Guidance for accreditation assessors

For Aboriginal and Torres Strait Islander health practice, Chinese medicine, medical radiation practice, paramedicine and podiatry

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Part 1 – Background and overview

Purpose

The Accreditation Committees for Aboriginal and Torres Strait Islander health practice, Chinese medicine, medical radiation practice, paramedicine and podiatry (the Accreditation Committees) have adopted a common approach to accrediting education and training programs under the Health Practitioner Regulation National Law, as in force in each state and territory (National Law).

This document sets out information for you in your role as an accreditation assessor for the Accreditation Committees about the approaches used to assess, accredit and monitor education and training programs in their professions. This document should be read in conjunction with the Guidelines for accreditation of education and training programs, and the relevant accreditation standards and professional capabilities for the profession.

Further details are available in profession-specific policy and procedure documents published on each Accreditation Committee’s webpage.

1. Accreditation in the National Registration and Accreditation Scheme

Accreditation is one of the core regulatory functions of the National Registration and Accreditation Scheme (the National Scheme).

Transparency and the effective operation of the National Scheme requires sound relationships between the Accreditation Committees, their National Boards and Ahpra. These relationships must enable transfer of information necessary for the National Boards and the Accreditation Committees so they can effectively carry out their respective regulatory functions under the National Law.

For further information about accreditation in the National Scheme, please see [Ahpra’s accreditation webpages](https://www.ahpra.gov.au/Accreditation.aspx).

1. Roles
   1. Role of assessors

Assessors are selected and approved by the Accreditation Committee following a formal recruitment process. The assessor selection criteria are described in the Accreditation Committee’s approach for establishing assessment teams published on their accreditation webpages.

The Program Accreditation Team maintains a database of accreditation assessors.

Accreditation assessors are remunerated for their work – they are not volunteers. Assessors who are selected:

* review an education provider’s accreditation application and/or monitoring response against the accreditation standards
* consider the explanatory notes and expected information given in the standards in order to identify what is expected for each standard
* identify and/or evaluate whether the information submitted by the education provider fully addresses a criterion, and whether the accreditation standards have or have not been met, and

document their findings throughout the assessment and/or monitoring processes and report back to the Accreditation Committees.

You must be impartial when assessing an accreditation application. It is important that you are proactive and timely during the accreditation process to meet deadlines that align with the Accreditation Committee’s meetings and workplan.

* 1. Role of assessment teams

The Accreditation Committee establishes assessment teams to:

* evaluate information given by an education provider about its program against the approved accreditation standards, and

work in partnership with the Program Accreditation Team to provide the Accreditation Committee with a report of the Assessment team’s evaluation findings.

The composition of each assessment team will reflect the Accreditation Committee’s approach for establishing assessment teams, published on their accreditation webpages.

Assessment teams are responsible for reporting on how an education provider and its program addresses accreditation criterion and if they meet each accreditation standard. To do this, the Assessment team evaluates an education provider’s application and carries out one or more site visits or videoconference meetings. An assessment team is responsible for this report both as a team and as individuals. The Assessment team’s report is provided to the Accreditation Committee and must include information about its evaluation of the education provider for each accreditation standard.

* 1. Role of the Assessment team leader

The Assessment team leader is selected by the Accreditation Committee for each accreditation assessment (assessment). The team leader should:

* have previous experience as an assessor
* understand how accreditation processes work
* give sound judgement and advice to the Assessment team members
* consider all perspectives of the assessment, and

be organised and able to coordinate the Assessment team.

The Assessment team leader is responsible for liaising with the Program Accreditation Team during the assessment process, leading assessment team and site visit/videoconference meetings and allocating areas of responsibility to assessment team members.

During meetings with an education provider, the Assessment team leader is expected to lead discussions, and introduce the Assessment team and Program Accreditation Team staff. An introductory script (short and long version) is provided to assessors and assessment team leader’s (see *Section 13: Resources*).

