary conclusion of the National Board about whether current arrangements are satisfactory

The National Board has undertaken a preliminary review of the current arrangements, including an analysis of risks, benefits and costs. The review was based on the submission provided by the AMC against the Quality Framework for the Accreditation Function as referenced in section 6 above and the Board's experience working with the Council over the last two years.

7.1 Proposed decision of the National Board based on a preliminary review of current arrangements including analysis of risks, benefits and costs

Based on its preliminary review, the view of the National Board is that the current accreditation arrangements are satisfactory and therefore should be continued.

To what extent are you in agreement with the preliminary view of the Board?

Strongly disagree

Strongly agree

Please provide comments about the Board's preliminary view

6.1 Governance (Domain 1):

The MIPS Constitution requires it to promote honourable and discourage irregular practice and to consider, originate, promote and support, or oppose legislative or other measures affecting Members.

Members are required to be legally qualified health care practitioners legally entitled to practise and have the appropriate qualifications, training and experience for the health services they provide.

The Australian Health Practitioner Regulation Authority, the National Boards and Accreditation Authorities therefore play a pivotal role in determining who is eligible to apply for membership of MIPS.

In our view healthcare practitioners must have access to just, timely, efficient, transparent and independent accreditation and assessment processes that provide clarity to them and ensures that the community can have confidence in a safe and competent healthcare workforce.

Stakeholders will have increased confidence in an appointed accreditation and/or assessment body if it is clear what is required of the role and how and by whom that accreditation and/or assessment body, its governance structure and senior employees are appointed.

If the appointment process (of the Australian Medical Council in its current or amended form or an alternative service provider), for its governance structure and senior employees is not open, transparent, appropriate, objective and merit-based then stakeholders may reasonably hold concerns that the processes for accreditation and assessment are not fair, equitable, independent and unbiased.

A higher level of concern in respect of independence may be expected without a separation of function between the National Board and the accreditation body.

It is anticipated that such concern is more likely if after completing the review the National Board chose not to continue to 'outsource' to an expert independent accreditation body. Arguably an outsourced provider, responsible to the National Board, can better focus on the important but more confined role of accreditation.

Although there are likely to be some natural synergies between accreditation and assessment roles there may be benefits to separating the outsourcing of those two activities.

The National Board does however need to ensure that it has the expertise to consider the outputs of the accreditation and/or assessment body in the context of ensuring safe, effective delivery of health care. An important element of that is oversight that does not adversely impair the independence of the body but also does not waive the responsibility for adequate oversight required to confirm fair, efficient and effective function.

Stakeholders usually have greater confidence in any organisation, structure or process that is subject to open and independent review and where accountability is demonstrated through clear, strong, regular process and procedures.

Currently such accountability of accreditation/assessment governance, management and process appears unclear and indirect.

6.7 Assessing overseas qualified practitioners (Domain 7):

Common concerns reported to MIPS over time by International Medical Graduate members of MIPS relate to time-frames and perceived complexity of, and uncertainty in, assessment processes.

Although we understand that work has been done in this area in relation to International Medical Graduates (IMGs) our experience is that IMGs are often still unclear as to Australian requirements of them.

Accreditation requirements must be able to be easily understood and any changes in requirements well promulgated in advance of implementation. It is unfair and does not reflect well if significant changes are made and implemented without appropriate supporting rationale.

Many IMGs make decisions to come to Australia based on the information available to them at a point in time. Many of the decisions made will have a profound effect on an IMG and their family. Expectations of IMG candidates need to reflect reality and changes in process and requirements ideally should not disadvantage those who in good faith have embarked on an often lengthy course of action.

Importantly those involved in such life-changing decisions such as assessment for registration in Australia must be widely recognised and accepted as independent and objective experts.

Review and appeal processes in respect of adverse decisions need to be appropriate, easily understood, objective, well developed, timely and widely promulgated.