

Feedback on the draft Guidelines for risk-based decision making

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To provide feedback on the draft Accreditation Risk Framework, please consider the following questions.

1. Does any content need to be added/amended?

It is not clear from the title of the document that the risk-based accreditation decision making guidelines are for use in accrediting Australian higher education or tertiary training providers.

It is also not clear what the specific risk that is being referred to, and how it is being assessed.

ASMIRT suggests that more information be provided regarding how decisions regarding risk will be made objectively by the accreditation team. ASMIRT acknowledges the risk matrix, but where a course lies within this matrix for specific aspects needs to be defined by a form of rubric at the least.

2. Are there any areas of duplication or overlap with other regulatory processes?

ASMIRT are unaware of any areas of duplication with other regulatory processes. The application of a risk management approach to accreditation is consistent with the risk management approach Ahpra and the Boards have taken in other areas of health practitioner regulation.

Whilst universities have inherent quality processes in place to ensure educational standards for graduates. The assumption that programs contain inherent risk, infers institutions are not following standards.

Feedback given to universities following accreditation by the Accreditation Committee is comprehensive. Universities are usually cognisant of where there are issues, and in cases where accreditation status is granted "with conditions", these are required to be monitored until issues are resolved. A risk-based approach will provide universities with a clearer understanding of the risks involved, from the perspective of the Accreditation Committee, particularly as the risk rating is intended to be shared. This gives both the Accreditation Committee and the University (and university hierarchy) with a clear understanding of where the risks lie, where the concerns relating to the quality of graduating students might be, and the degree to which more or less surveillance / conversations need to occur.

It is inevitable that there will be some overlap with other regulatory processes, given that this is not a completely new process. Rather, this is a set of additional criteria for determining the accreditation committees' responses to education providers' accreditation applications.

3. Risk Indicators

Are the titles of the risk categories clear, do they reflect the associated indicators?

ASMIRT seeks clarity on whether the example provided is reflective of the actual? If this is the case, perhaps it could be worded as 'The risk indicators and categories are illustrated'...

ASMIRT suggests in Title one – 'Provider/course registration status with sector regulators' is too wordy and would benefit from a more succinct title.

ASMIRT seeks clarity on how institutional culture will be measured?

page 8, 7. risk indicators

ASMIRT recommends that this document should be as objective as possible. Providing additional numbers that directly show why decisions were made, information/definitions/outlines/rubric of these risk indicators will reduce subjectivity.

ASMIRT suggests that each example provided, should be supported with a definition or outline for how it adds to the risk profile. If for example, a scoring mechanism is used eg. 3/2/1 points, a clear definition of each of these 3 points will assist.

Whilst ASMIRT appreciates that there are Covid19/external factors included in this document, this may have the potential of being used as an excuse to reduce oversight on educational oversight in a digital world.

ASMIRT suggests clearer definitions of the risk matrix be provided, for example what constitutes "catastrophic" consequences? Is this 50% of students not achieving/receiving or is it 90%? What is deemed as the acceptable level of risk, as ASMIRT believe that this is a key component of the definition Is 5% of students not achieving/receiving deemed as insignificant, minor or moderate?

In summary, ASMIRT believes that if the risk indicators had definitions and a marking rubric/points allocation that could directly link into the likelihood section of the risk profile matrix and also define the consequences, will lead to better quality objective decisions.

Are the risk indicators fit for purpose?

ASMIRT believe that the risk indicators are fit for purpose with some reservations. ASMIRT feel that some of the sub-categories listed under the main risk indicator headings are somewhat controversial (eg institutional culture). ASMIRT seek clarity on the meaning of this terminology and how it can be assessed.

Could any of the risk indicators provide misleading information?

ASMIRT feels that the risk indicators could possibly provide misleading information depending on how the data provided is interpreted. For instance, in the situation where spurious complaints are made about the course/institution from disaffected students.

Are there any additional risk indicators that should be included?

ASMIRT suggests the addition of course content and learning objectives.

4. Do the Guidelines clearly describe our approach to risk-based accreditation?

ASMIRT suggests that this document may need to provide further clarity and definition on the rubrics' to be utilised, and review the examples, as currently, they appear to be all focussed on clinical scenarios.

ASMIRT seeks clarity on how the risk-based approach will be applied and utilised.

5. Are the terms used to describe the approach to risk-based accreditation clear?

ASMIRT feel that the terms used to describe the approach to risk-based accreditation are clear.

6. Do you think there will be any adverse effects of a risk-based approach to accreditation?

ASMIRT suggests that a risk-based approach infers a negative focus. The word risk assumes a probability that there will be harm or experience of an adverse health effect. This may send an unintended message to Australian education providers that assessment of risk and prioritising assessment of high risk is the primary assessment method, and purpose, of accreditation.

Whilst a risk-based approach may be reasonable, this will only be the case if there is clarity specific to application.

The risk matrix is recognisable as a patient incident event classification, and health professional academics would note this purpose. It seems inappropriate to equate a patient incident report with the assessment of risk in training programs. Whilst a clinical tool has been slightly modified to fit the guidelines, ASMIRT feels that it would be more relevant to have a more training focussed/ outcome-based matrix.

Similarly, the creation of an un-published risk profile for each training provider also infers a negative measure that is not transparent.

There is possibly a level of subjectivity in determining risk.

7. Do you have any other general feedback or comments on the proposed Guidelines?

Whilst the process of determining whether there is risk involved in the accreditation status of a course, this may also work against course accreditation as well.

ASMIRT suggests consideration be given to the development of another name for these guidelines. Eg: Safety based decision making, Competency based decision making, Probability-based decision making.

Whilst there is no question that the safety of the patient is of ultimate importance, training programs are not clinical departments, therefore, a more relevant nomenclature is worthy of consideration.

ASMIRT agrees that it is sensible to implement a risk-managing approach as the Accreditation Unit within Ahpra administers a growing number of Accreditation Committees, and probably a growing number of courses. This is about applying the monitoring resources to the highest risk areas and maintaining the efficiency and managing the costs of accreditation. Ahpra's accreditation committees and unit providing the accreditation, function extremely efficiency (compared to some of the other professional councils). This will ensure this efficiency continues.

We appreciate the time taken to review the Guidelines, and value your contributions to improve our processes.

Once completed, please sent this form to accreditationconsultation@ahpra.gov.au by **Monday 7th March 2022.**

For further information regarding the project, please contact the Project Officer, Alison Green (Alison.green@ahpra.gov.au)