* 1. Role of the Program Accreditation Team

The Program Accreditation Team gives high-level support, expert advice and guidance to Accreditation Committees and Assessment teams, including:

* assigning an Accreditation Officer to each program - the Accreditation Officer works closely with the Assessment team and is the main point of contact for the relevant education provider and its program(s)
* helping the Accreditation Committees establish the Assessment team by developing a short-list of available and qualified assessors for the Accreditation Committee to consider for each assessment or monitoring evaluation, including potential team leaders for appointment
* arranging meetings and site visits (physical or virtual) for the Assessment team. This includes arranging travel, accommodation and catering, as well as developing the site visit schedule in consultation with the education provider and the Assessment team leader
* preparing forms and templates for the assessors and education providers to complete and agenda papers for the Accreditation Committees to consider
* working with the Assessment team to help draft and prepare accreditation and/or monitoring reports to the Accreditation Committees, and

advising on a range of issues such as process, governance, confidentiality, managing conflicts of interest and any other relevant policies.

The Program Accreditation Team is an assessor’s first point of contact throughout an assessment or monitoring process. Assessors can contact their Accreditation Officer at [program.accreditation@ahpra.gov.au](mailto:program.accreditation@ahpra.gov.au).

1. Conflict of interest

The term ‘conflict of interest’ relates to a conflict which arises between an assessor’s public duty to perform their role under the National Law and their personal, business or professional interests. A related but separate concept is bias. Bias arises when an assessor lacks impartiality and makes an evaluation or finding other than on a factual or objective basis.

Before an assessment, you must disclose to the Program Assessment Team any personal, business or professional interests or potential bias relevant to that assessment. You must also disclose any interest or potential bias as soon as possible if one arises during the accreditation process. The Program Accreditation Team and the Assessment team leader will consider your declaration and decide whether the associated risks:

* mean you need to be removed from the Assessment team, or

can be managed by the Program Accreditation Team, and via discussions with the team leader and education provider, throughout the assessment process.

1. Duty of confidentiality

All assessors must sign a confidentiality agreement as part of their initial appointment. A statutory duty of confidentiality is imposed on anyone who exercises functions under the National Law. This includes people who work for Ahpra as well as the committee members and assessors. A person who is, or has been, exercising accreditation functions under the National Law must not disclose protected information, including after the assessment or monitoring activity is completed.

You should ensure the appropriate and responsible use of protected information that is consistent with the National Law and the objectives of Ahpra. Please refer [Ahpra’s Information and IT Acceptable use policy](https://ahpra-search.clients.funnelback.com/s/redirect?collection=ahpra-websites-web&url=https%3A%2F%2Fwww.ahpra.gov.au%2Fdocuments%2Fdefault.aspx%3Frecord%3DWD18%252f25997%26dbid%3DAP%26chksum%3DXlBXyae6RhPGxHqeFyPFpg%253d%253d&auth=tJ%2BYoLv3iJahdwVgx7knDA&profile=ahpra&rank=1&query=IS010+%7C%5Bboard%3A%22%24%2B%2B+pharmacy+board+%24%2B%2B%22+board%3A%22%24%2B%2B+physiotherapy+board+%24%2B%2B%22+board%3A%22%24%2B%2B+medical+radiation+practice+board+%24%2B%2B%22+board%3A%22%24%2B%2B+all+national+boards+%24%2B%2B%22+board%3A%22%24%2B%2B+aboriginal+and+torres+strait+islander+health+practice+board+%24%2B%2B%22+board%3A%22%24%2B%2B+nursing+and+midwifery+board+%24%2B%2B%22+board%3A%22%24%2B%2B+paramedicine+board+%24%2B%2B%22+board%3A%22%24%2B%2B+psychology+board+%24%2B%2B%22+board%3A%22%24%2B%2B+optometry+board+%24%2B%2B%22+board%3A%22%24%2B%2B+chiropractic+board+%24%2B%2B%22+board%3A%22%24%2B%2B+medical+board+%24%2B%2B%22+board%3A%22%24%2B%2B+occupational+therapy+board+%24%2B%2B%22+board%3A%22%24%2B%2B+chinese+medicine+board+%24%2B%2B%22+board%3A%22%24%2B%2B+osteopathy+board+%24%2B%2B%22+board%3A%22%24%2B%2B+ahpra+%24%2B%2B%22+board%3A%22%24%2B%2B+dental+board+%24%2B%2B%22+board%3A%22%24%2B%2B+podiatry+board+%24%2B%2B%22%5D). You are expected to comply with this policy when using document sharing portals and working on your assessor report.

