



**National Registration and Accreditation Scheme for the Health Professions**

**Response from the Medical Practitioners Board of Victoria**

**to the Consultation Paper on:**

**Proposed arrangements for accreditation**

**17 December 2008**

The Medical Practitioners Board of Victoria is a statutory authority established to protect the community and guide the medical profession.

The Board registers doctors, investigates complaints about doctors, monitors the health of doctors who are ill and may be unfit to practise medicine, and develops guidelines for the profession.

The Medical Practitioners Board of Victoria is pleased to be offered an invitation to respond and offer comment on matters covered by the Health Workforce Principal Committee (Practitioner Regulation Subcommittee) paper on "*Proposed Arrangements for Accreditation*" under a National Registration and Accreditation Scheme.

Board Members and the senior management staff of the Board have given careful consideration to the consultation paper and below are the Board's thoughts and responses to the consultation paper.

## Specific comments on matters raised in the Consultation Paper

### 3.3 Initial assignment of accreditation functions to existing national accreditation bodies

The first stage of legislation for the national scheme (Bill A) is to enable the establishment of the national agency and national boards for each of the ten professions which will be covered by the scheme. It will also enable Health Ministers to make decisions on assignment of accreditation functions to current national accreditation bodies.

The views of the professions were sought on the use of existing bodies or otherwise for the accreditation function and views on the composition of an appropriate accreditation committee where there was not an existing body. Submissions from stakeholders responding to these questions on preferred accreditation arrangements will form the basis of advice to Health Ministers on details regarding the assignment of accreditation functions. It is expected that assignment arrangements may be announced by the end of 2008.

#### MPBV Comment

The Board believes strongly that the Australian Medical Council (AMC) accreditation function should be retained for the medical profession.

The AMC systems and processes, developed over a period of more than 20 years, might also prove a useful model when considering the arrangements associated with the accreditation of other health professions.

### 3.4 Scope of accreditation

**Proposal 3.4.1:** It is proposed that in preparation for commencement of the national scheme, national boards will consider whether there is a need for specialist endorsements in their profession.

#### MPBV Response

See response under 3.4.2 below.

**Proposal 3.4.2:** In the case of the medical profession, it is proposed that the national board take advice from the Australian Medical Council on the list of specialties and associated specialist qualifications, against which the board could endorse individual registrants as specialists.

#### MPBV Response

The MPBV supports this proposal as it essentially retains the current arrangements with the AMC in relation to specialist endorsement/s on registration.

**Proposal 3.4.3:** It is proposed that in line with the IGA the national scheme legislation will provide that while boards may approve the initial list of specialties, any new specialties or specialty areas of practice will require Ministerial Council approval.

#### **MPBV Response**

The MPBV supports this proposal, noting that, at present, the Board plays no role in the approval of specialties. The Board would also advocate strongly for the retention of the current role of the AMC in this process. While noting the potential Commonwealth budgetary consequences associated with the recognition of new specialties, the independence of the AMC assessment and advice should be preserved.

**Proposal 3.4.4:** It is proposed that the Ministerial Council specify that the core accreditation functions initially assigned to the external accreditation bodies are the core functions listed above where those functions are currently undertaken by the body.

#### **MPBV Response**

The MPBV supports this proposal.

**Proposal 3.4.5:** It is proposed that the Ministerial Council specify that it would be open to boards to delegate to external accreditation bodies or committees other functions related to accreditation or other matters for which the boards have responsibility, but the boards would not be required to do so.

#### **MPBV Response**

The MPBV supports this proposal, and, in the case of the medical profession, supports the delegation of the functions associated with accreditation to the AMC.

**Proposal 3.4.6:** It is proposed that the national scheme legislation allows for changes and expansion of the range of courses accredited with any such expansion requiring the approval of the relevant standards by the Ministerial Council.

#### **MPBV Response**

The MPBV supports this proposal. Our comments in relation to the independence of the accrediting agency providing advice to the Ministerial Council (see 3.4.3 above) also apply in relation to any expansion in the range of approved courses.

**Proposal 3.4.7:** It is proposed that the legislation provide general powers of delegation to boards allowing them to delegate other functions to external accreditation bodies where they consider this is the best way to achieve the objectives of the national scheme and where this is consistent with their powers under the legislation.

#### **MPBV Response**

The MPBV supports this proposal.

### 3.5 Governance arrangements for external accreditation bodies

Stakeholders are invited to provide comment on how the guidance to be provided on the governing body of external accrediting bodies can provide for community input and input from education providers and professions but provide independence in decision-making.

#### MPBV Response

The current constitution of the AMC provides for membership from all stakeholders, including the profession, education providers and community representatives, and has the ability to establish advisory committees/panels to support various aspects of its work.

