



Response template for the proposed principles on strengthening the involvement of consumers in accreditation - public consultation

February 2024

This response template is the preferred way to submit your feedback to the public consultation on the draft proposed **principles to strengthen the involvement of consumers in accreditation**.

Please provide any feedback in this document, including your responses to the questions in the text boxes on the following pages. The boxes will expand to accommodate your response. You do not need to respond to a question if you have no comment.

Making a submission

Please complete this response template and email to AC_consultation@ahpra.gov.au using the subject line '*Feedback: Public consultation on principles to strengthen the involvement of consumers in accreditation*'. **Consultation closes on 18 April 2024.**

Publication of submissions

We publish submissions at our discretion. We generally publish submissions on our [website](#) to encourage discussion and inform the community and stakeholders about consultation responses. Please let us know below if you do not want your submission published.

We will not place on our website, or make available to the public, submissions that contain offensive or defamatory comments or which are outside the scope of the subject of the consultation. Before publication, we may remove personally identifying information from submissions, including contact details.

We can accept submissions made in confidence. These submissions will not be published on the website or elsewhere. Submissions may be confidential because they include personal experiences or other sensitive information. A request for access to a confidential submission will be determined in accordance with the *Freedom of Information Act 1982* (Cth), which has provisions designed to protect personal information and information given in confidence. Please let us know if you do not want us to publish your submission or if you want us to treat all or part of it as confidential.

Published submissions will include the names of the individuals and/or the organisations that made the submission unless confidentiality is expressly requested.

Do you want your responses to be published?

- Yes – please publish my response with my name
- Yes – please publish my response but don't publish my name
- No – I do not want my responses to be published.

Stakeholder details

Please provide your details in the following table:

| | |
|---------------------------|---|
| Name: | Sabrina Fukuda |
| Organisation name: | Council of Deans of Nursing and Midwifery (Australia and New Zealand) |

Your responses to the consultation questions

1. Does any content need to be added to or amended in the draft proposed principles?

The following represents the views of some CDNM members:

Some members noted that the document is quite content heavy and could benefit from being more concise and clearer. They emphasised the importance of prioritising consumer engagement and involvement in nursing and midwifery. However, they also stressed the need to ensure representation from diverse consumer perspectives, particularly from marginalised and underrepresented communities, and were pleased to see this outlined in the consultation document.

Furthermore, the members suggested that the content should include provisions for upskilling and supporting consumers in their roles. They proposed the establishment of standard resources accessible to consumers across Accreditation Committees, covering topics such as committee governance, understanding roles and responsibilities, and fostering strong representation.

Additionally, the suggestion was made to incorporate new graduates from Bachelor of Nursing (BN) and Diploma of Nursing (DN) programs as directly involved consumers.

2. Are there any implementation issues the Accreditation Committee should be aware of?

The following represents the views of some CDNM members:

Some members emphasised the importance of establishing mechanisms to support the views and representation of all maternity consumers, particularly those from diverse groups. They highlighted the necessity for training and education for all consumers to ensure their awareness of the program and its contents. Additionally, they expressed satisfaction with the inclusion of directly involved consumers, such as students undertaking the program and clinical leaders, in the consultation process.

At the School and Program level, maintaining consumer involvement in External Advisory Committees was identified as a challenge, particularly due to limited representation of Aboriginal and Torres Strait Islander Peoples. Members stressed the importance of succession planning for student involvement in these committees.

Furthermore, the concept of treating consumers as equals will require embedding a feedback loop in AHPRA Accreditation processes. This could involve engaging an external consultant to review the first 12 months of operation and make recommendations for improved governance arrangements for consumers.

Consideration was also suggested for how consumers prefer to receive meeting papers, with some preferring hard copies sent by secure express post to their preferred address, while others may be satisfied with electronic copies.

Finally, while it was acknowledged that consumers are compensated for their expenses and time, members suggested considering compensation for reading time, as papers are often substantial. They proposed that this activity should be recognized as part of the role and compensated appropriately.

3. Are there any potential, unintended consequences of the draft principles?

4. Do you have any general comments or feedback about the draft proposed principles?

The following represents the views of some CDNМ members:

Some members noted the importance of balancing the recruitment of consumers from specific consumer groups and networks, which may have a particular political agenda, with the inclusion of broader health consumers. They emphasised the need for this balance to ensure diverse representation.

Others commended the deliberate broadening of the definition of consumer in the draft, recognising the distinct roles and responsibilities of family, community, and employers in individual health. They viewed this as a positive move that acknowledges the multifaceted nature of consumer involvement.

Specific praise was given to the section addressing 'increasing impact on decision-making,' which was deemed well-written and empowering for consumers. Members appreciated the sense of empowerment conveyed in this section.