Please remember all accreditation-related information, including the application information, is protected information under the National Law, and any soft or hard copy documents should be securely destroyed at the end of every assessment or monitoring activity.

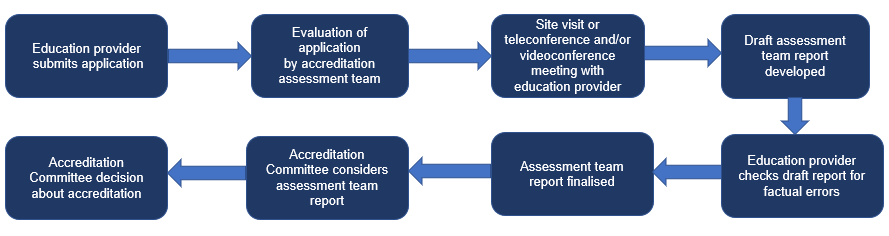
You should familiarise yourself with [Ahpra’s confidentiality policy](https://ahpra-search.clients.funnelback.com/s/redirect?collection=ahpra-websites-web&url=https%3A%2F%2Fwww.ahpra.gov.au%2Fdocuments%2Fdefault.aspx%3Frecord%3DWD10%252f1413%255Bv2%255D%26dbid%3DAP%26chksum%3DAMzh1bdMvHYGyozrGG1vCA%253d%253d&auth=KB9jE3oFceQ9Zya%2BLwEHBg&profile=ahpra&rank=1&query=Duty+of+confidentiality+%7C%5Bboard%3A%22%24%2B%2B+pharmacy+board+%24%2B%2B%22+board%3A%22%24%2B%2B+physiotherapy+board+%24%2B%2B%22+board%3A%22%24%2B%2B+medical+radiation+practice+board+%24%2B%2B%22+board%3A%22%24%2B%2B+all+national+boards+%24%2B%2B%22+board%3A%22%24%2B%2B+aboriginal+and+torres+strait+islander+health+practice+board+%24%2B%2B%22+board%3A%22%24%2B%2B+nursing+and+midwifery+board+%24%2B%2B%22+board%3A%22%24%2B%2B+paramedicine+board+%24%2B%2B%22+board%3A%22%24%2B%2B+psychology+board+%24%2B%2B%22+board%3A%22%24%2B%2B+optometry+board+%24%2B%2B%22+board%3A%22%24%2B%2B+chiropractic+board+%24%2B%2B%22+board%3A%22%24%2B%2B+medical+board+%24%2B%2B%22+board%3A%22%24%2B%2B+occupational+therapy+board+%24%2B%2B%22+board%3A%22%24%2B%2B+chinese+medicine+board+%24%2B%2B%22+board%3A%22%24%2B%2B+osteopathy+board+%24%2B%2B%22+board%3A%22%24%2B%2B+ahpra+%24%2B%2B%22+board%3A%22%24%2B%2B+dental+board+%24%2B%2B%22+board%3A%22%24%2B%2B+podiatry+board+%24%2B%2B%22%5D) upon appointment.

Part 2 - Procedures

1. Accreditation assessment
   1. Purpose of the accreditation assessment

The purpose of the assessment is to enable the Accreditation Committee to determine whether the education provider and its program meet the accreditation standards.

This diagram shows the key stages in the assessment of programs.



* 1. Stages of assessment

Education provider submits application

Once the education provider submits their application, the assigned Accreditation Officer checks the application to make sure it is ready for the assessor’s review. If the application is complete, the Accreditation Officer shares it with the Assessment team through a secure portal.

You will be given access to the document sharing portal to review the application and supporting documents. The Accreditation Officer may also establish communication channels for assessors and the assessment teams through other platforms (such as Microsoft Teams).

Initial review of application

As part of an assessment team it is your task as the Assessors to review the evidence (expected information outlined in the accreditation standards document) given in the application submission against the accreditation standards.

Initial review

You need to use the template provided by the Accreditation Officer to identify whether the evidence given by the education provider for each criterion addresses the respective requirement.

