



Paramedicine
Accreditation
Committee

The accreditation standards and professional capabilities – implementation through the accreditation process

Webinar session

30 March 2021, 5pm

Overview of today's session



- Welcome, acknowledgement of country, introductions and purpose
- The professional capabilities - Registration and Accreditation perspectives
- The accreditation standards - implementation and assessment
- Overview of the accreditation process
- Accreditation fees
- Breakout rooms – Discussion topics:
 1. The professional capabilities
 2. The accreditation standards
 3. Accreditation process
- All of group discussion on topics discussed in breakout sessions
- Any other questions and close

Purpose of today's session



- To share information about:
 - the professional capabilities and accreditation standards, including implementation and information on assessment against the documents
 - the approach to the accreditation of education and training programs
 - accreditation fees and the current feedback period open to education providers
- To answer any questions you may have on how assessment against the accreditation standards may work
- To provide you with an opportunity to ask questions or seek clarification about the professional capabilities and accreditation standards

The Accreditation Committee



Paramedicine Accreditation Committee (ParaAC)

- **Exercises assigned accreditation functions**
- Publishes how it will exercise its accreditation functions
- Develops accreditation standards (wide-ranging consultation)
- **Assesses and accredits** programs of study
- **Monitors** approved programs of study

Accreditation Authority

Paramedicine Board of Australia (National Board)

- Decides on accreditation authority (external entity or committee)
- Assigns accreditation functions to accreditation authority
- Approves accreditation standards
- Approves (or refuses to approve) accredited programs as providing qualifications for registration
- Publishes a list of approved programs of study

National Board

Professional Capabilities

The professional capabilities - *A registration perspective*

**Professor Stephen Gough ASM
Chair, Paramedicine Board of Australia**

The professional capabilities

- New capabilities published
- Initial development of interim capabilities to assist transition into the scheme largely based on CAA capabilities
- Extensive periods of preliminary and public consultation
- Stakeholder feedback positive and supportive
- Revised professional capabilities not substantially different to interim capabilities

Revised professional capabilities published in 2020, take effect 1 June 2021

The professional capabilities

The domains for the professional capabilities for registered paramedics are:

Domain 1: professional and ethical conduct

Domain 2: professional communication and collaboration

Domain 3: evidence based practice and professional learning

Domain 4: safety, risk management and quality assurance

Domain 5: paramedicine practice

How are they used as a registration tool?

The capabilities are set at entry level standard for the profession and therefore they play an important role in activities such as:

- education and training of paramedics in approved programs of study
- benchmarking the education and training of non Australian trained paramedics applying for registration
- assessing the competency of paramedics applying for registration
- assessing the competency of paramedics subject to conditions on their registration
- assessing the competency of registered paramedic subject to complaints about their professional performance



The professional capabilities - *An accreditation perspective*

Mr Alan Morrison
Co-deputy Chair, Paramedicine Accreditation Committee

The accreditation standards and professional capabilities – a crucial relationship

- Professional capabilities sit separately to the accreditation standards, but are intrinsically linked;
- The professional capabilities describe the minimum threshold level of professional capability required for registration;
- Learning outcomes and assessment tasks map to all the professional capabilities;
- Students must demonstrate all enabling components for all key capabilities before they graduate;
- Committee's ongoing monitoring of education providers and their programs meeting the standards.

How are the professional capabilities assessed?

Education providers will be required to show how a program's unit/subject learning outcomes address all the professional capabilities
(Standard 3, criterion 3.3).

