

Ensuring and maintaining quality assurance in chiropractic education and competency in Australia and New Zealand

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In reply please quote C32: DR

23rd April 2009

The Secretary
Senate Community Affairs Committee
PO Box 6100
Parliament House
Canberra ACT 2600

via email: community.affairs.sen@aph.gov.au

Dear Secretary

Re: Inquiry into National Registration and Accreditation Scheme for Doctors and Other Health Workers

The Council on Chiropractic Education Australasia (CCEA) is recognised nationally and internationally as the independent body responsible for ensuring competency and high education standards in chiropractic within Australasia. CCEA undertakes this role via:

- the accreditation and continual monitoring of Australasian First Professional Degrees in Chiropractic; and
- skills recognition/suitability assessment for migration to and practise in Australia as endorsed by the Department of Immigration and Multicultural Affairs.

CCEA has both participated in, and provided submissions on, all areas of the proposed National Registration and Accreditation Scheme. These submissions have addressed the following areas:

- other matters for inclusion in Bill B;
- proposed Registration Arrangements;
- proposed arrangements for handling complaints and dealing with performance, health and conduct matters;
- proposed arrangements for information sharing and privacy;
- proposed arrangements for accreditation; and
- proposed arrangements for Specialists.

While CCEA is generally accepting of the overall intent of the Scheme, it does wish to raise the following:

1. It is essential for accreditation bodies to retain independence

CCEA understands and agrees that for an accreditation body there is a need to have mechanisms which allow for accountability, transparency and dispute resolution. However, the need for independence is paramount. There is a need for independent review following institution/program self-review and peer-review. The aims of accreditation include both quality assurance and quality improvement. To achieve this quality audit, accreditation needs to operate within an independent legal framework and should be independent of government and other stakeholders.

If this independence and objectivity is lost or diminished, then the Standards and Decisions become compromised, the quality of education/training is impacted, and public safety is ultimately put at risk.

Proposed arrangements for Standards approval and accreditation body funding under the National Scheme have potential for impacting on the independence of the accreditation agency.

In addition, if sufficient independence is not maintained then international memberships and program recognition becomes jeopardised. This is certainly the case for CCEA, which provides services in Australia, New Zealand and Asia and is a member agency of the Councils on Chiropractic Education International (CCEI) www.ccei@earthlink.net, whose main objectives are towards international best practice, global benchmarking and mutual recognition of equivalence.

For background purposes we provide the following information to assist you in understanding our international requirements and obligations:

CCEI exists to:

- Define minimum model educational standards and ensure their adoption and maintenance by accrediting agencies worldwide;
- Define the process of accreditation and ensure appropriate implementation and administration of the process by accrediting agencies worldwide;
- Establish and maintain a process for verifying equivalence of the educational standards and accreditation processes utilized by CCEI member accrediting agencies worldwide;
- Assist and provide guidance for the development of accrediting agencies toward their full autonomy and membership in CCEI;
- Promote continuous improvement of model educational standards, recognizing educational, cultural and legislative diversity in various countries and regions; and,
- Advocate quality education through the dissemination and promotion of information to governments, professional organizations and others.

Membership in CCEI is open to agencies organised to accredit chiropractic education that meet <u>ALL</u> requirements for CCEI recognition and are committed to ongoing compliance with the responsibilities of membership, as stated in the CCEI Articles and Bylaws which include the following clauses:

- An accreditation agency must be completely independent and free from influence by any other body or individual.
- Endorsement and adherence to the Bylaws, Model Core Standards and Policies established by CCEI.
- Compliance with ALL provisions of the CCEI Bylaws and Policies.

There were a number of matters such as Standards approval process and funding within the consultation paper which if implemented as written would likely cause the CCEA to not be compliant with its CCEI requirements. The outcome of such would interfere with various steps of international mobility of students, recognition of equivalence of education programs and portability of qualifications.

Graduates from CCEA accredited chiropractic programs hold mutual recognition of international equivalence due to CCEA's membership of CCEI. Without this membership, movement of Australasian chiropractic graduates around the world would be nigh impossible without additional in-depth examination/assessment and perhaps even further study. If CCEA's independence does not remain, then this membership and associated "reciprocity" would be compromised.

CCEA also takes into consideration the Guidelines on Chiropractic Basic Education and Training issued by the World Health Organisation (in partnership with the World Federation of Chiropractic).

