A research framework for the National Scheme

Optimising our investment in research

December 2017

Aboriginal and Torres Strait Islander health practice
Chinese medicine
Chiropractic
Dental
Medical
Medical radiation practice
Nursing and Midwifery
Occupational therapy
Optometry
Osteopathy
Pharmacy
Physiotherapy
Podiatry
Psychology

Australian Health Practitioner Regulation Agency

Introduction

The *Research framework for the National Scheme*[1] outlines research priorities and principles that apply to all research within the remit of the Australian Health Practitioner Regulation Agency (AHPRA) and National Boards.

The framework also takes into account a number of developments in health practitioner regulation since the start of the National Scheme in 2010.

The framework is a living document that will be regularly reviewed to continue to meet the ongoing needs of the National Scheme. It will provide a solid base to facilitate risk-based research and evaluation activities, with a clear focus on translating the outcomes of research into initiatives that will inform regulatory policy development and decision-making to maximise the public benefit.

Aligning with the National scheme's strategic objectives and informed by current developments in the Australian and international health practitioner regulatory environment, it will ensure that we build an enduring program of high quality regulatory research and evaluation that maximises the use of our resources, while adding value to our work as regulators.

It is therefore an important statement of intent to all our key stakeholders, including potential external research partners.

What does this research framework consist of?

The research framework consists of:

a) **research priorities** – to focus research efforts, both internally and externally, to maximise the benefits to the National Scheme, and

b) **research principles** – to guide the use of National Scheme data and information to inform policy and decision-making.

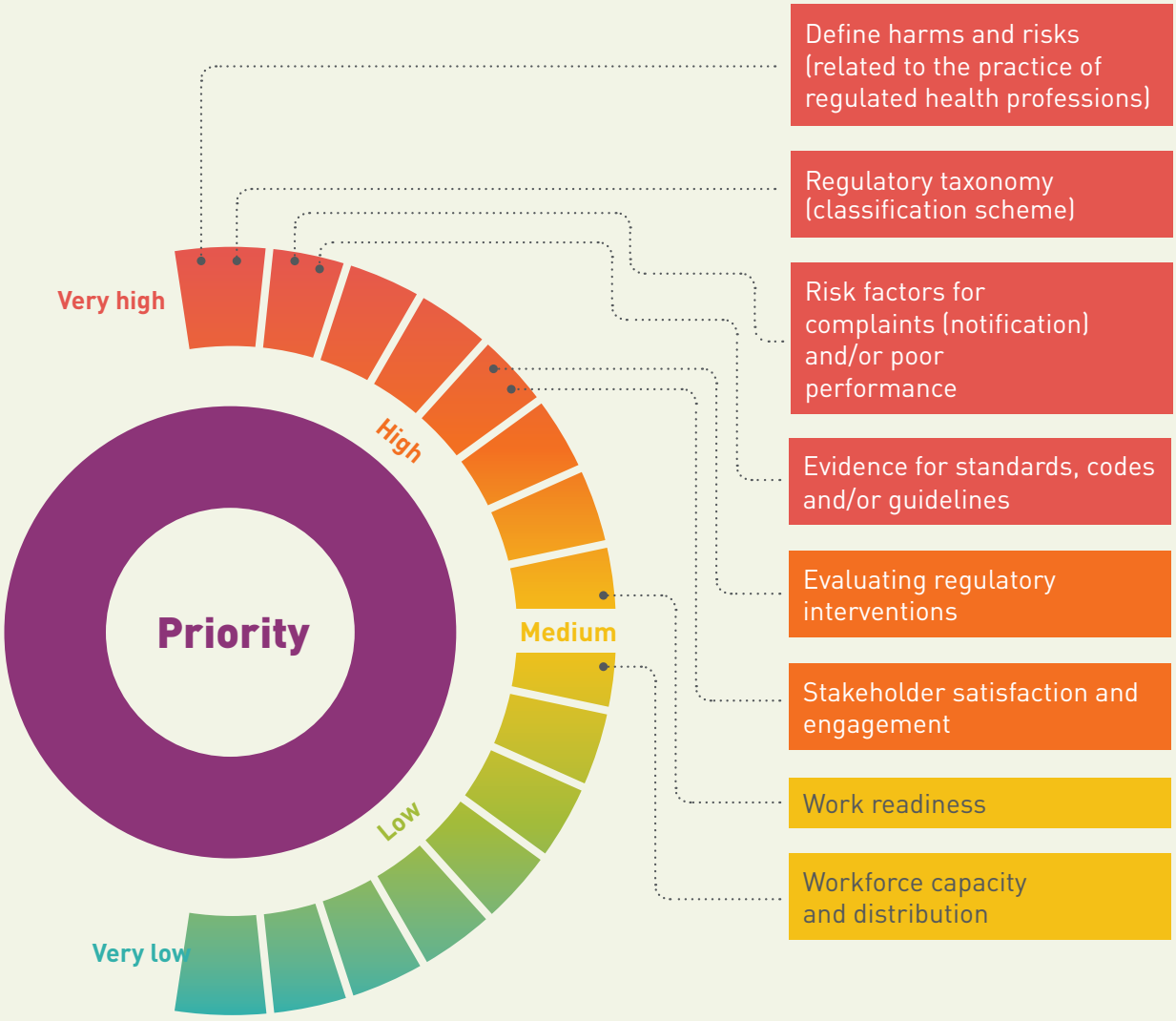
The framework aligns with the *Australian Code for the Responsible Conduct of Research* (NHMRC 2007) and other relevant legislation and guidelines as outlined in the principles.

