

ACCREDITATION OF HEALTH PROFESSION EDUCATION PROGRAMS

Document 1 – *Good Practice in Accreditation of Health Profession Education Programs*

Document 2 – *Essential Elements of Education and Training in the Registered Health Professions*

Statement of purpose

In 2008, Professions Australia adopted *Standards for Professional Accreditation Processes* as a statement of good practice in the process of assessing and accrediting programs of study that lead to entry to the professions. This document was endorsed by the Forum of Australian Health Professions Councils in May 2008.

The Forum is a coalition of the authorities responsible for the assessment and accreditation of programs of study in the registered health professions and of the education providers who offer these programs.

Since the Forum adopted this document, the *Health Practitioner Regulation National Law Act 2009* has been passed and the National Registration and Accreditation Scheme for the health professions has commenced.

To assist in building a common understanding of good practice in accreditation of the registered health professions, with the permission of Professions Australia, the Forum has customised the general principles in the Professions Australia document to apply particularly in the context of health professions education and to reflect the provisions and terminology of the National Law.

As well as a common commitment to good practice in accreditation processes, Forum members share a commitment to setting appropriate accreditation standards which relate to the elements of the education and training process essential to producing graduates with the knowledge, skills and professional attributes necessary for safe and competent professional practice at the point of graduation and throughout their professional career. The document *Essential Elements of Education and Training in the Registered Health Professions* articulates the essential requirements for delivery of appropriate health profession education programs, which are addressed in the accreditation standards of all members of the Forum of the Australian Health Professions Councils.

Document 1

GOOD PRACTICE IN ACCREDITATION OF HEALTH PROFESSION EDUCATION PROGRAMS

Scope of this document

Under the *Health Practitioner Regulation National Law Act 2009*, accreditation function means

- (a) developing accreditation standards for approval by a National Board; or
- (b) assessing programs of study, and the education providers that provide the programs of study, to determine whether the programs meet approved accreditation standards; or
- (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).

This *Good Practice* statement concerns those elements of the accreditation function that relate to the assessment and accreditation of programs of study and the education providers who offer them.

Rationale for agreed cross-health profession good practice principles for accreditation processes

1. To provide an agreed standard against which professional accreditation authorities can assess their own practices and performance, and thereby improve quality.
2. Through transparent processes to facilitate understanding of and informed contributions to accreditation processes by interested parties such as policy makers, employers, the profession and the public.
3. To demonstrate to stakeholders the standards the accreditation authorities set for their own practice.
4. To promote appropriate uniformity and consistency in accreditation and review practices, to the benefit of institutions which undergo review by a range of assessing authorities.
5. To extend the opportunities for sharing accreditation tools and resources between accreditation authorities and thereby to promote best practice and innovation while reducing costs.

Forum members acknowledge the need for the national registration boards to have mechanisms to review the performance of Forum members in their role as external accreditation authorities appointed under the National Law. The Forum supports an approach that is sensible, transparent, takes account of other regulatory controls on the operation of individual councils, reflects risk and is proportionate.

In adopting these principles, the Forum members acknowledge:

- that each accreditation authority will continue to develop in response to the overriding purpose of the accreditation process and the profession-specific context, including the settings/environment in which the profession is practiced, the public interests protected by setting standards for education of practitioners; and the specific knowledge, skills and professional attitudes necessary to practise the profession in Australia;
- that there are a diversity of approaches to, and purposes for, external review and quality evaluation, but that these approaches can be underpinned by some common agreed principles.

These good practice principles are consistent with the *Health Practitioner Regulation National Law Act 2009*.

They are influenced by the following:

- Professions Australia *Standards for Professional Accreditation Processes (June 2008)*
- Policies and procedures of the Australian Health Practitioner Regulation Agency
- AS/ISO International standards for quality assurance: ISO 17011 on conformity assessment, and the International Network for Quality Assurance Agencies in Higher Education Guidelines of Good practice <http://www.inqaah.org>
- International standards and benchmarking processes relevant to specific professions, for example World Federation for Medical Education/World Health Organisation Guidelines for Accreditation (<http://www.wfme.org>).
- The collective experience of the accreditation authorities for the registered health professions in Australia.

GOOD PRACTICE PRINCIPLES

1 Aims of the accreditation process

The accreditation authority defines the purpose and scope of the accreditation process. The link between accreditation of programs and approval of programs by registration boards and the registration of the graduates of accredited programs is stated.