During your initial review you should take “dot point” notes on the evidence provided, and start to reflect on whether your evaluation findings indicate the education provider has fully or partially addressed each criterion and whether the team should seek clarification as outlined above. You will discuss your reflections and views with other assessors at a future meeting and then begin to formulate your notes into a report format.

Ultimately, you will work with the other members of the Assessment team to develop recommendations to the Accreditation Committee on whether the education provider and its program meet the accreditation standard when the findings for the criteria are considered as a whole.

The Assessment team:

* may identify areas for further clarification that might help address a criterion. For example, you may request information on how feedback is obtained from staff and students, how the feedback is actioned, and who is responsible for actioning the feedback – this could be asked as a question at a site visit and/or videoconference meeting
* can facilitate clarification and expansion of information through open questions during meetings and at site visits and/or videoconferences, and

are not responsible for mandating what an education provider needs to do to meet the standards.

Assessment team evaluation session

The Program Accreditation Team will organise a meeting (Assessment team evaluation session/s) with the Assessment team to discuss each assessor’s initial reviews of, and notes against, the application and evidence provided, such as site visit/videoconference preparation.

During the evaluation session, the Assessment team will determine whether a physical/onsite, visit is needed as part of the assessment. If it determines that a physical/onsite visit is not needed, the Assessment team will hold one or more videoconference sessions with the education provider. After the evaluation sessions with the Assessment team, the Program Accreditation Team start preparations for the site visit/videoconference.

Site visit or other meeting with education provider

Subject to the outcomes of the evaluation session, the Assessment team will complete the assessment through a physical/onsite visit or one or more videoconference sessions with the education provider. During this part of the assessment, the team will usually meet with a range of individuals and groups, for example heads of school/program, discipline and subject leads/coordinators, students, clinical educators/supervisors and other staff teaching into and providing support to the program.

The Accreditation Officer works closely with the Assessment team and liaises with the education provider to finalise the schedule and support the site visit or videoconference session/s.

Draft assessment team report developed

The Program Accreditation Team works closely with the Assessment team to draft the Assessment team report. This includes providing further guidance throughout the assessment, including clarifying the threshold of reasonable satisfaction regarding the accreditation standards and criteria.

The draft Assessment team report (the report) should include:

* succinct overview of relevant findings from the team’s evaluation of the application and any further information gathered at any stage of the assessment
* succinct overview of relevant outcomes of the site visit or videoconference session/s, and

recommendations to the Accreditation Committee.

You should be succinct in your reported evaluation findings to allow the Accreditation Committee to clearly determine if it is reasonably satisfied an education provider and its program meet each standard.

Please refer to your copy of Assessor guidance for report writingfor further information.

Outcomes-focused assessment model

It is important that assessors maintain a focus on whether the information gathered at any stage in the assessment demonstrates the outcomes described by the accreditation standards. When evaluating education processes, the expected information relates to mapping of learning outcomes and related assessment tasks against the professional capabilities rather than evidence of any specific approach to teaching or assessment. The accreditation standards accommodate a range of educational models and variations in curriculum design, teaching methods and assessment approaches.

It is important assessors evaluate an application and present their findings to the Accreditation Committee with this in mind.

The Program Accreditation Team will confirm the report with the Assessment team before it is sent to the education provider to check for factual errors.

Education provider checks draft report for factual errors

The Guidelines for accreditation of education and training programs, outline that the education provider has an opportunity to review the draft Assessment team report and advise the Program Accreditation Team in writing by return email of any factual errors in the Assessment team's findings.

The Assessment team considers the response to the factual check and then begins finalising the Assessment team report.

Assessment team report finalised

The Program Accreditation Team works in partnership with the Assessment team to finalise the Assessment team report to be submitted to the Accreditation Committee.

The final Assessment team report:

* sets out the assessors agreed evaluation findings for each accreditation standard
* provides recommendations to the Accreditation Committee about whether, on the basis of their evaluation, the education provider and its program has met each accreditation standard, and

may recommend that the Accreditation Committee imposes conditions and/or establishes specific monitoring requirements.

The Assessment team approves the Assessment team report before it is submitted to the Accreditation Committee for their consideration.