As far as possible given the regulatory context and environment, it supports best practice approaches to all research activities, including obtaining consent, conducting peer review, publishing results and outcomes, assigning authorship, ensuring research data security and storage, and collaborating with external partners.

1 The National Registration and Accreditation Scheme (The National Scheme).

National Scheme research priorities

Research priority heat map



The key research priority areas are listed on page three along with example questions. The example questions are listed to indicate the kind of research questions that could align to that research priority and/or area.

The priorities will be regularly reviewed and updated in line with the strategic objectives and relevant issues facing the National Scheme. It is highlighted that the first two priority areas (defining harms and risks and regulatory taxonomy) are critical foundational areas at this time to enable effective research in the other priority areas.

It is important to note that this list is indicative only and is not a full list of the research questions that are possible.

Define harms and risks (related to the practice of regulated health professions)

- How do we define harms and risks?
- What are the characteristics and incidence of vexatious complaints about registered health practitioners?

Regulatory taxonomy (classification scheme)

- What are the essential fields for coding in our multi-professional complaints (notifications) taxonomy?
- What are the essential profession-specific fields to be included in the complaints (notifications) taxonomy?

Risk factors for complaints (notification) and/or poor performance

- What are the key risk factors for complaints (notifications) in the National Scheme?
- What protective factors (related to practitioner behaviours/attributes) could be used by national boards to mitigate risks and prevent harm to the public?

Evidence for standards, codes and/or guidelines

- What is the evidence for the effectiveness of elements of the continuing professional development (CPD) registration standard in maintaining competence to practice and preventing/reducing risk of notifications?
- What is the evidence of effectiveness for key elements of common standards/codes and guidelines (e.g. professional indemnity insurance (PII), recency of practice and English language)?

Evaluating regulatory interventions

- What are the best regulatory interventions to influence practitioner behaviour to prevent complaints (notifications) and reduce harm?
- Are some conditions more effective and efficient than others for changing registered health practitioner behaviours?
- What alternative regulatory interventions could be used for managing poorly performing registered health practitioners and impaired registered health practitioners?
- What is the best method to evaluate effectiveness of regulatory decision-making?

