

SUBMISSION

to

The Senate Standing Committee on  
Finance and Public Administration  
References Committee

***Inquiry into the administration of  
health practitioner registration by the  
Australian Health Practitioner  
Regulation Agency***

14 April 2011

**1. Information about the person or organisation making the submission**

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I am providing this submission on behalf of the organisation, not as an individual

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**2. About the Forum of Australian Health Professions Councils**

The Forum of Australian Health Professions Councils ('the Forum') is a coalition of the accreditation councils of the ten regulated professions under the National Registration and Accreditation Scheme (NRAS). Each of the accreditation councils is currently the appointed authority for the first three years of the NRAS under the provisions of the *Health Practitioner Regulation National Law Act 2009* (the 'National Law').

The membership of the Forum:

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

The Forum has been meeting regularly since 2007 to discuss matters of common interest, principally on matters of accreditation of education and training programs in the health professions. The Forum responds collectively to consultation processes and papers on matters common to the professions.

This submission constitutes the response of the Forum and is confined to general issues that are common to all the health professions. Each of the member Councils may make separate submissions. The views expressed below do not override the views expressed by the member Councils in their individual submissions.

### **3. Introduction**

The Terms of Reference of the Inquiry generally pertain to aspects of the registration functions of the National Registration and Accreditation Scheme rather than the accreditation functions within the Scheme, nevertheless the Forum welcomes the opportunity to comment on the implementation of the NRAS and the operation of the Australian Health Practitioner Regulation Agency (AHPRA).

The Forum supported the introduction of a national approach to registration and accreditation and worked with the NRAS Implementation Project during the development of the National Law and planning for the operation and introduction of the Scheme.

With the signing of the Intergovernmental Agreement in March 2008 the move from state and territory based jurisdictional registration, across ten discrete health professions (each with their own regulation infrastructure) to a nationally operated scheme under one piece of national legislation in itself was a very complex task. To have it operational on a national basis across all ten health professions on a single day – 1 July 2010, was indeed a huge undertaking. Despite some of the issues that arose the fact that this was able to happen is a testament to the commitment not only of the staff of the AHPRA, the membership of the National Boards but also to the many organisations, such as the ten accreditation councils and the Forum, who have worked in a very cooperative manner with AHPRA and with each other during the implementation of the Scheme.

The Terms of Reference of the Inquiry indicate that the Senate Finance and Public Administration References Committee will consider:

- (i) the capacity, ability and performance of the AHPRA in implementing and administering the Scheme;
- (ii) implications of the administration of the new Scheme; and
- (iii) the budget and financial viability of the AHPRA.

The Forum wishes to address some of these issues.

### **4. Challenges for the Implementation of the NRAS**

The challenges faced for the successful implementation of the Scheme included:

- the complexity of the Scheme
- the previously different regulatory requirements not only between the professions, but within the professions and across the jurisdictions

- the fact that this is not simply a straight replacement of one scheme with another, the new national Scheme having requirements not previously in the state based regulatory frameworks
- the requirement for new legislation to be in place nationally and in all participating jurisdictions, and for the previous legislation to be replaced – some of which was not delivered prior to the commencement of the Scheme
- the shortness of the time available for the necessary consultation with the key stakeholders and the review of the important documentation
- the dismantling of the state and territory infrastructure across the ten professions resulting in a considerable loss of experience, expertise, corporate memory and established communication channels
- the time it necessarily takes to establish the skills and expertise in the new national, and the new state-based offices of the Agency
- the lack of time for developing and testing of the Information Technology systems and software before the existing systems and registers were replaced by the national register
- the amount of data to be merged into one IT system – the information from AHPRA indicates that this involved 1.2 million data items from 85 different sources
- the known variation in the data elements recorded and the quality of the data across the jurisdictions and across the ten health professions
- the one piece of legislation covering the operations of the ten National Boards leading to, on occasion, an inappropriate ‘one size fits all’ requirement, and
- the under-funding of the project.

The Forum believes that the Australian Health Practitioner Regulation Agency has been focused on achieving the best possible delivery of the Scheme despite these considerable challenges, and has been assisted in its endeavours by the goodwill and the cooperative efforts of the professions throughout the implementation.

### **5. Challenges for the Ongoing Operation of the NRAS**

The NRAS has not yet been operating for one year full year. It would be expected that with a solutions oriented approach, and provided the Agency is adequately funded and the goodwill of the professions is not eroded, the Scheme across the current 10 health professions will operate well.

The challenges to be faced in the ongoing successful operation of the Scheme include:

- the emphasis on self sufficiency and the sole reliance on registration fees to cover the operation of all registration functions and all the accreditation and assessment functions
- the introduction of the ‘user pays’ principle in a manner that has not necessarily existed previously in a profession, with the possible

resistance from the bodies being accredited, and the possible erosion of the pro bono work of the profession in the areas of accreditation and assessment

- the imminent inclusion of four additional professions to the Scheme in July 2012; in most part the 'new' health professions to be added to the Scheme have previously had a less well developed regulatory and accreditation infrastructure than the original 10 professions, and would be expected to require additional resources and support from the Agency
- as the Scheme expands the inevitable need for variations of operation and administration between the professions to meet the healthcare needs of the community
- the requirements of the National Law for extensive consultation on a range of matters.

In addition the Australian Health Practitioner Regulation Agency must establish detailed working relationships with the other new national agencies in the area of health and education, such as Health Workforce Australia and the Tertiary Education Quality and Standards Agency – each of which is tackling a large reform agenda.

### **6. About the Relationship between the Forum and the Australian Health Practitioner Regulation Agency (AHPRA)**

The Forum collectively, and the individual member Councils, were involved during the NRAS Implementation Project stage in providing a reference group for consultation on the development of the National Law and the operation of the Scheme. While the time available for this consultation was always short and the deadlines tight, the Forum was pleased to work cooperatively on the project to effect a good transition to the national Scheme.

Since the commencement of the Scheme the Forum has continued to work closely with the National Boards and with the Agency. The Forum is currently engaged in a Joint Accreditation Working Party (Forum, Chairs of National Boards and AHPRA) with a joint Secretariat between AHPRA and the Forum, in preparation for a Joint Accreditation Workshop mid year. The Forum has engaged fully in the development of a draft accreditation framework and template for the funding agreement between the AHPRA and each of the accreditation councils to ensure that there is a shared understanding of the accreditation functions between the Councils and the Boards.

The accreditation councils are all entities in their own right and have functions and responsibilities beyond those functions under the National Law. There has been a challenge for the Councils, as well as for AHPRA and the National Boards, to have a clear understanding of their roles in relation to their National Board and the AHPRA during the transition period, to determine what changes they need to make in their own organisation to meet their obligations as an accreditation authority under the National Law, and yet maintain the independence of their accreditation processes and procedures. Part of the challenge has been the need to develop new

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communication protocols and a shared understanding of the roles of the Councils and the Boards. The AHPRA has, very understandably been focused on the registration operations of the Scheme during the initial stages.

The Forum (and the individual Councils) are very keen to work in a collegial and consultative manner with the National Boards and with the AHPRA to ensure the basic objective of the National Law is achieved, that is - the protection of the public by ensuring that only health practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered. Without a robust and sustainable accreditation Scheme this will be difficult to realise. The funding of the Scheme must ensure not only the maintenance of the quality of the current accreditation processes of each Council, but must allow for funding of developments and quality improvements in accreditation.

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