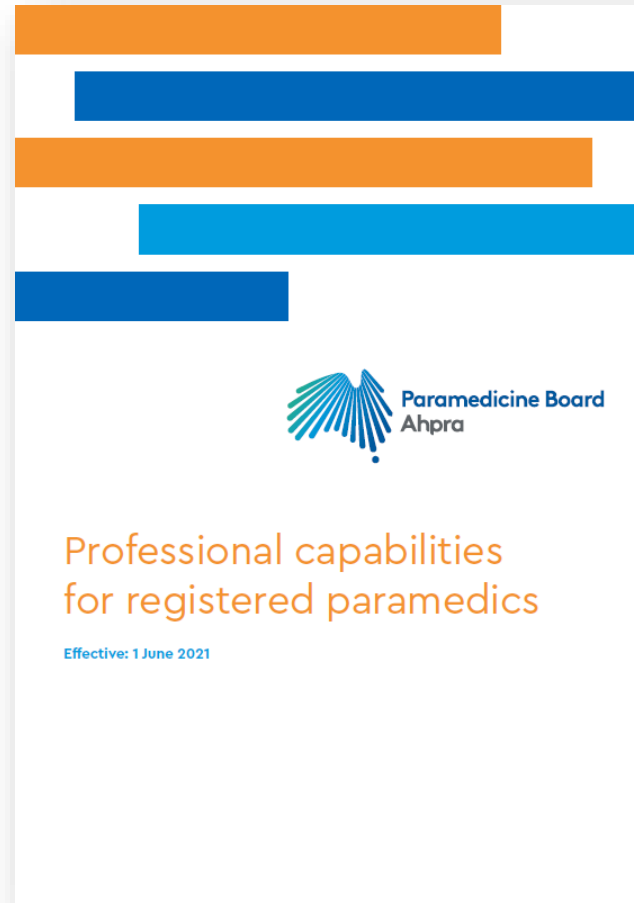
Education providers will be required to show whether all the professional capabilities for and unit/subject learning outcomes are mapped to assessment tasks in the program
(Standard 5, criterion 5.1).

Expected information

Education providers will submit a range of evidence (expected information) that will be assessed by Assessment Teams, such as:

- an assessment matrix
- unit/subject outlines
- mapping documents linking the professional capabilities to associated learning outcomes
- de-identified examples of student work.

Creating a competent and qualified graduate paramedic



Qualifies a graduate for registration as a paramedic

Any questions?

The accreditation standards

Bill Lord – co-deputy Chair, Paramedicine Accreditation Committee

The Accreditation Standards development



Period of preliminary
consultation –
August/September 2019



Roadshow around Australia
in early-2020 talking to
stakeholders



Period of public consultation
– December 2019 to March
2020

An overview of the accreditation standards



outcomes relevant to the expected competence of graduates



consist of five standards with accompanying criteria



do not contain the professional capabilities



include expected information and explanatory notes



Strong alignment with other health professions accreditation standards



Strong focus on cultural safety and culturally safe practice; interprofessional education; and safe practice



minimise duplication with regulators (e.g. TEQSA)

Outcomes-focused accreditation standards

- Provide flexibility for education providers to demonstrate how they meet the standards
- Foster innovation and creativity
- Enable inputs, processes and systems to be designed to suit context and to adapt to changing environment
- Do not mandate hours for completion of a particular task

The focus on outcomes enables the education provider to show how their students have attained all the professional knowledge, skills and attributes required to practice.

Structure – standards and components



**A STANDARD STATEMENT
ARTICULATES THE KEY
PURPOSE OF EACH
STANDARD**



**EACH STANDARD
STATEMENT IS
SUPPORTED BY MULTIPLE
CRITERIA**



**BALANCED VIEW OF THE
FINDINGS FOR THE WHOLE
STANDARD**

Structure – expected information and explanatory notes

- Expected information outlines what the education provider is expected to provide in their application
- Explanatory notes guide the education provider in providing the required evidence

Standard 1: Explanatory notes

This standard addresses safe practice and the care of patients as the prime consideration. The focus is on clinical placements and supervision and the way the education provider effectively manages clinical placements and professional practice environments to ensure quality and reliable outcomes for both patients and students.

Safe practice

There are many dimensions to safe practice such as knowing about the policy context; best practice guidance; knowing how to manage risk effectively; managing personal, physical and mental health; practicing cultural safety; practicing safety in the use of scheduled medicines; and the responsibilities as a student and as a registered practitioner. The Accreditation Committee expects the education provider to assure safe practice in the program by implementing formal mechanisms relating to clinical placements and by teaching students about the different aspects of safe practice, including but not limited to, workplace health and safety (including how to respond to occupational violence), cultural safety, mental health of patients and paramedics, manual handling, and infection prevention and control.