Stakeholder satisfaction and engagement

- What are the characteristics of those who make a complaint (notifiers)?
- What are the barriers to making a complaint (notification)?

Workforce capacity and distribution

- How effective is the use of overseas-qualified health practitioners in improving issues of health workforce distribution and what is the effect on quality and levels of service?
- What are the prevalence and demographics of registered health practitioners who have completed cultural safety training?

Work readiness

- What is the evidence that accreditation produces 'work ready' registered health practitioners?
- How effective are the current systems associated with provisional registration in preparing recent graduates for general registration?

National Scheme research principles

Introduction

The National Scheme aims to contribute to the development of world class regulatory research, as part of its mandate to achieve the objectives of the Health Practitioner Regulation National Law, as in force each state and territory (the National Law). This includes compliance with best practice standards for research and appropriate measures to respect cultural sensitivity.

Definitions

Research

For the purposes of the National Scheme, research means the systematic analysis of data or information to generate new evidence and knowledge to support and facilitate the achievement of the objectives of the National Law[2].

Evaluation

The National Scheme has adopted the National Health and Medical Research Council (NHMRC) and Australian Evaluation Society definition of evaluation as:

'...generally encompass(ing) the systematic collection and analysis of information to make judgements, usually about the effectiveness, efficiency and/or appropriateness of an activity. The term is used in a broad sense to refer to any set of procedures, activities, resources, policies and/or strategies designed to achieve some common goals or objectives[3].'

Quality assurance

The National Scheme has adopted the NHMRC definition of quality assurance as:

'...an activity where the primary purpose is to monitor or improve the quality of service delivered by an individual or an organisation[4].'

Scope

The National Scheme research principles are intended to cover both internal and external research and evaluation. Quality assurance and evaluation activities commonly involve minimal risk and generally do not require review by a Human Research Ethics Committee (HREC). However, they need to be subject to some level of oversight and adhere to the relevant ethical principles and legislation.

It is noted that as quality assurance, evaluation, and research are a continuum, work that begins as one may evolve into another[5]. For convenience, the remainder of the document refers to research only, noting that the principles also generally apply to quality assurance and other evaluation activities.

For research involving external discretionary data requests, these principles must be read in conjunction with the *National Scheme data and information access principles*[6].

2 Adapted from NHMRC and Australian Research Council (ARC sources, identified at 'Relevant legislation/codes'.

3 Adapted from Ethical Considerations in Quality Assurance and Evaluation Activities, NHMRC, 2014, and Guidelines for the ethical conduct of evaluations, Australasian Evaluation Society, 2010.

4 Ethical Considerations in Quality Assurance and Evaluation Activities, NHMRC, 2014.

5 Ibid.

6 Due for publication in 2017/18 on the Data Access and Research section of the AHPRA website: www.ahpra.gov.au/About-AHPRA/What-We-Do/Data-access-and-research.

Relevant legislation and/or codes

Research conducted must comply with the following, when relevant in the circumstances:

- *AHPRA Privacy Policy*
- Australasian Evaluation Society *Guidelines for the ethical conduct of evaluations* (2010)
- *Australian Code for the Responsible Conduct of Research*, NHMRC (2007)
- *Ethical Considerations in Quality Assurance and Evaluation Activities*, NHMRC (2014)
- *Glossary of terms for research impact*[7]
- *National Statement on Ethical Conduct in Human Research*, NHMRC (2007)
- *Privacy Act* 1988 (Commonwealth)
- the National Law
- *Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander health Research*, NHMRC (2003), and
- *Statement on Consumer and Community Involvement in Health and Medical Research*, NHMRC (2016).

Principles

The following information highlights the general key principles for good practice for carrying out research and evaluation, as well as detailing principles specific to research done within the National Scheme or using the National Scheme data.

In accordance with AHPRA and National Board obligations under the National Law and the Privacy Act, a deed must be executed with AHPRA when supplying data to external parties, including terms covering the supply, use, privacy, storage and destruction of data, as well as intellectual property and publications.

