



## Review of Accreditation Arrangements – Assignment of Accreditation Functions

### Consultation questions

This document represents the views and experiences of the Australian Society of Medical Imaging and Radiation Therapy (ASMIRT).

#### 1. What is your general experience of the accreditation functions under the National Law?

ASMIRT has had on occasion engaged with the Medical Radiation Practice Board of Australia (MRPBA) regarding accreditation matters. Members have submitted queries to the Accreditation Committee.

#### 2. Do you have any comments on performance against the individual Quality Framework domains:

1. Governance – the accreditation authority effectively governs itself and demonstrates competence and professionalism in the performance of its accreditation role.

ASMIRT continues to hold concern with the governance of the accreditation process. Currently the same body setting the standards is then responsible for the undertaking of accreditation processes, awarding accreditation and then reviewing against the standards. The Accreditation Committee is appointed by the MRPBA and is to all intents under its oversight. ASMIRT would like to see a governance model that separates regulation from accreditation.

2. Independence – the accreditation authority carries out its accreditation operations independently.

As noted, ASMIRT has concern that there is a conflict of interest with respect to the appointed Committee and its function under the Board.

3. Operational management – the accreditation authority effectively manages its resources to carry out its accreditation function.

No comment

4. Accreditation standards – the accreditation authority develops accreditation standards for the assessment of programs of study and education providers.

ASMIRT as the peak professional body is keen to engage with the accreditation authority to further develop and progress accreditation standards.

5. Processes for accreditation of programs of study and education providers – the accreditation authority applies the approved accreditation standards and has rigorous, fair and consistent processes for accrediting programs of study and their education providers.

The current system places a great deal of emphasis on the university processes but not on content being delivered to the students by the university. This can place the onus on clinical departments to

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provide education and surely should factor into whether the university is actually ensuring that the graduates meet the capability statements.

There needs to be increasing transparency regarding the review of professional programs of study, particularly how long a program will be accredited for before another review is done. Presently, education providers are required to expend high levels of time and resources (which come at a significant cost) to meet the yearly reporting requirements. These are costs that are not able to be recovered. This is not a sustainable model and should be considered as part of the review process.

Given that there is no longer an accreditation cycle, it is not clear what would trigger a new accreditation/review of accreditation or investigation into any program. There is insufficient information for practitioners, and for the public, to advise of avenues to request a review of any program, and on what grounds such a review would be warranted. ASMIRT has been approached by members with respect to the review of the accreditation of programs, and is aware of one case where this progressed to the Accreditation Committee. The response from the Committee was not delivered in a timely manner and did not address the concerns of the individuals.

6. Assessing authorities in other countries (where this function is exercised by the accreditation authority) – the accreditation authority has defined its standards and procedures to assess examining and/or accrediting authorities in other countries.

The MRPBA retains all functions relating to the assessment of overseas qualified medical radiation practitioners. It is assumed that the MRPAC does not play a role in assessing the examining and/or accrediting authorities in other countries as this is the remit of the MRPBA.

7. Assessing overseas qualified practitioners (where this function is exercised by the accreditation authority) – 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.

The MRPBA retains all functions relating to the assessment of overseas qualified medical radiation practitioners for registration purposes. However the Overseas Qualifications Assessment Panel (a panel of ASMIRT) assesses applicants for suitability as medical radiation practitioners and sonographers, as a gazetted body for visa applications. ASMIRT continues to be concerned with the inconsistencies between APHRA and OQAP assessments of applicants. ASMIRT have been lobbying AHPRA/MRPBA for a lengthy period to develop a joint approach, but this requires input from both sides which has to-date not been forthcoming.

### 3. Do you have any comments on how future accreditation agreements could address any of the following issues and demonstrate progressive improvements over the next five years?

- o reducing duplication, regulatory burden and cost
- o increasing transparency and accountability including in relation to cost, fees and performance
- Publishing accreditation outcomes would assist in increasing transparency and accountability

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- ASMIRT would like to see a consistent and transparent grievance and appeals system and consultation with stakeholders
- o achieving greater collaboration, sharing of good practice and multi-profession approaches including to address health workforce issues and achieve greater effectiveness.

As the peak professional body representing medical radiation practitioners, ASMIRT would appreciate the opportunity to work with the Accreditation Committee.

- o establishing clearer performance indicators to more effectively address these issues and other key measures of performance.
- 4. Do you have any comments on the extent to which accreditation has addressed or had regard for the objectives and guiding principles of the National Scheme?**

No Comment

- 5. Do you have any comments on how future accreditation arrangements could address or have regard for the objectives and guiding principles of the National Scheme?**

No Comment

- 6. Do you have any comments on the benefits or risks of an arrangement where one accreditation authority performs accreditation functions for more than one profession?**

ASMIRT holds the view that it would not be in the best interests of patient safety and best practice for one accreditation authority to perform accreditation functions for more than one profession. Specific clinical and academic expertise is required to make judgements regarding courses in the Medical Radiation Sciences, and indeed in the other regulated professions.

ASMIRT would like to highlight that the health area is a very diverse field that can be challenging when trying to formulate standards and conduct accreditation functions. This can result in many generic statements that are open to interpretation and exploitation. ASMIRT would like to see consistency, assessment in training, governance, collaboration and sharing of information to ensure that all stakeholder expectations are met.

- 7. Do you have any other comments about the future accreditation arrangements in the National Scheme?**

ASMIRT would like to reiterate the importance of transparency, accountability and consultation with any future accreditation arrangements in the National Scheme.

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