Cultural competence

While there are many professional capabilities necessary to be a competent paramedic, in Australia's multicultural society, cultural competence is particularly important.

Cultural competence is defined as a set of congruent behaviours, attitudes and policies that come together in a system, agency, or among professionals and allows that system, agency or those professionals to work effectively in cross-cultural situations.

The word culture is used because it implies the integrated pattern of human behaviour that includes thoughts, communications, actions, customs, beliefs, values and institutions of a racial, ethnic, religious or social group. The word competence is used because it implies having the capacity to function effectively. A culturally competent system of care acknowledges and incorporates, at all levels:

- the importance of culture
- the assessment of cross-cultural relations
- vigilance towards the dynamics that result from cultural differences
- the expansion of cultural knowledge, and
- the adaptation of services to meet culturally-unique needs.⁴

The Accreditation Committee acknowledges that cultural competence and cultural safety are particularly important in Australia's multicultural society and are not limited only to Aboriginal and/or Torres Strait Islander Peoples. A culturally safe environment should be afforded to all people in the Australian healthcare context.

Paramedics in Australia must be able to work effectively with people from various cultures, that may differ from their own. Culture may include, but is not limited to, age, gender, sexual orientation, race, socio-economic status (including occupation), religion, physical, mental or other impairments, ethnicity and health service culture. A holistic, patient and family-centred approach to practice requires cultural competence.

All health practitioners in Australia, including paramedics, need working knowledge of factors that contribute to and influence the health and wellbeing of Aboriginal and Torres Strait Islander Peoples. These factors include history, spirituality and relationship to land, and other social determinants of health in Aboriginal and Torres Strait Islander communities.

Cultural safety

It is critically important that the teaching of education programs is culturally safe and that education providers teach culturally safe practice.

The Board is part of the National Registration and Accreditation Scheme's (the National Scheme's) Aboriginal and Torres Strait Islander Health Strategy Group (the Health Strategy Group). The Aboriginal and Torres Strait Islander Health Strategy Group developed the *National Scheme's Aboriginal and Torres Strait Islander Health and Cultural Safety Strategy 2020-2025* (the Strategy) as a step towards making cultural safety the norm for Aboriginal and Torres Strait Islander Peoples and eliminating racism from the health system, in which accreditation standards play a role. The Statement highlights the Health Strategy Group's intent to achieve equity in health outcomes between Aboriginal and Torres Strait Islander Peoples and other Australians and to close the gap by 2031. Their vision is that patient safety for Aboriginal and Torres Strait Islander Peoples is the norm.

The definition of cultural safety below has been developed for the National Scheme and adopted by the National Health Leadership Forum. The Aboriginal and Torres Strait Islander Health Strategy Group developed the definition in partnership with a public consultation process.

The accreditation standards

Standard 1: Assuring safe practice

Standard 2: Academic governance and quality assurance of the program

Standard 3: Program design, implementation and resourcing

Standard 4: The student experience

Standard 5: Assessment

Standard 1 – Assuring safe practice

Assuring safe practice is paramount in program design, implementation and monitoring

- Safe practice
- Work-integrated learning/clinical placements
- Achievement of pre-clinical capabilities before work-integrated learning
- Work-integrated learning supervisors
- Relevant accreditation and licensing
- Ethical and professional conduct

Standard 2 - Academic governance and quality assurance of the program

Academic governance and quality improvement arrangements are effective in developing and implementing sustainable, high-quality education at a program level

- Formal quality assurance mechanisms
- Evidence of effective engagement with external stakeholders
- Reconciliation Action Plan (RAP)
- The staff and student work and learning environment
- Staffing profile for staff responsible for management and leadership of the program

Standard 3 - Program design, implementation and resourcing

Program design, implementation and resourcing enable students to achieve all the professional capabilities for paramedics.