The Program Accreditation Team will prepare information on the accreditation process to be presented to the Accreditation Committee alongside the Assessment team’s confirmed report. The Assessment team leader will confirm the factual accuracy of any background information before it is presented to the Accreditation Committee.

Accreditation Committee considers the Assessment team report

The Accreditation Committee will consider the content of the final Assessment team report and make a decision about accreditation of the program. Assessment team members will need attend the committee meeting (virtually) to allow the committee members to clarify any aspects of the report as part of their decision making.

The Accreditation Committee will use the Assessment team’s report to consider the criteria for each standard as a whole. The Accreditation Committee will determine whether the education provider has, on balance, met, substantially met, or not met the standard.

Accreditation Committee’s accreditation decision

The Accreditation Committee may decide to accredit the program, with or without conditions. The Accreditation Committee may also decide to refuse to accredit the program.

The Accreditation Committee may decide to accredit the program if it determines that, on the basis of the Assessment team’s findings, the education provider and program meet all accreditation standards.

For more information about the Accreditation Committee’s accreditation decisions please refer to the Guidelines for accreditation of education and training programs.

1. Monitoring

This diagram shows the key stages of the Accreditation Committee’s approach to monitoring approved programs of study.



The National Law outlines the Accreditation Committee’s responsibility to monitor accredited and approved programs of study as well as the education providers offering them.

When the Accreditation Committee advises an education provider of its decision to accredit the program, with or without conditions, the Accreditation Committee will provide details of the specific and routine monitoring requirements that the Accreditation Committee has established for that education provider, including routine annual monitoring. These requirements are updated at least once each year based on information submitted by the education provider

The specific and routine monitoring requirements established by the Accreditation Committee will generally include:

1. responses to any conditions imposed by the Accreditation Committee on standards that are not fully met
2. responses to any specific monitoring requirements established by the Accreditation Committee for standards that are met if there are risks that specific aspects may not continue to be met
3. provision of key statistical data and other details as part of routine annual monitoring
4. written notice of any planned and/or implemented changes to an accredited program, and
5. responses to any request by the Accreditation Committee for information as required to ensure the Accreditation Committee continues to be satisfied that the accreditation standards are being met by the program and education provider.
   1. Responses to routine annual monitoring requirements

All education providers must submit key statistical data and other details to the Accreditation Committee in the form of a routine annual monitoring submission. Routine annual monitoring provides the Accreditation Committee with an opportunity to ‘check the pulse’ of a program. If the ‘pulse check’ identifies any issues, members need to consider whether there is any risk, and the level of that risk, in deciding the timeframes for further exploring any issues or requesting further information.

* 1. Responses to conditions and specific monitoring requirements

If a program is accredited with conditions and/or specific monitoring requirements, the Accreditation Committee may require the education provider to respond:

1. in writing
2. at a monitoring visit, and/or
3. at a meeting with the Accreditation Committee, including teleconference, videoconference or face to face discussions with representatives of the education provider.

If you are selected to evaluate an education provider’s responses to conditions and/or monitoring requirements, you will evaluate the responses, including any information submitted by the education provider, and report on your evaluation. You may also be selected to carry out a monitoring visit.

The Program Accreditation Team will work with you and any other selected assessors to finalise a monitoring evaluation report for consideration by the Accreditation Committee.

1. Understanding the use of conditions and specific monitoring requirements on accreditation

When the Accreditation Committee has made an accreditation decision, it is likely conditions and/or specific monitoring requirements will be placed on the accreditation of the program.

Conditions are imposed when standards are not met or substantially met, and specific monitoring requirements relate to standards that are met. Specific monitoring requirements are placed on the education provider and the program they are delivering to ensure the Accreditation Committee continues to be satisfied the program and education provider meet the accreditation standards.

* 1. Conditions

If an Assessment team finds that an accreditation standard is not met or is substantially met, then an Assessment team will recommend the Accreditation Committee impose a condition against that standard (and link it to the criterion).

A condition is something the education provider must do, within a specified time frame to show that the program meets the accreditation standards.