Alignment to the interests of the National Scheme

The proposed research needs to align with the National Scheme's research priorities, including:

- a focus on the development of preventative risk-based approaches, and
- supporting the cost-effective use of resources.

Purpose of the research

The research will:

- significantly contribute to the achievement of the National Scheme strategic objectives
- produce translatable outcomes that have the potential to measurably reduce the risk of harms to the public
- address issues that improve health practitioner regulation or regulatory options
- address problems that are wholly or partly responsive to regulatory intervention, and/or
- result in knowledge or outcomes that can be used to inform the development and continuous improvement of regulatory policy, standards, guidelines and/or decision-making processes.

Research merit

The research needs to be in the public interest, and must have merit, including that is justifiable by its potential benefit, uses methods appropriate to its intended use and objectives and is conducted by people or teams with appropriate experience[8].

Research integrity

The research is intended to contribute to existing knowledge and understanding, avoiding duplication, and be conducted honestly following recognised principles of conduct[9].

7 See ARC website.

8 National Statement on Ethical Conduct in Human Research, NHMRC (2007). See NMHRC website.

9 Ibid.

Justice, beneficence and respect

When participants are involved, the recruitment and involvement of participants must be fair, the likely benefit to participants must outweigh the burden, and the privacy, confidentiality and cultural sensitivities of participants must be respected[10].

Ethics

Where required by NHMRC guidelines, potential research activities must be approved by an HREC. Guidance on the requirement for ethics for quality assurance and evaluation activities can be found in Ethical Considerations in Quality Assurance and Evaluation Activities from NHMRC.

Privacy

Research must comply with the Privacy Act and National Law, not include personal information[11] or protected information[12] in any externally released document, and ensure individuals are not identifiable, particularly in small sample sizes.

Risks and benefits

The overall cost-effectiveness and relevant risks must be assessed including any financial or other resources required, as well as risks to any participants. The benefits of the research needs to outweigh the effect and demands on participants and the organisation.

Conflicts of interest

Processes must be put in place to ensure that there is timely and appropriate management of any real or perceived conflicts of interest and biases.

Governance

All research activities will be reviewed by AHPRA's Research Evaluation Committee (REC) and any activities with potential cross-National Scheme resource consequences must be assessed according to AHPRA's internal governance processes for strategy and service delivery.

Community representatives will be involved in research governance through membership of the REC and regular engagement with AHPRA's Community Reference Group.

Peer review

Peer review is required as a method of validating research by subjecting research methods and findings to the scrutiny of others who are experts in the same field.

Data security and management

The security and confidentiality of research data and primary materials must be ensured, in line with best practices. Materials need to be kept for an appropriate period of time and securely destroyed if and when required. Data ownership and/or custodianship must be determined and agreed in writing.

Dissemination

Subject to privacy requirements, in addition to making research available to AHPRA and National Boards, it needs to be more widely disseminated when appropriate, using a range of methods including existing channels for National Boards and AHPRA, conference presentations, public seminars and/or workshops, reports and media releases.

Publication and reports

Publications and reports need to be fair and accurate, note any limitations with the research or data, identify sources, include appropriate acknowledgements, accurate citations and conflict of interest declarations and clearly present findings. Reports presented externally must only include information as allowed under the Privacy Act and the National Law.

10 Ibid.

11 Section 214 of the National Law.

12 Section 6 of the Privacy Act (Clth)1988.

Authorship

The NHMRC guidelines for authorship must be applied to any potential submissions to peer-reviewed journals, including that contributions are acknowledged fairly and unacceptable author inclusions are not allowed (e.g. head of department and/or other position of authority, technical contribution or routine assistance only and provision of already published data)[13].

Review

This framework will be reviewed at least every two years.

13 See Chapter 5, Australian Code for the Responsible Conduct of Research, NHMRC (2007).