

Procedures for the development of accreditation standards

November 2023

Purpose of this document

Ahpra has established these procedures under section 25 of the Health Practitioner Regulation National Law as in force in each state and territory (the National Law). One of the key functions of the accreditation authorities is to develop or review accreditation standards. These procedures aim to ensure good regulatory practice when accreditation authorities are developing new or revised accreditation standards.¹ Good regulatory practice includes being responsive to changing needs and these procedures are intended to be implemented through approaches that respond to relevant context and need.

Wide-ranging consultation

Accreditation authorities must consult widely² on any proposed change to the content of existing accreditation standards, and content of any new accreditation standards. The education sector, the profession, patient safety bodies, education regulatory bodies³, relevant community and consumer groups, healthcare consumer bodies and governments will be consulted as a minimum. The authority will publish information about how to respond to the consultation on its website. The authority will also publish information about feedback received, the submissions (except where confidentiality is requested or required) and how the proposed new or revised accreditation standards address key issues raised in the feedback.

Regulatory Impact Assessment

In April 2023, National Cabinet agreed changes to the impact analysis requirements that apply to decisions in the Federal Relations Architecture. It is no longer mandatory for impact analysis to be finalised with the [Office of Impact Analysis \(the OIA\)](#), unless it is requested by the relevant decision maker. In the case of the National Scheme, this is either by the National Boards or the Ministerial Council, depending on who approves the proposal. Not all proposals will require a RIS.

The accreditation authority will prepare advice on likely regulatory impacts of any proposed new or revised standard, code or guideline against the principles set out below for inclusion in preliminary and public consultation. The decision-maker may ask that a Regulatory Impact Statement (RIS) be prepared, if needed. If so, contact will be made with the OIA. The OIA will continue to administer the *Regulatory Impact Analysis Guide for Ministers' Meetings and National Standard Setting Bodies*. The requirements of this guide apply where the relevant decision-maker requests the OIA's support and independent assessment of a RIS prepared by their officials.

If the proposed new or revised accreditation standards substantially change during finalisation of the documents, the accreditation authority should provide updated advice to the National Board before submitting the final proposed new or revised accreditation standards to the National Board for approval.

¹ See section 42(a) of the National Law.

² See section 46(2) of the National Law.

³ Includes Tertiary Education Quality and Standards Agency and Australian Skills Quality Authority.

Proposal to the National Board – principles

When submitting proposed new or revised accreditation standards to the National Board for approval, an accreditation authority will:

1. describe how the proposed new or revised accreditation standards

1.1 take into account the paramount principle, objectives and guiding principles in the National Law⁴

3 Objectives

- (1) The object of this Law is to establish a national registration and accreditation scheme for—
 - (a) the regulation of health practitioners; and
 - (b) the registration of students undertaking—
 - (i) programs of study that provide a qualification for registration in a health profession; or
 - (ii) clinical training in a health profession.
- (2) The objectives of the national registration and accreditation scheme are—
 - (a) to provide for 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; and
 - (b) to facilitate workforce mobility across Australia by reducing the administrative burden for health practitioners wishing to move between participating jurisdictions or to practise in more than one participating jurisdiction; and
 - (c) to facilitate the provision of high quality education and training of health practitioners; and
 - (ca) to build the capacity of the Australian health workforce to provide culturally safe health services to Aboriginal and Torres Strait Islander Peoples; and
 - (d) to facilitate the rigorous and responsive assessment of overseas-trained health practitioners; and
 - (e) to facilitate access to services provided by health practitioners in accordance with the public interest; and
 - (f) to enable the continuous development of a flexible, responsive and sustainable Australian health workforce and to enable innovation in the education of, and service delivery by, health practitioners.

3A Guiding principles

- (1) The main guiding principle of the national registration and accreditation scheme is that the following are paramount—
 - (a) protection of the public;
 - (b) public confidence in the safety of services provided by registered health practitioners and students.
- (2) The other guiding principles of the national registration and accreditation scheme are as follows—
 - (a) the scheme is to operate in a transparent, accountable, efficient, effective and fair way;
 - (aa) the scheme is to ensure the development of a culturally safe and respectful health workforce that—
 - (i) is responsive to Aboriginal and Torres Strait Islander Peoples and their health; and
 - (ii) contributes to the elimination of racism in the provision of health services;

Example—
Codes and guidelines developed and approved by National Boards under [section 39](#) may provide guidance to health practitioners about the provision of culturally safe and respectful health care.

