



Consumers  
Health Forum  
of Australia

5 September 2013

Program Manager  
Accreditation  
Australian Health Practitioner Regulation Agency  
GPO Box 9958  
MELBOURNE VIC 3001

Dear Sir/Madam

**Accreditation Standard and Accreditation Process for Aboriginal and Torres Strait Islander health practice**

The Consumers Health Forum of Australia (CHF) welcomes the opportunity to provide comments to the Aboriginal and Torres Strait Islander Health Practice Accreditation Committee in response to the *Draft Aboriginal and Torres Strait Islander health practice accreditation standard* (draft accreditation standard) and the *Draft Aboriginal and Torres Strait Islander health practice accreditation process* (draft accreditation process).

CHF is the national peak body representing the interests of Australian healthcare consumers. CHF works to achieve safe, quality, timely healthcare for all Australians, supported by accessible health information and systems.

CHF has a strong interest in accreditation, and our comments are based on research we have undertaken through our dedicated projects on health workforce issues and health practitioner regulation.

*Feedback on draft accreditation standard*

CHF considers that the draft set of standards are comprehensive, clear and appropriate to assess whether a program of study and the education provider provides students with the knowledge, skills and attributes to practise as Aboriginal and Torres Strait Islander health practitioners.

We particularly welcome the high level of community involvement in the draft accreditation standard, as evidenced by Accreditation Standard 6.2:

*The education provider actively seeks stakeholder participation to maintain the currency and relevance of its design and delivery of the Certificate IV in Aboriginal and Torres Strait Islander Primary Health Care Practice to the community, and to advocate for the education and training of its students.*

Subclause 6.2.1 further states that the education provider must provide evidence that it engages with relevant stakeholders, including representatives of Aboriginal and Torres Strait Islander communities.

In our view, engagement with, and involvement of, Aboriginal and Torres Strait Islander communities is vital to the success of the program. Effective engagement with the community will promote mutual interests in the education and training of Aboriginal and Torres Strait Islander health practitioners. This is particularly important in rural and remote locations where Aboriginal and Torres Strait Islander health practitioners play a leading role in the provision of primary health care due to the lack of medical practitioners and registered nurses in those areas.

While noting that the level of evidence of engagement with stakeholders will vary depending on the location of the Registered Training Organisation (RTO), we consider a minimum requirement should be the inclusion of community representatives on relevant advisory committees or reference groups, particularly for RTOs that are not Aboriginal and Torres Strait Islander Community Controlled Health Organisations (ACCHOs) e.g. TAFE, colleges. Where appropriate, consumers should also be considered for inclusion on relevant advisory groups to add to the views of community.

There may also be value in including the requirement for education providers to establish partnerships or formal links with Aboriginal and Torres Strait Islander communities and health services, particularly for those providers that are not ACCHOs, in order to ensure that students are provided with the clinical exposure and training required under Accreditation Standard 6.13.3

*The education provider must provide evidence that it provides primary health care practical training that covers the scope of practice expected of entry level Aboriginal and Torres Strait Islander health practice professionals.*

In this way, RTOs that are not ACCHOs can make a contribution towards building capacity within communities so that there can be a transition to community controlled work in this area.

Finally, we welcome the quality improvement processes outlined in the draft accreditation standard, which incorporates the feedback from students, graduates, trainers and stakeholders (Accreditation Standard 6.11.2 and 6.11.8). CHF considers these standards could be strengthened by explicitly including reference to feedback and advice from Aboriginal and Torres Strait Islander communities and consumers, where appropriate.

#### *Feedback on draft accreditation process*

CHF notes there is no explicit reference to community members' involvement in accreditation teams. We would welcome the inclusion of community members and where appropriate, consumers on the Assessment Team, as is the case for some other health professions, provided they have the necessary support and information to undertake this role.

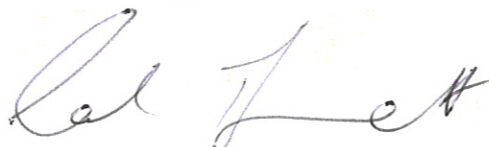
Overall, CHF welcomes the high level of community involvement in the draft accreditation standard and the draft accreditation process. We note these documents have considered a cross-profession analysis of accreditation standards and processes for the fourteen health professions within the National Registration and Accreditation Standards. Consistent with some other health professions, CHF recommends the development of a graduate outcome statement or similar to support consumer understanding of the important role of Aboriginal and Torres Strait Islander health practitioners.



CHF understands that the Aboriginal and Torres Strait Islander Health Practice Accreditation Committee intends to develop a guidance document to accompany the accreditation standard, and would welcome the opportunity to provide feedback on the document.

CHF appreciates the opportunity to provide input into this consultation. Should you wish to discuss these comments in more detail, please contact [REDACTED] or [REDACTED]

Yours sincerely,



**Carol Bennett**  
**CHIEF EXECUTIVE OFFICER**