- Program design
- Culturally safe practice and social and cultural determinants of health
- Learning and teaching approaches
- Interprofessional education
- Teaching and assessment of legislative regulatory requirements
- Work-integrated learning
- Staffing profile for staff responsible for implementation of the program

Standard 4 – The student experience

Students in the program have equitable and timely access to program information and learning support

- Registration requirements for students
- Cultural safety for students
- Student support services and facilities to meet learning needs
- Participation and completion for Aboriginal and Torres Strait Islander peoples

Standard 5 - Assessment

All graduates of the program have demonstrated achievement of all the learning outcomes taught and assessed during the program.

- Professional capabilities mapped to learning objectives and assessment tasks
- Valid and reliable assessment tools
- Quality assurance processes for assessment (eg benchmarking)
- Staff responsible for assessments (including placement supervisors)

Providing expected information

best practice approaches

- Make it clear how assessments address the capabilities
- Submitting accurate and up to date information - identify where the evidence can be found within accreditation documentation
- Calculating staff workload accurately and honestly

The importance of cultural safety in education

- There's a need to 'close the gap' at a quicker pace
- Teaches students to recognise the disparities in health outcomes for Aboriginal and Torres Strait Islander peoples
- It plays a key role in reducing racism in Aboriginal and Torres Strait Islander health care in Australia
- Core part in training the next generation of health practitioners to be culturally safe, respectful and capable.

Methods of teaching and assessment – cultural safety and culturally safe practice

Education providers could teach and assess cultural safety and culturally safe practice in a range of ways, for example:

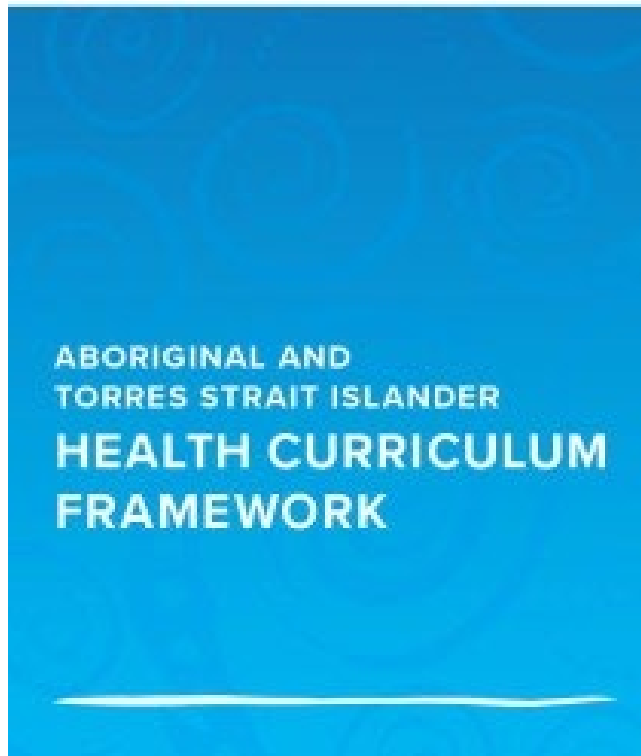
- Through specific development of cultural safety units of study, run by Aboriginal and/or Torres Strait Islander people
- Simulated learning
- Guest speakers
- Information provided in lectures and through tutorials
- Work Integrated Learning observations/assessment tasks

Reconciliation Action Plan (RAP)



- Strategic document that supports an organisation's business plan
- Contributes to advancing cultural safety and opportunities for Aboriginal and Torres Strait Islander peoples
- Most Universities have one
- Visit reconciliation Australia for more information (reconciliation.org.au)

Aboriginal and Torres Strait Islander Health Curriculum Framework



- Referenced in the accreditation standards as a tool for education providers to use
- Expectation that relevant aspects of the Framework are incorporated into the design and implementation of programs to prepare graduates to provide culturally safe health services to Aboriginal and Torres Strait Islander Peoples
- Useful guide to understand how Aboriginal and Torres Strait Islander health curricula may be embedded into higher education programs

Interprofessional education

- Key part of the accreditation standards – Standard 3, criterion 3.6
- Critical for students to be adequately trained and prepared effectively communicate and interact with other health professionals in order to provide the safest and most optimal patient experience.
- The Committee expects providers to identify how they will meet this standard by providing program materials and unit/subject outlines that identify how interprofessional education is taught to students.