A finding of not met or substantially met must satisfy the following two criteria:

1. the plans and/or arrangements in place that are applicable to the standard must not adversely affect student welfare, or the capacity of the education provider to deliver the program, or the learning outcomes and professional capabilities required, and
2. there must be a reasonable expectation that the program will be able to meet the accreditation standard in full within a defined timeframe that does not pose an unacceptable risk.

The Assessment team might also recommend to the Accreditation Committee it establish a condition on the overall accreditation of the program. For example, if a physical/onsite visit did not occur during the assessment phase due to travel restrictions, the Assessment team may recommend a condition on accreditation that a site visit occur to the education provider’s campuses within 12-months of the accreditation decision.

* 1. Monitoring requirements

A monitoring requirement may be appropriate when:

* there are new clinical facilities being built that could not be viewed at the time of a site visit
* a new program has plans that appear appropriate for students to achieve the required competencies, but this is yet to be confirmed, or

there are changes planned to the structure of a program’s academic governance or quality improvement processes as a result of a provider wide restructure.

A standard can be met but still have a monitoring requirement established against that standard. Monitoring requirements can also be established alongside conditions already imposed on a standard that is substantially met or not met.

The Accreditation Committee may establish mandatory monitoring requirements on the overall accreditation of the program, for example the Accreditation Committee may monitor the progression of remaining students in a program that has moved in to teach-out.

* 1. Guiding principles for assessors and accreditation authorities

The Health Professions Accreditation Collaborative Forum, of which the Accreditation Committees are members, developed [guiding principles for the use of conditions](http://hpacf.org.au/wp-content/uploads/2020/11/Understanding-the-use-of-conditions-in-accreditation-in-the-NRAS-November-2020.pdf) to improve consistency and transparency across the National Registration and Accreditation Scheme. It is intended that the way in which each accreditation authority uses the guiding principles could vary, but they aim to ensure consistency where possible.

The four guiding principles are:

* **Guiding principle 1** – The purpose of a condition is to address a shortfall against an approved accreditation standard.
* **Guiding principle 2** – The timeframe by which a condition must be met is to be fair and reasonable.
* **Guiding principle 3** – The condition should relate to the desired outcome.

**Guiding principle 4** – A condition must be clear.

The Program Accreditation Team will help assessors and assessment teams in drafting recommended conditions and/or monitoring requirements against accreditation standards during the report writing phase of the assessment and/or monitoring process.

1. COVID-19

COVID-19 has impacted the Accreditation Committees’ assessment and monitoring activities in 2020 and 2021, and is likely to continue to affect activities in some way for several years.

The Accreditation Committees’ focus in 2020 was making sure that accredited programs continued to produce graduates with the knowledge, skills and professional attributes necessary to practise as registered practitioners in the profession.

The Accreditation Committees recognised the need for short-term creativity and flexibility in the way accredited programs met the accreditation standards, including delivery methods and learning and teaching approaches. The outcomes-based accreditation standards for each profession enable this because they give a level of flexibility for education providers to show their ongoing ability to meet the standards and to address the professional capabilities in a range of ways.

* 1. Ongoing impact of COVID-19 on accreditation activities

The Accreditation Committees’ travel activities have been limited since early 2020, including travel for assessors involved in accreditation assessments. There is currently no guarantee of physical/onsite visits happening as part of the assessment phase. Any travel restrictions at the time of the assessment (for example restrictions in place due to COVID-19) may determine that only a videoconference can be held.

* 1. National principles for clinical education during COVID-19

The Accreditation Committees, in collaboration with the other accreditation authorities through the Health Professions Accreditation Collaborative Forum, and together with Ahpra, National Boards and the Australian Government, developed [national principles for clinical education during COVID-19](https://www.ahpra.gov.au/News/COVID-19/National-principles-for-clinical-education-during-COVID-19.aspx) to guide decisions of professions, accreditation authorities, education providers and health services about student clinical education during the COVID-19 pandemic response.

For further information on COVID-19 and how this may affect your role in an assessment team or as an assessor, please contact the [Program Accreditation Team](mailto:program.accreditation@ahpra.gov.au?subject=COVID-19%20and%20assessments).

* 1. COVID-19 travel guidance

As an assessor, you will be required to comply with Ahpra’s policies and to follow any travel advice outlined by the Program Accreditation Team regarding interstate travel for assessment or monitoring activities.