 - (b) fees required to be paid under the scheme are to be reasonable having regard to the efficient and effective operation of the scheme;
 - (c) restrictions on the practice of a health profession are to be imposed under the scheme only if it is necessary to ensure health services are provided safely and are of an appropriate quality.

1.2 draw on available evidence, including 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

2. describe how the proposed new or revised accreditation standards support or contribute to:

2.1 improving patient safety, effective care and health outcomes, including for vulnerable members of the community and Aboriginal and Torres Strait Islander Peoples

2.2 preparing practitioners who have the knowledge, skills and professional attributes to deliver culturally safe care, as defined in the [Aboriginal and Torres Strait Islander Health and Cultural Safety Strategy 2020–2025](#)

⁴ See section 3 and 3A of the National Law.

- 2.3 preparing practitioners who understand the health system in Australia and their roles, responsibilities and ethical conduct when working within the system
- 2.4 embedding interprofessional education and preparing practitioners who have the knowledge, skills and professional attributes to engage in interprofessional collaborative practice
- 2.5 addressing health and workforce priorities such as family and domestic violence, noting that information about new priorities may be published as they emerge
- 2.6 avoiding duplication and minimising regulatory burden
- 3. outline steps taken during the development of the proposed accreditation standards to:
 - 3.1 achieve greater consistency within the National Scheme (for example, by adopting any available template, guidance or good practice approaches used by National Scheme bodies)
 - 3.2 meet the consultation requirements in the National Law and these procedures
 - 3.3 address the following principles:
 - a) whether the proposal is the best option to achieve the proposal's stated purpose and protect the public
 - b) whether the proposal results in an unnecessary restriction of competition among health practitioners or education providers
 - c) whether the proposal results in an unnecessary restriction of consumer choice
 - d) whether the overall costs of the proposal to members of the public and/or education providers and/or registrants and/or governments are reasonable in relation to the benefits to be achieved
 - e) whether the proposal's requirements are clearly stated using 'plain language' to reduce uncertainty, enable the public to understand the requirements, and enable understanding and compliance by education providers, and
 - f) whether the accreditation authority and National Board have procedures in place to ensure that the proposed standards remain relevant and effective over time
- 4. provide any feedback on regulatory impacts to the National Board that has been provided in the consultation process or identified in developing the proposed new or revised accreditation standards
- 5. indicate that the accreditation authority is seeking the National Board's approval of the proposed new or revised accreditation standards under the National Law
- 6. for proposed revised accreditation standards, describe the nature of the changes made and the rationale for these changes
- 7. for proposed new accreditation standards, describe the rationale for developing the new standards, and
- 8. recommend when the accreditation authority considers the proposed new or revised accreditation standards should take effect and, if the recommended date is later than the date of publication on the National Board's website, explain the reason for the recommended date and outline what implementation or transition arrangements the accreditation authority intends to put in place.

Decision by National Boards

Consistent with the changes agreed by National Cabinet to regulatory impact assessments, the National Board can ask for a RIS to be prepared if needed. This decision will be informed by advice from the accreditation authority on the likely regulatory impacts of a proposal and provided preferably before public consultation is undertaken.

When the National Board receives proposed new or revised accreditation standards from the accreditation authority, the board must comply with section 47 of the National Law.

Referral to Ministerial Council

Section 11 of the National Law provides that the Ministerial Council may give directions to a National Board about a particular proposed new or revised accreditation standard only if:

- a) in the Council's opinion, the proposed new or revised accreditation standards will have a substantive and negative impact on the recruitment or supply of health practitioners, and
- b) the Ministerial Council has first given consideration to the potential impact of the Council's direction on the quality and safety of health care.

When a National Board considers, based on the accreditation authority's advice and/or its own analysis, that the proposed new or revised accreditation standards will have a substantive and negative impact on the recruitment or supply of health practitioners, the National Board:

- a) will advise the Ministerial Council of its view and the reasons for it so that the Ministerial Council can consider whether to give the National Board a direction under s11 of the National Law, and
- b) will not make a decision to approve (or not approve) the new or revised accreditation standards until the Ministerial Council provides its view to the Board.

Gill Callister PSM
Chair
Ahpra Board

Date of approval: November 2023

Date of review: These procedures will be reviewed from time to time as required. This will generally be at least every three years.