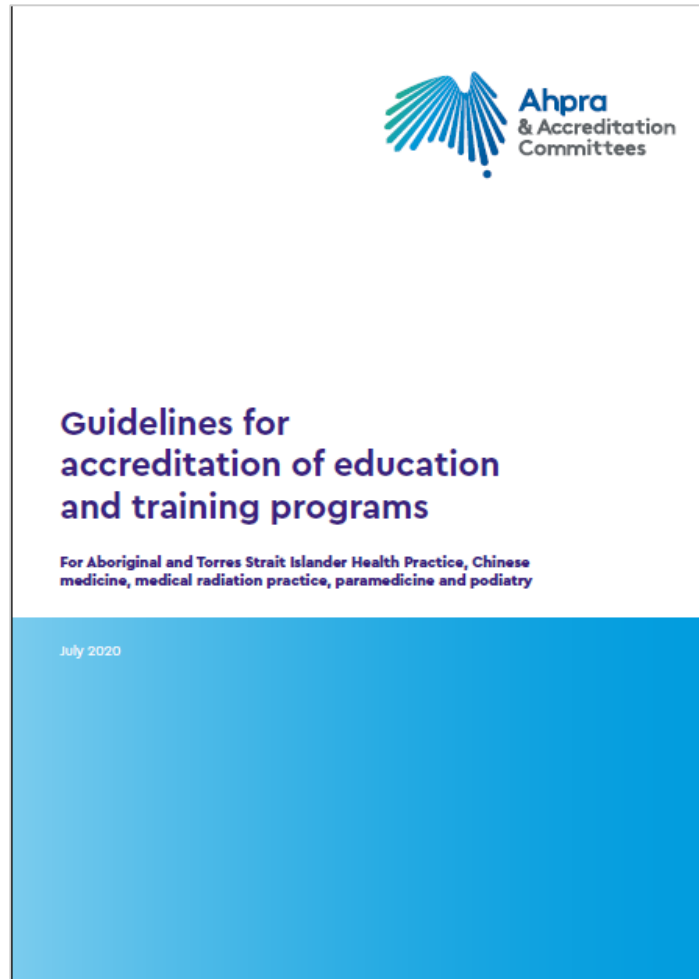
NSQHS Standards

Criteria	Expected information for inclusion with accreditation application/monitoring response
<p>3.7 Unit/subject learning outcomes and assessment in the program specifically reference the relevant <i>National Safety and Quality Health Service (NSQHS) Standards</i>, including in relation to collaborative practice, team-based care and culturally safe healthcare, particularly for Aboriginal and/or Torres Strait Islander Peoples.</p>	<ul style="list-style-type: none">• Program materials, unit/subject profiles/outlines and assessment tasks that show where the relevant <i>NSQHS Standards</i> are specifically referenced in the program and student learning outcomes assessed against the <i>NSQHS Standards</i>.

The accreditation process

Heather Janssen and Ian Walker – Senior Accreditation Officers, Program Accreditation

Multiprofession guidelines



Guidelines for accreditation of education and training programs

- The Committee's accreditation process
- Used for a variety of audiences

Prior to accreditation submission

Some things for consideration:

- Liaison with PAT about nature of the program
- Internal accreditation achieved
- TEQSA registration active and current
- For new programs (who weren't approved under s310), accreditation will occur prior to first cohort graduating

A program does not have to be accredited to deliver – it simply cannot market itself as accredited.