For registered health professions, the purpose of accreditation of the professional entry level courses will relate to assessing the capacity of the programs and their education providers to produce graduates who have the knowledge, skills and professional attributes necessary to practise the profession in Australia and who are prepared by their program of study for life long learning.

In addition to quality assurance, the stated aim of the accreditation process includes continuous improvement of the quality of professional education and training to respond to evolving community need and professional practice.

2 The authority responsible for accreditation

2.1 Governance

The accreditation authority has defined its governance structure and processes, governs itself effectively, and demonstrates competence and professionalism in the performance of its accreditation role.

The Forum recognises that accreditation authorities carry out a diverse range of functions, and the governance structures will vary from authority to authority reflecting this diversity.

The accreditation authority:

- is a legally constituted body and registered as a business entity, and as a consequence has a formal constitution and/or similar document that defines its objects and powers, and manner of operation as a business
- in its mission or purpose statement gives appropriate priority to its accreditation functions relative to other activities
- defines the terms of reference and membership requirements for committees and panels that make accreditation decisions and/or recommend accreditation policy. It requires majority representation from the profession as well as representation of other stakeholder groups. Accreditation committees should include a majority of members with a background in the delivery of education in the profession. Depending on the profession, relevant stakeholders might include students and practitioners in training, allied professions, health service managers and representatives of the wider community.
- provides information about the legal and registration framework in which the accreditation system operates including its authority to undertake its assessment and accreditation roles
- defines the responsibilities and membership of the bodies (expert teams/review committees/site survey teams) which assess programs acting within the accreditation authority's policies and procedures

- sets out the communication processes and mechanisms for stakeholder and community communication with the accreditation authority.

2.2 Independence and standing of the accreditation process

The accreditation authority is able to demonstrate independence in performing the accreditation functions, and has autonomous responsibility for its operations and makes judgments in its reports as well as its decisions about accreditation status that are not influenced by third parties.

To work effectively, the accreditation system must be trusted. This trust will be based on the professionalism, competence, efficiency and fairness of all the organisations that have decision-making roles in the accreditation system.

The accreditation authority works to build stakeholder support, and collaborates with appropriate national and international accreditation organisations.

The accreditation authority publishes on its website how it exercises its accreditation functions.

The accreditation authority sets standards for the conduct of its accreditation functions by reference to national and/or international codes of conduct for accreditation bodies in its profession or in the professions in general.

The authority has policies and processes that apply to the professional conduct of business, including:

- confidentiality regarding documentation and proceedings
- management of interests and conflicts of interest
- systems for managing information and records
- continuous review processes and internal auditing
- resourcing the accreditation functions including human and financial resources to achieve organisational objectives and undertake the functions in a professional, effective and efficient manner
- risk assessment and management
- appeals.

The accreditation authority makes relevant policies and procedures publicly available.

3 The accreditation standards

The accreditation authority applies the approved accreditation standards, which have been set in advance of the assessment of programs of study and providers.

The Forum of the Australian Health Professions Councils has endorsed the document *Essential Elements of Education and Training in the Registered Health Professions* as articulating the essential requirements for delivery of health profession education programs. Forum members address these common requirements, as well as discipline-specific requirements, in their accreditation standards.

The standards are used to assess whether or not the education provider and program of study seeking accreditation have met the defined requirements for accreditation.

The accreditation authority supports the development of accreditation standards with research and an evidence base. Standards take account of relevant international standards and statements relating to education and training in the profession, and the accreditation standards applied in countries with comparable education and practice standards for the profession.

The accreditation authority reviews standards regularly. The accreditation authority indicates the opportunities available to stakeholders to contribute to the development and review of the standards. Stakeholder bodies would include the education sector, students/trainees, the profession, the community, and governments. Proposed changes are published on the authority's website at the commencement of a consultation process.

In proposing a new or amended accreditation standard, an accreditation authority satisfies itself that the proposal meets the Australian Health Practitioner Regulation Agency procedures for the development of accreditation standards.

The accreditation authority supports the national board in making the approved standards public.

4 Accreditation procedures

The accreditation authority has rigorous, fair and consistent processes for carrying out its accreditation functions.

The accreditation processes not only provide assurance that accreditation standards are being met but also facilitate continuing quality improvement in education providers and their programs. To achieve optimum influence on program improvement, peer review and collegiality are embedded in the accreditation processes in a manner consistent with maintenance of the independence of accreditation functions and decisions on outcomes.