The decision-making processes around accreditation should be independent, have integrity and ensure the maintenance of professional standards. To that extent, there should be sufficient flexibility in the governance arrangements of the accrediting body to tailor its processes to the particular circumstances or requirements of each individual activity.

The MPBV notes that the reputation of the AMC as an independent, authoritative accrediting body has been underpinned by its capacity to ensure that professional (including Board), community and educational expertise is sought and applied in appropriate measure when constituting accreditation panels.

Consideration might also be given to adding a section to the legislation requiring the national Board to formulate a policy, binding on the external accreditation agency, on the appropriate level of consultation to be undertaken by that body in reaching a decision. The cost of that consultation would need to be borne by the entities seeking accreditation.

**Proposal 3.5.1:** It is proposed that the agency's requirements in relation to the national scheme should be specified in the contract with the specific accreditation body.

#### MPBV Response

On the understanding that the agency's requirements would be developed in consultation with the respective boards, the MPBV supports this proposal.

**Proposal 3.5.2:** It is proposed that the terms of contracts between the agency and the external accrediting body include but are not limited to, the following matters:

- a) The objectives of the national scheme
- b) The accreditation framework standards developed by the agency
- c) The budget for the accreditation functions it is performing for the national board
- d) The contribution to the cost of those functions to be drawn from registration fees
- e) Monitoring and reporting arrangements
- f) Requirements relating to contributions to the national board's annual report, and
- g) Provisions relating to termination of the contract.

#### MPBV Response

The MPBV supports this proposal in principle, noting that such levels of prescription might be more necessary for those arrangements involving less-experienced accreditation agencies than for bodies such as the AMC.

Other matters which might be considered for inclusion in contracts are:

- An agreement to be bound by the policy of the National Board in relation to accreditation (see 3.5 above)

- Application of FoI and Privacy legislation
- A process for resolving any disputes which might arise between the Scheme and the external accrediting body
- An internal, binding review mechanism.

**Proposal 3.5.3:** It is proposed that the arrangements between the agency and any external accreditation body form part of the health profession agreement between the agency and each national board, providing both the national board and the agency with input to the arrangements.

#### **MPBV Response**

The MPBV supports this proposal on the understanding that health profession agreements would be driven by professional requirements, including accreditation arrangements, and not constrain or compromise the independence of accrediting bodies.

The health profession agreements should also provide for resourcing commensurate with the level of complexity and risk associated with the task being undertaken. In the case of the medical profession, the significant and substantial *pro bono* contribution of doctors to the current accreditation arrangements needs to be explicitly acknowledged and accommodated in future arrangements.

**Proposal 3.5.4:** It is proposed that the national scheme legislation provide that the agency must consult with the boards on the development of the standards to govern registration and accreditation processes within the scheme.

#### **MPBV Response**

The MPBV supports this proposal in principle, noting that it would be preferable to require the agency not only to consult the boards but also to have regard to that feedback. The development of standards is inextricably linked to professional requirements and, ultimately, safety to practise. It is a matter requiring professional input and expertise, and should be independent of administrative convenience or political imperatives.

**Proposal 3.5.5:** It is proposed that the external body assigned to undertake accreditation in the first three years will have the ability to delegate parts of the accreditation function to other agencies, while it remains responsible for the overall function, where there is no conflict of interest and where this was the arrangement at the time the accreditation function was assigned.

#### **MPBV Response**

The MPBV supports this proposal.

#### **Ensuring transparency**

**Proposal 3.5.6:** As per Bill A, it is proposed that the national scheme legislation provide that the accreditation bodies and committees of the national board be required to consult widely when developing standards for accreditation.

#### **MPBV Response**

The MPBV supports this proposal in principle, noting that the AMC standards and processes for accreditation are well developed, robust and published on their website. It should further be noted that the transparency associated with the current AMC standards is the result of

extensive collaboration with the profession and the community, especially indigenous communities.

**Proposal 3.5.7:** It is proposed that the national scheme legislation provide that the agency be required to publish on its website, the standards for accreditation following approval by the Ministerial Council as well as all fees and charges related to accreditation.

#### **MPBV Response**

See comment under 3.5.6 above.

**Proposal 3.5.8:** It is proposed that the contract with the external accreditation body require that body to provide information to the national board on financial reports pertaining to accreditation functions, activities undertaken during the year, including standards developed, courses accredited or monitored, the number of qualifications assessments of overseas trained practitioners undertaken and the decisions made as a result of these assessments, and anything else requested by the national board, for inclusion in the agency's annual report.

#### **MPBV Response**

The MPBV supports this proposal.

### **3.6 Accreditation committees**

**Proposal 3.6.1:** It is proposed that the Ministerial Council require that accreditation committees comprise two registered practitioners from the relevant profession, two members with education and training expertise, two community members and two representatives from the relevant national board.

#### **MPBV Response**

Where accreditation committees have been formed, the MPBV supports this proposal.