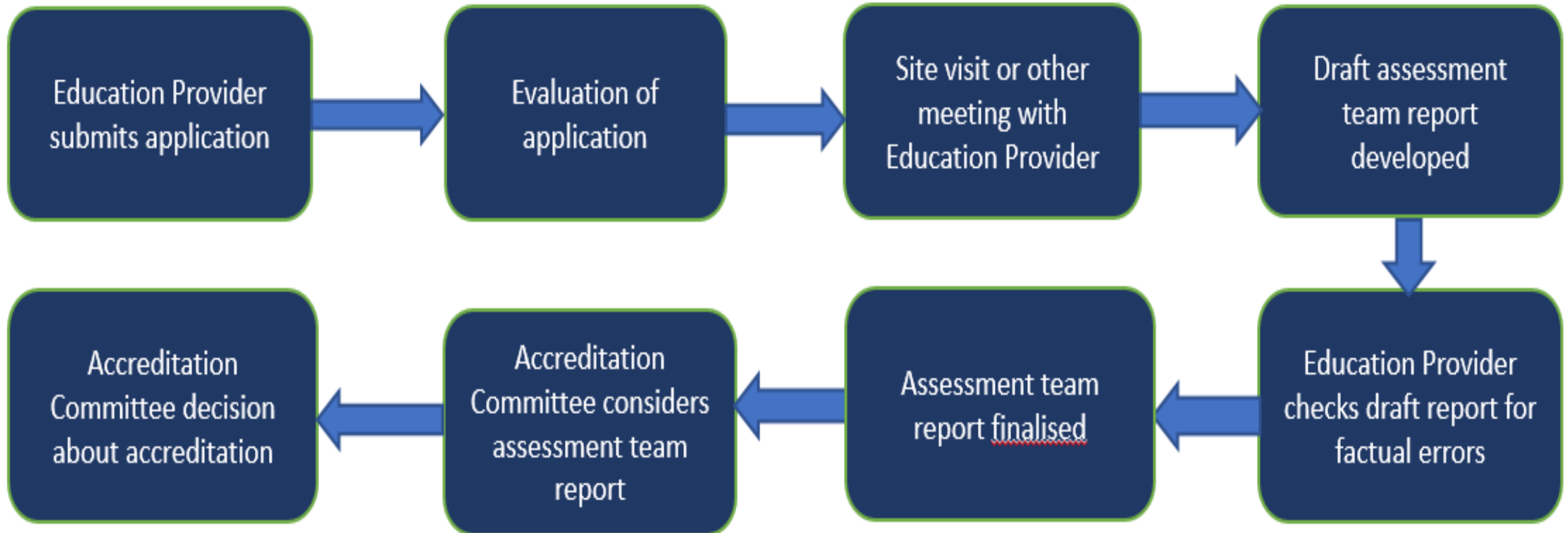
Program accreditation



Program accreditation involves three key areas of activity:


1. Assessment of programs
2. Decisions about accreditation of programs, and
3. Monitoring of accredited programs

1. Assessment of programs



Application form and templates

- Application form for all education providers to use
- A staffing profile for completion
- A capability mapping (learning outcomes and assessment tasks) spreadsheet will also be available



Paramedicine Accreditation Committee

Application for accreditation assessment

Profession: Paramedicine

ACCR-PAR

Completing the application form for paramedicine

GETTING STARTED

Please reference the below documents when completing the accreditation application form (the form):

- the [Accreditation Standards for paramedicine](#)
- the [Professional capabilities for registered paramedics](#), and
- the [Guidelines for accreditation of education and training programs](#) (multi-profession guidelines).

The form provides guidance on how to present your application and supporting documentation. When writing your application, you might wish to consider the following tips in putting together your application:

- Providing the explanation and supporting documentation against each of the criteria listed in the application form (as per the accreditation standards) is one way of structuring your application to help you address all the standards; assist the Assessment Team in assessing whether there is documentary evidence to make an evaluation on each standard (and criteria); and reduce the number of areas where further information may be requested.
- Clear, concise responses which directly address the standards are best. Supporting evidence (e.g. policies, procedures, timetables, meeting minutes etc) should be included in the attachments and referenced in the explanation.
- If information provided is relevant across multiple standards (or criteria), it is preferable for one copy of that document to be provided in the application and cross-referenced at each relevant standard (or criteria).
- Your application may include links to information/documents available on websites. Please ensure that any web content is accessible to the Assessment Team, and if access is required to restricted content, please ensure the relevant steps have been taken to give access to the Assessment Team (including password and/or login details).