The accreditation authority's policies describe the key components of the process. It provides access to the forms to be completed and describes the documentation to be provided. The accreditation policies also describe essential pre- or co-requisites (e.g. other necessary accreditation).

The process of accreditation must include the following stages:

- Self-assessment by the education provider seeking accreditation. The self-assessment is an essential planning instrument enabling the education provider to identify strengths and weaknesses and areas for improvement. The self-assessment should form the basis for the education provider's preparation of an accreditation submission.
- An external assessment, by a team appointed by the accreditation authority, and based on the accreditation submission, team visits and meetings, and if necessary the collection of stakeholder feedback.
- Opportunities for the education provider to comment on the draft report.
- A final report by the team after the external assessment, containing recommendations regarding the decision on accreditation.
- The decision on accreditation.
- A report to the appropriate national board.
- Ongoing monitoring of the accredited program of study and education provider by the accreditation authority.

The accreditation authority's processes describe how it assesses the following for accreditation purposes:

4.1 *Established programs/education providers*

The accreditation authority has a cyclical accreditation process, providing for regular re-assessment of accredited providers and programs of study in order to verify that they continue to meet the approved accreditation standards.

The accreditation authority's policies describe the accreditation cycle, including the periods of accreditation possible, and factors that may affect the timing of assessments.

4.2 *New programs or education providers*

The accreditation authority has a process for assessing proposed new programs in the discipline. The process entails:

- an assessment of capacity
- initial accreditation or approval to proceed before students commence in the program.

The accreditation authority's policies describe the accreditation cycle for new programs, including requirements for monitoring during the implementation phase and the way in which the period of accreditation is determined.

4.3 *Major changes to established programs*

The accreditation authority describes the procedures for education providers to report on plans to change their accredited program. It defines the program or institutional changes which may affect the accreditation status and accreditation cycle of the education provider and program of study.

The accreditation authority has a process for assessing education providers' plans to make major changes to established and accredited programs. The process entails initial accreditation of the program before students commence in the changed program.

The accreditation authority's policies describe the accreditation cycle for programs which are undergoing major change, including requirements for monitoring during the implementation phase and way in which the period of accreditation is determined. The policies also specify requirements for assessment and monitoring of the 'teach out' of the old program.

4.4 *Review committees / assessment teams*

The accreditation authority describes the role and responsibilities of its assessment teams, the qualifications required, and the way in which the team composition is determined. It has policies on the selection, appointment, training, and performance review of team members. Its policies provide for the use of competent and knowledgeable individuals, who are qualified by experience and training, to assess professional programs of study and their providers. The members of the review or assessment team should include a majority with a background in education or practice in the relevant profession and other skills appropriate to the specific assessment. The size of the team will depend on the complexity of the task and the range of skills required.

The accreditation authority's policies provide for the education provider being assessed to be informed of the proposed composition of the assessment team and to have the opportunity to express a view regarding any potential conflicts of interest. The authority's policies describe how it manages conflict of interest and confidentiality in the work of the team.

4.5 *Team visits and meetings*

The accreditation authority's policies describe the following in detail: the role of site visits and/or meetings with the education provider; how this accreditation program is negotiated and conducted; the duration and scope of site visits including visits to clinical teaching sites, and the respective responsibilities of the accreditation authority and the host education provider for organising and informing participants about the interactions between the team and provider representatives.

The authority describes how the team will gather information during the interactions between the team and education provider representatives. This should include a variety of methods such as collection of documents and statistics (e.g. study guides, reading lists and statistical material on pass/failure at examinations); individual interviews (with dean, department heads, etc.); group interviews (at meetings with the committee or group responsible for the self-evaluation, curriculum committee, students, etc.); and/or direct observation (at visits to facilities, departments and classrooms).

The accreditation authority describes the feedback provided to the education provider during and at the end of these interactions.

4.6 *Feedback to the education provider and review of reports*

The accreditation authority's policies describe the nature of reports provided to the education provider (e.g. draft written or preliminary verbal, final written etc), opportunities for review and comment, and timeframes for comment.

The policies should include provision for the education provider being assessed to correct errors of fact in a draft report.

4.7 *The authority's accreditation decision*

The authority's policies describe the range of accreditation options available.