The Program Accreditation Team will give assessors and assessment teams current COVID-19 travel advice before any travel is carried out.

Part 3 – Logistics

1. Assessor training

The Program Accreditation Team is responsible for ensuring assessors are fully trained to undertake accreditation assessments or monitoring evaluations for the profession in which they were appointed. The Program Accreditation Team may also train assessors from other professions to undertake cross-profession assessment work.

Assessor training is conducted either online or face-to-face, and the Program Accreditation Team will advise the assessors who are due for training. Once trained, an assessor is able to undertake assessment and monitoring work for an Accreditation Committee for three years before undergoing retraining.

1. Remuneration

Assessors are paid by Ahpra for the work they undertake when selected by an Accreditation Committee for an assessment or monitoring activity. Payment amounts are calculated in advance using the estimated number of hours or days required for the particular activity and the applicable sitting fees. The Program Accreditation Team will provide assessors with an estimation of the time to complete the assessment or monitoring activity, and the total payment as part of the selection process for each activity.

* 1. Payment

Payments to assessors for work undertaken are typically made after the Accreditation Committee has considered the Assessment team report or monitoring evaluation report. Depending on the situation, a part-payment may be made during an assessment activity (for example after a site visit).

Assessors are classified as employees under ATO guidance and Ahpra can only make payments to individuals to ensure compliance with ATO requirements for employees. If you wish to salary sacrifice all or part of your assessor payment to your superannuation fund, please contact the Program Accreditation Team for more information.

1. Travel

The Program Accreditation Team will organise your travel requirements as needed for any activity you undertake as an assessor – for example travel to site visits, or an Ahpra office for a face-to-face meeting with the Assessment team.

All travel will be in line with current protocols and policies, including any advice on COVID-19 travel restrictions. For more information please contact the [Program Accreditation Team](mailto:program.accreditation@ahpra.gov.au?subject=Assessor%20travel).

For more information please refer to your copy of the *Assessor guidance for travel.*

* 1. Flights

Economy class travel will be arranged, and all itineraries are based on the most direct route to and from meetings/visits from your designated place of residence or workplace.

Once booked, you will be sent a copy of your itinerary.

* 1. Expenses

Assessors are entitled to reimbursement of any reasonable out-of-pocket expenses incurred while undertaking assessor-related business. Expenses must be submitted on the Ahpra claim form and original receipts, invoices and tickets must be attached.

If a receipt is lost or missing a statutory declaration must be supplied.

For more detailed information on travel expenses, please refer to your copy of the Assessor guidance on travel and Ahpra’s *Domestic and International travel policy FIN010.*

* 1. Accommodation

Assessors will be accommodated in Ahpra-preferred accommodation in line with the Ahpra travel policy and booked by the Program Accreditation Team.

A charge-back voucher will be sent directly to the hotel on confirmation of accommodation booking. This voucher includes the cost of the room, breakfast, dinner (no alcohol), internet and parking. Mini bar items are not included in the charge-back voucher. A credit card imprint or cash deposit may be required by the hotel to guarantee any charges not covered by the charge-back voucher.

1. Transport

Assessors will typically be provided with one or more single use taxi chits for travel during any work undertaken. Alternatives to Cab charge, such as car rentals or public transport may be used where there is no alternative, or if the overall cost is the same or lower (but must be approved prior to any arrangements or bookings being made).

* 1. Cabcharge and taxi use

The approved Cabcharge usage is travel:

* from home to the airport and return
* from the airport to either accommodation or the workplace on arrival
* from either accommodation or the workplace to the airport on departure
* from workplace to other work-related destinations where use of public transport is not viable due to location or short time available, and

in exceptional circumstances where the safety of the traveller must be considered such as illness or working pre-approved overtime hours.

Using an airport train or bus should be considered where time allows and when the overall cost is less than catching a taxi.

You should ensure Cabcharge receipts are completed and returned to the Program Accreditation Team within five (5) working days of travel being completed.

* 1. Using public transport

Public transport including trains, buses, trams and ferries that may be used as an alternate to taxi or private vehicle use subject to consideration of the following points:

* fatigue, health and safety of the assessor
* additional time spent travelling in work hours
* the circumstances and nature of the work being done, and

total travel cost to Ahpra.