The assurance of transparency, independence and accountability is provided via several layers within the accreditation body. The CCEA is composed of appointees of the regulatory and professional bodies in Australia and New Zealand as well as educational nominees and community personnel.

CCEA appointees are not representatives of nominating bodies (as per the requirements of Australian Law – Justice Street's decision), which further reinforces its independence and minimises any perceived conflicts of interest.

CCEA's purpose and objects are to advise and make recommendations relating to chiropractic accreditation, standards of education and practice. These can be found on our website: www.ccea.com.au.

2. The Profession-specific National Boards should retain full financial control and autonomy. The Management Agency should service the National Boards, not the other way.

CCEA strongly believes that the National Boards require sufficient financial autonomy in order to deliver their stated objectives in a manner that is efficient, effective, timely and responsible. CCEA believes that, as currently written, it appears the Management Committee will have the final authority over the financial aspects of the Scheme, including budgeting, which could severely "hamstring" a Board's effectiveness and efficiency within a timely manner.

As the predominant income and forwarded assets come from the professions and their registrants, then this should be Board controlled. Mechanisms of accountability and transparency would be expected.

At the same time, CCEA believes funding for the accreditation body should be separate and not tied to the National Board in order to maintain the essential independence and freedom from potential pressure/influence.

3. There needs to be a "staged" approach to the areas covered by the Scheme.

CCEA believes that, for the Scheme to have a smooth and operable transition there needs to be a staged approach to implementation. CCEA would suggest that the implementation team concentrate on ensuring that the registration side of the Scheme is fully operational before introducing other sections of the Scheme such as complaint handling etc.

4. There needs to be a phasing in of the large professions.

CCEA is of the belief that the Scheme should commence with the smaller professions to ensure that all functionality is "bug-proof" prior to introducing the larger professions such as nursing and medical doctors. CCEA envisages that it would be a lot easier to rectify glitches with a smaller number of registrants.

5. Workforce Advisory Board

Within the Scheme the Workforce Advisory Board is still an unknown entity and remains silent. This entity and its objects require the need to reveal greater detail and transparency. What impact and power this entity may have upon the registration boards is unstated and unclear.

6. Timeliness and cost efficiency

CCEA is concerned that the new Scheme would most likely become more costly, create more red-tape and become less timely, therefore not meeting its objectives of "ease of health practitioner portability" and "public protection".

7. State-based workforce issues

CCEA, while acknowledging the intent of the Scheme, has concerns that its introduction will not sufficiently assist current state-based workforce issues such as areas of need and remote availability.

8. Restricted Practice

CCEA feels that restricting the practice of spinal manipulation is in the best public interest. CCEA is of the understanding that currently occurs in various ways around Australia. CCEA makes the following general comments in relation to restricted practice:

- the restriction of spinal manipulation needs to be considered in new legislation for the ultimate protection of the public;
- defining the <u>term</u> spinal manipulation in the legislation should not occur as this could significantly limit the practice;
- the chiropractic profession has an excellent safety record with respect to the provision of spinal manipulation;
- accredited Australian and New Zealand chiropractic programs provide graduates with the skills to perform spinal manipulation at the conclusion of 5 years of training;
- only appropriately trained practitioners, either chiropractors and/or osteopaths or those who can demonstrate an equivalency of competence by post graduate training, should be granted the right to use the restricted practice of spinal manipulation.

9. General Comment

As mentioned earlier, CCEA is generally accepting of the overall intent of the Scheme, however, at this stage of limited information, it feels that the Scheme as currently designed may not be in the best interests of either the professions or the public for the following reasons:

- the avenues for economies of scale appear to be limited by the structures detailed in the Scheme;
- the efficient operations of existing smaller professions are likely to be adversely affected by the costs and needs of the larger professions; this could drive up costs for the general public;
- it appears that the proposals are still uncosted and no detail is available on the probable financial impact on professions;
- it is likely that the level of commitment of practitioners to continue to contribute their time and expertise on a pro bono basis could decrease unless the implementation is well planned and managed, and participants are convinced of the Scheme's merit.

CCEA is pleased to provide the above comments. If you require any clarification or further information, please do not hesitate to contact us on any of the avenues listed in this letter's footer.

Yours sincerely

Dr Phillip Donato, Chiropractor

Chairperson, CCEA