Decisions on accreditation are based on the assessment against the accreditation standards. Accreditation status is granted for a fixed period of time.

Categories of accreditation decisions should include:

- 1 Full accreditation for the maximum period if the accreditation authority is reasonably satisfied that the program of study and the education provider meet the accreditation standards.
- 2 Accreditation with conditions, if the accreditation authority is reasonably satisfied that the program of study, and the education provider substantially meet the accreditation standard and the imposition of conditions on the approval will ensure the program meets the standard within a reasonable time.¹ The seriousness of the problem is to be reflected in the specification of conditions:
 - accreditation may be conferred for the entire period stated but with conditions, and specific actions to be reported; OR

¹ Health Practitioner Regulation National Law Act 2009, Part 6 Accreditation Section 48

- accreditation may be granted for a shorter period of time, in cases where some standards are only partly met or not met. A review process must be followed.
- 3 Revoke or deny accreditation in the event that the education provider and the program of study cannot meet the standards within an appropriate period. Whether the authority provides remediation and assistance to the education provider or to students in these circumstances should be clear.

If the accreditation authority decides to refuse accreditation, it gives written notice of the decision to the education provider, stating the following: the reasons for the decision; that within 30 days of receiving the notice, the education provider may apply to the accreditation authority for an internal review of the decision; and how the education provider may apply for the review. The person/s who assessed the program of study for the accreditation authority must not carry out the review².

4.8 *The final report*

The final report addresses the accreditation standards. The report describes the program/education provider's performance against the standards and gives a brief account of the evidence supporting the assessment. The report includes recommendations to the accreditation authority regarding the decision on accreditation.

The accreditation authority provides a report to the national health practitioner board for the profession so that it may make a decision on approval of the program of study for registration purposes. It provides the report to the education provider as well. It has a public policy on the release of accreditation reports to other bodies and individuals.

The authority maintains a public list of the accredited programs/education providers.

4.9 *Ongoing monitoring of accredited education providers and programs*

The accreditation cycle provides for the monitoring of accredited education providers to ensure the authority is informed of developments in the accredited programs, and to verify their continued compliance with the standards.

The accreditation authority's policies describe the monitoring processes, the cycle for accredited education providers to report, the nature and content of reports, and how reports are considered. Any special procedures for notifying potential or actual changes to the program of study should be described.

The authority has developed procedures to be followed in the event that it finds the program of an accredited education provider may no longer meet or may only substantially meet standards that have been met. These specify the process for review, and whether the authority provides remediation and assistance in these circumstances.

If the accreditation authority reasonably believes the program of study and education provider no longer meet an approved accreditation standard for the health profession, the accreditation authority must either impose the conditions on the accreditation that the accreditation authority considers necessary to ensure the program of study will meet the standard within a reasonable time; or (ii) revoke the accreditation of the program of study; and give the National Board that approved the accredited program of study written notice of the accreditation authority's decision.³

² Health Practitioner Regulation National Law Act 2009, Part 6 Accreditation Section 48 (4)

³ Section 50

5 Accountability

5.1 Evaluation and feedback

The authority has processes for ongoing monitoring and evaluation of its performance against relevant national and international standards and contractual requirements.

It seeks stakeholder feedback to improve its processes.

5.2 Complaints and appeals

The authority has policies for review of assessment processes and appeals against decisions. The authority describes the principles, rules and grounds for review and appeals as well as the review/appeal processes and the cost of such processes.

The accreditation authority has a process for dealing with complaints it receives about accredited programs. The policy should specify the range of complaints that the authority is able to consider. These should relate to the authority's accreditation standards. The policy should also specify the processes for assessing and responding to complaints, the circumstances in which the accredited institution is asked to respond to a complaint, and whether confidential complaints can be made.

The authority's procedures ensure the timely, fair, and equitable handling of all complaints related to the standards and procedures for accreditation/approval.

Adopted by the Forum 3 March 2011.

Forum of Australian Health Professions Councils

Document 2

ESSENTIAL ELEMENTS OF EDUCATION AND TRAINING IN THE REGISTERED HEALTH PROFESSIONS

Preamble

To assure the community that practitioners' knowledge, skills and professional attitudes meet a standard appropriate to their responsibilities, all healthcare professionals require a set of core attributes and capabilities. These professional attributes include good communication skills, the ability to work in the health care team, non judgemental behaviour, empathy and integrity, and a commitment to life long learning.