If you are unsure about anything or have any questions during the application process, please do not hesitate to contact your Program Accreditation Team Accreditation Officer at program.accreditation@ahpra.gov.au

SUBMITTING YOUR APPLICATION TO THE COMMITTEE

To ensure safe and confidential submission of your application, the Program Accreditation Team (PAT) utilises Kiteworks (through Accellion File Sharing) for secure mobile file sharing. When you are due to submit your accreditation application, PAT will email you instructions for accessing the Kiteworks portal.

Once your application is received and checked by the Accreditation Officer and deemed compliant, access will be provided to the Accreditation Assessment Team. At the completion of the accreditation assessment process, all your files are removed from Kiteworks.

Privacy and confidentiality

The information collected in this application is required under the National Law for the purposes of assessing programs of study, and the education provider that provides the programs of study, to determine whether the programs meet the paramedicine accreditation standards.

Information supplied in this application may be provided to other people or agencies as specified in the National Law. Failure to provide some or all of the information requested may prevent your program being accredited. The Australian Health Practitioner Regulation Agency (Ahpra) Privacy policy explains how personal information will be stored, handled and used. The privacy policy outlines how a person can access information Ahpra holds about them, and how a person may make a complaint if they feel their privacy has been breached by Ahpra.

Completing this form

- Ensure that **all relevant fields** in the form are completed.
- Place an X in all applicable boxes: of multiple choice questions
- Ensure all attachments are referenced in the explanation and listed in Section D
- Complete a separate application form for each program to be assessed by the Committee¹

If you have any questions when completing the form, please contact the **Program Accreditation Team** on 03 8708 9709 or by email at program.accreditation@ahpra.gov.au

Effective from: 12 January 2021

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¹ If you are applying for accreditation of more than one program at the same time, and you find any of the criteria will contain the same information or evidence across programs, please include this information in just one application, and refer to it in your response to the relevant criteria in the other application form(s). This will save time and duplication for you and the Accreditation Assessment Team.