**Proposal 3.6.2:** It is further proposed that the Ministerial Council require that the relevant national board appoint an accreditation committee chair from among these members.

#### **MPBV Response**

Where accreditation committees have been formed, the MPBV supports this proposal.

**Proposal 3.6.3:** It is also proposed that the Ministerial Council require that the process by which the national board selects members for an accreditation committee be open and transparent. Positions should be advertised and allow for expressions of interest from individuals and nominations from groups.

#### **MPBV Response**

Where accreditation committees have been formed, the MPBV supports this proposal.

## Administration

**Proposal 3.6.4:** It is proposed that the legislation will give general delegation powers to boards allowing them to delegate other functions to agency staff and committees, as well as external accreditation bodies, where they consider this is the best way to achieve the objects of the national scheme and it is consistent with their powers under the legislation.

### MPBV Response

The MPBV supports this proposal, noting that at present agencies other than the AMC perform accreditation-related functions. For example, the Postgraduate Medical Council of Victoria provides recommendations on the accreditation of intern positions.

## 3.7 Linkages

### Review and appeal provisions

**Proposal 3.7.1:** It is proposed that any organisation disadvantaged by an accreditation decision of the board should have the right to seek a merit or process review and, if required, go beyond that to an external process of review.

### MPBV Response

The MPBV supports the principle of a review process being available to organisations dissatisfied by an accreditation decision of the Board. However, the Board would make two observations.

Firstly, it would note the current collaborative approach of the AMC in working with all parties involved in accreditation matters to reach a mutually agreed outcome.

Second, it would be unusual to have an internal review system that looks at process as well as merits. Generally process is considered by the courts only (because the court cannot look at merits in most cases). The principle behind looking at merits only by an internal review body is that the decision is remade. That is, the review body reconsiders all the information that was before the original decision maker and any new information that may have arisen subsequently and makes its decision. This means that the decision of the review body 'cures' any defect in procedure of the original decision.

## 3.8 Indemnity

**Proposal 3.8.1:** It is proposed that the national scheme legislation will provide that all bodies and their agents under the scheme will be indemnified for work performed in relation to the scheme. These indemnity arrangements will extend to external accreditation bodies and committees and persons acting for those bodies and committees.

### MPBV Response

The MPBV supports this proposal.

### 3.10 Accreditation processes

**Proposal 3.10.1:** It is proposed that the Ministerial Council request that the agency consider the following matters in developing standards for accreditation processes:

- a) the document Standards for Professional Accreditation Processes developed by 'Professions Australia' in consultation with the Forum of Health Professions Councils
- b) the need to meet any relevant international guidelines relating to the specific professions
- c) the need to align standards with relevant international standards and clearly indicate the international standards on which these standards are based when presenting them to boards for consideration, and
- d) the need to ensure that accreditation assessment panels provide sufficient public accountability and independence.

#### MPBV Response

The MPBV supports this proposal.

### Relationship between registration and accreditation functions

**Proposal 3.10.2:** It is proposed that the legislation provides for ongoing monitoring of education courses and institutions, including requiring accredited education providers to report to the accreditation body or committee any significant curricular changes or resourcing issues that would adversely impact on students and compromise their ability to register, and requirements for the accreditation body or committee to report any such adverse events to the relevant national board as soon as it becomes aware of them.

#### MPBV Response

The MPBV supports this proposal.

## 4 Linkages with Commonwealth, State and Territory government bodies

**Proposal 4.1:** It is proposed that accreditation reports will be made publicly available in the agency's annual report and on its website. These reports will include recommendations and outcomes of accreditation processes and information on education and training courses.

#### MPBV Response

The MPBV supports this proposal.

## 5 International linkages

**Proposal 5.1:** It is proposed that the national scheme legislation provide that standards for accreditation are developed in consultation with New Zealand and any other country with which Australia has (or develops) a mutual recognition agreement.

#### MPBV Response

The MPBV supports this proposal. However, it should be noted that doctors are exempt from the mutual registration arrangements under the *Trans-Tasman Mutual Recognition Act 1997*.

## 6 Transitional arrangements

**Proposal 6.1:** It is proposed that transitional arrangements to be included in the national scheme legislation will include requirements for:

- a) current boards to provide the new national boards with their lists of accredited courses prior to the commencement of the national scheme
- b) standards for courses or education providers which exist on 30 June 2010, to continue until they are replaced with standards developed under the national scheme and approved by the Ministerial Council
- c) education and training courses and education providers which are accredited by the current boards on 30 June 2010 to be deemed to be accredited under the national scheme until they have been re-accredited under the new provisions, and
- d) lead times of at least one full year for the introduction of any new accreditation standards following approval by the Ministerial Council to allow course providers to make any required changes to their courses.

### **MPBV Response**

The MPBV supports this proposal.