



Australasian College of Podiatric Surgeons

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Consultation - Review of accreditation arrangements – assignment of accreditation functions

The Australasian College of Podiatric Surgeons (ACPS) is the peak body training and advocating for podiatric surgeons in Australia. This submission is in relation to functions of the ANZPAC specific to podiatric surgery.

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

The ACPS is a training organisation with the award of Fellowship of Australasian College of Podiatric Surgeons and received accreditation in the previous accreditation round from ANZPAC. The general experience of ANZPAC with the ACPS has been positive. The two organisations maintain a co-operative and respectful relationship, with a close and open line of communication.

In Australia there are only three health professions with surgery defined within their scope of practice. Podiatry is one of these, being Podiatric Surgery. This requires a skill set across many domains requiring a unique set of accreditation standards. Hence the need for a robust and strong accreditation body is paramount for ensuring high training standards in line with the key principle of maintain public safety.

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.

Yes.

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

Yes.

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

Yes.

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

Yes.

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.

Yes.

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.

No comment.

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.

In relation to the assessment of overseas podiatric surgeons this remains an area of development in relation to policy as defined by the Podiatry Board of Australia. Until recently the ACPS was the organisation the PBA deferred to for assessment of overseas trained podiatric surgeons. The ACPS has the policy development to continue to support the PBA and ANZPAC in this role. This is a similar model used by the AMC when assessing overseas trained surgeons in the medical profession.

8. Stakeholder collaboration – the accreditation authority works to build stakeholder support and collaborates with other national, international and/or professional accreditation authorities.

Yes.

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?
 - reducing duplication, regulatory burden and cost
 - increasing transparency and accountability including in relation to cost, fees and performance
 - achieving greater collaboration, sharing of good practice and multi-profession approaches including to address health workforce issues and achieve greater effectiveness
 - establishing clearer performance indicators to more effectively address these issues and other key measures of performance

The ACPS believes the four points above are important factors to drive efficiencies across the National Scheme. The ACPS would be appreciative of further and closer engagement between both ANZPAC and the Podiatry Board of Australia to allow closer collaboration when working on common projects. Secondly the ability to collaborate together will enable addressing of workforce issues and strengthen the profession.

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.

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?

The ACPS believes ANZPAC needs to remain independent as it accredits both the podiatry profession and podiatric surgery. Accreditation of surgery requires a unique set of parameters and skill. ANZPAC has developed these and it remains integral in future accreditations cycles, establishing standards enabling the public to have confidence their safety is protected.

It is questionable if another accreditation body apart from the AMC would have the skills, standards, policy development and resources to safely assess a surgical training program.

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?

Yes, please see above.

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

The ACPS as mentioned above believes the accreditation of podiatric surgery needs to remain with an accreditation body such as ANZPAC. However, if this was to change then the ACPS believes the only other relevant accreditation body with the skills and resources to accredit would be the AMC.

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