2. Decisions about accreditation of programs

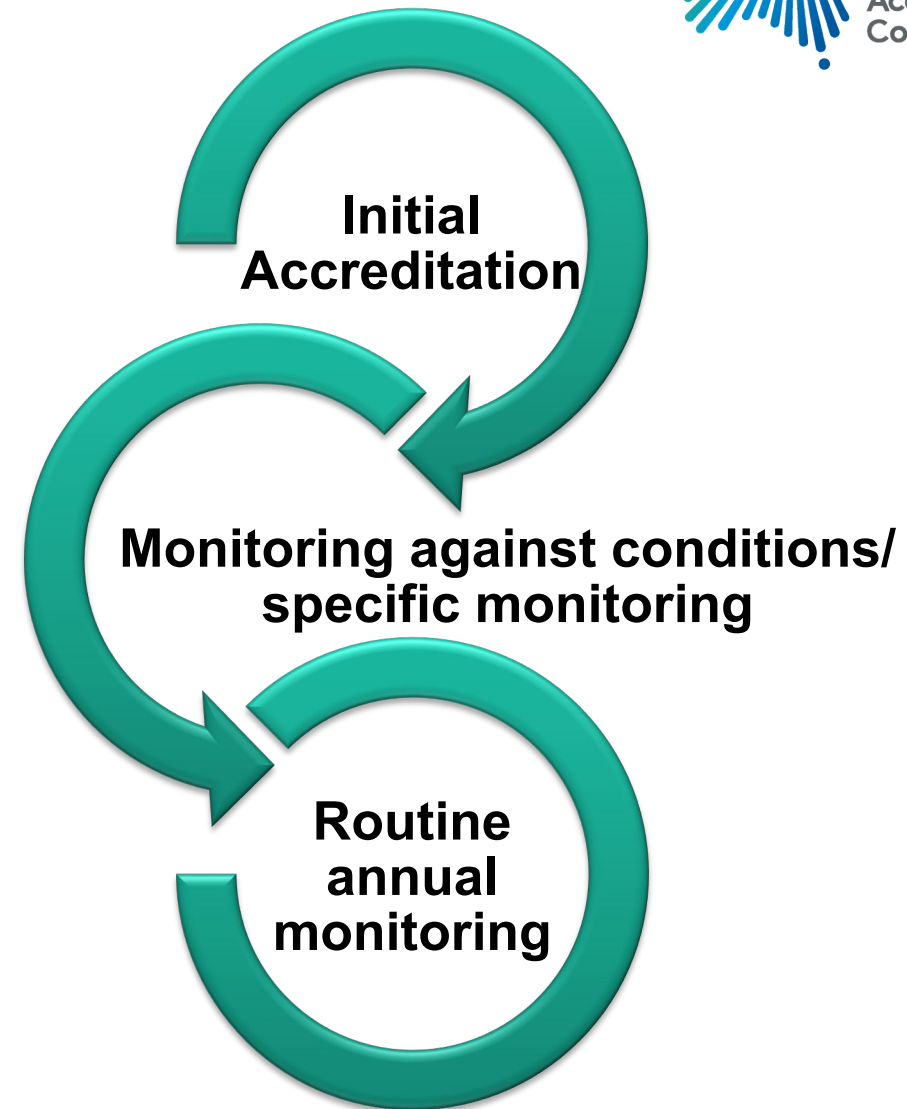


- A program is accredited if the education provider and program meet all the standards
- A program has conditions imposed if it substantially meets the standards, and the conditions ensure the standards are met within a reasonable time
- A program has accreditation refused if it has substantially not met the standards or will be unable to meet the approved accreditation standards within a reasonable time

Remember – conditions are not a ‘black mark’ on accreditation

The accreditation cycle

- ✓ Risk-based approach to accreditation
- ✓ Accreditation isn't for a set period (e.g. 5/7 years)
- ✓ Program monitored under s50 and remains accredited if demonstrates continues to meet standards



3. Monitoring of accredited programs



Accreditation fees

Simon Spence – Manager, Program Accreditation

Paramedicine accreditation fees



- Consultation released last week
- Outlines proposed approach to accreditation fees for 4 years
- Provides information on two types of accreditation fees
 - Annual accreditation fees
 - Accreditation assessment fees

Schedule of fees



Fee type	2021	2022	2023	2024
Annual accreditation fees				
Annual	\$6,500	\$7,000	\$7,500	\$7,750 (3% increase on 2023)
Teach-out	\$3,000	\$3,000	\$3,000	\$3,100 (3% increase on 2023)
Monitoring visit	\$5,000	\$5,000	\$5,000	\$5,150 (3% increase on 2023)

Schedule of fees



Fee type	2021	2022	2023	2024
Accreditation assessment fees				
One program	\$30,000	\$30,000	\$30,000	\$31,000 (3% increase on 2023)
Two programs at the same time	\$35,000	\$35,000	\$35,000	\$36,000 (3% increase on 2023)
Three programs at the same time	\$40,000	\$40,000	\$40,000	\$41,200 (3% increase on 2023)
Four + programs at the same time	\$45,000	\$45,000	\$45,000	\$46,350 (3% increase on 2023)
Fee per site visit to additional site	\$3,000 per additional site	\$3,000 per additional site	\$3,000 per additional site	\$3,000 per additional site

Provide your feedback



The Committee is keen to hear your feedback.

Submit your feedback via the Program Accreditation Team at program.accreditation@ahpra.gov.au by **COB 21 April 2021**

Any questions, contact Simon Spence or your Accreditation Officer

Break-time

Break-out sessions

Breakout session



- An opportunity to discuss what was outlined in the presentations, including:
 - the accreditation standards and professional capabilities, and their implementation
 - the accreditation assessment process
 - accreditation fees

Possible conversation points

- What do we mean by outcomes-focused accreditation standards?
- Are the expectations clear? Do you understand the structure of the standards; where to find the expected information; and how to use the explanatory notes to gather the expected information?
- Which areas of the standards will pose the biggest hurdle for providing evidence?
- How are the professional capabilities used by education providers to map learning outcomes and assessment tasks?
- What happens when you submit your application?
- What steps of the accreditation process are unclear?
- The site visit (physical or videoconference) – what can you expect?

Feedback on the breakout sessions



- Bill and Ian will give a brief run-down on the discussions from Breakout room 1
- Alan and Heather will give a brief run-down on the discussions from Breakout room 2

Any questions?

Thank-you for your time