Using public transport must be efficient and cost-effective for the approved travel.

* 1. Private vehicle usage

Private vehicle usage must be confirmed with the Program Accreditation Team. Should private vehicle usage be required at any stage of your work as an assessor, reimbursement of motor vehicle personal expenses will be using a per kilometre rate in accordance with the Australian Tax Office (ATO) rates.

1. Resources

The following assessor guidance documents are also available to assist you in undertaking any assessment and/or monitoring duties for the Accreditation Committee:

* Assessor guidance for report writing
* Assessor guidance on travel

Assessor guidance – introductory script for Assessment team leader

Please contact the [Program Accreditation Team](mailto:program.accreditation@ahpra.gov.au?subject=Assessor%20guidance%20resources) to obtain copies of these guidance resources.

Glossary

| Term | Definition |
| --- | --- |
| Accreditation authority | An external accreditation entity; or an Accreditation Committee. |
| Accreditation Committee | Accreditation Committees are established by National Boards to exercise a number of accreditation functions under the Health Practitioner Regulation National Law as in force in each state and territory (the National Law).  The Accreditation Committee exercises accreditation functions directly under the National Law without any delegation to the Committee by the National Board.  The role of the Accreditation Committee is to develop and recommend accreditation standards to the National Board for approval. It then assesses whether programs of study and education providers are meeting the accreditation standards and decides whether or not to accredit the provider and program. The National Board considers the Accreditation Committee’s decision and their report and decides whether or not to approve an accredited program as a qualification for registration as a health practitioner.  The Accreditation Committees are not responsible for setting registration standards, registering health practitioners, or investigating complaints about health practitioners.  There are five Accreditation Committees:   * Aboriginal and Torres Strait Islander health practice * Chinese medicine * Medical radiation practice * Paramedicine   Podiatry |
| Accreditation standard | A standard used to assess whether a program of study, and the education provider that provides the program of study, provide persons who complete the program with the knowledge, skills and professional attributes necessary to practise the profession in Australia. |
| Accreditation application | Narrative and evidence provided to the respective Accreditation Committee by the education provider to show how the program of study and the education provider that provides the program of study meets the standards. |
| Accredited | Is a status applied when the program of study and the education provider that provides that program of study meet an approved accreditation standard for the profession. |
| Accredited with conditions | Is a status applied when the program of study, and the education provider that provides that program of study, substantially meet an approved accreditation standard for the profession and the imposition of conditions on the accreditation will ensure the program meets the standard within a reasonable time. |
| Accredited program of study | A program of study accredited under section 48 of the National Law by an accreditation authority.  The National Law outlines the Accreditation Committee’s responsibility to monitor accredited and approved programs of study as well as the education providers offering them. |
| Assessors | Assessors are people who the Accreditation Committee appoint to be members of accreditation Assessment teams or to evaluate responses to specific monitoring. |
| Education provider | A university, a tertiary education institution or another institution or organisation that provides vocational training, or a specialist medical college or other health profession college. |
| Explanatory notes | Guidance for education providers that clarify and/or give additional information about statements made within the accreditation standards. Also known as guidance notes. |
| Monitoring | Activities by an Accreditation Committee so it continues to be satisfied a program and its provider meet the approved accreditation standards for the profession. |
| National Boards | Each health profession that is part of the National Registration and Accreditation Scheme is represented by a National Board.  While the primary role of the boards is to protect the public, the boards are also responsible for registering practitioners and students, as well as other functions, for their professions.  All Boards are supported by Ahpra in the framework of a Health Profession Agreement. |
| Program of study | A program of study provided by an education provider. |
| Routine annual monitoring | Annual report submitted by education providers to the respective Accreditation Committee to allow the Accreditation Committee to track whether education providers are continuing to meet accreditation standards.  The Accreditation Committees use routine annual monitoring to collect key statistical data and other details in a similar way that the Tertiary Education Quality and Standards Agency (TEQSA) collects information and data on education providers through its [Provider Information Requests](https://www.teqsa.gov.au/information-collection) and other mechanisms. |