Health practitioners apply the principles and procedures of their profession for some or all of the following: health promotion and disease prevention; and diagnosis, care and management of patients. Health practitioners implement care and treatment plans (or management plans) and conduct education and research.

The Forum of Australian Health Professions Councils recognises the work by the Australian Learning and Teaching Council through the Learning and Teaching Academic Standards (LTAS) project to bring discipline communities together to define academic standards in line with the Australian Government's new standards-based quality assurance framework. It acknowledges the threshold learning outcomes set for the medicine and the health sciences:

- Demonstrate professional behaviours
- Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/communities
- Promote and optimise the health and welfare of individuals and/or populations
- Retrieve, critically evaluate, and apply evidence in the performance of health related activities
- Deliver safe and effective collaborative health care
- Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development

(*as defined by each individual discipline)]

The roles of all health professionals change over time based on evidence, changes in professional practice and community need. Health professionals must have the knowledge, skills and attributes to respond to these changes.

In addition to setting standards concerning the knowledge, skills and attributes required of graduates, health profession accreditation authorities set standards concerning the delivery of education, training and assessment of the students' performance:

- to ensure that students derive maximum benefit from their program of study
- to ensure that the programs of study will meet the accreditation standards for an extended period of accreditation
- to ensure that the programs are producing graduates who are safe to practise
- to guide the continuous improvement of programs of study.

These common standards are described below.

Standards concerning the education provider's relations with stakeholders

Health profession accreditation authorities set standards concerning the collaborative relations between education providers and the health care services on issues of education, teaching, supervision and research.

Curriculum standards

Health profession accreditation authorities require graduates of programs of study to acquire a combination of knowledge, skill and professional behaviours, including the scientific and evidence base of the discipline; communication skills; population, social and community health; clinical sciences and skills; and preparation for lifelong learning.

Health profession accreditation authorities require programs of study to address the importance of research in advancing knowledge of health and illness and to include formal learning about research methodology, critical appraisal of literature, scientific data and evidence-based practice, and to encourage the students to participate in research.

Health profession accreditation authorities require education providers to take account of developments in relation to models of care, health profession education, medical and scientific progress and community needs.

Teaching and learning standards

Health profession accreditation authorities require programs of study to include:

- teaching and learning methods that stimulate enquiry, develop analytical ability and encourage the development of appropriate professional attitudes
- supervised practice-based training, including as relevant participation in aspects of the health services and direct patient/client care
- appropriately integrated practical and theoretical learning
- interprofessional learning to assist students to develop knowledge and skills to work in multidisciplinary teams
- opportunities for students to be increasingly independent as skills, knowledge and abilities grow.

Student assessment

Health profession accreditation authorities require programs of study to assess:

- students' knowledge, skills and professional behaviours
- students' fitness to practise the profession
- students' preparation for clinical practice, using clinical assessments.

Clinical education and training standards

Health profession accreditation authorities require programs of study to include clinical education and training, including supervised patient/client contact, so that students learn professional behaviour and clinical skills and have these assessed in the context in which they will practise their profession.

These accreditation standards set requirements concerning:

- the structure of clinical education
- the range of clinical training: use of an appropriate variety of clinical settings, patients and clinical problems for training purposes
- monitoring by the education provider of the education, training and assessment at all sites
- clinical supervision and monitoring by the education provider to ensure that the staff at all sites are prepared for, participate in and are accountable for student education and assessment.

Student standards

Health profession accreditation authorities require education providers:

- to provide student support services, including counselling, and health services addressing student illness, impairment and disability
- to have mechanisms for dealing with students with impairment and for addressing with the registration board concerns about students' capacity to undertake clinical training. These requirements recognise the link between accreditation and registration: the award of a qualification by an education provider certifies that the student graduating from of an accredited course has met the academic and clinical requirements of the course. Registration boards, whose primary responsibilities include the protection of the public, generally set additional requirements for registration relating to fitness to practise, and extend registration and care to students.

Clinical staff and supervision standards

Health profession accreditation authorities require education providers:

- to define the responsibilities for the practitioners who contribute to the delivery of the training program and the responsibilities of the education provider to these practitioners.
- to facilitate the training of supervisors, and to evaluate their effectiveness.
- to have processes for supporting supervisors in their educational and assessment roles and to assist them in their professional development in this role.

Adopted by the Forum 3 March 2011.