Cover sheet for submissions

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| **Consultation name:** | **Allied Health Rural Generalist** **Education Program Accreditation System** |
| Consultation paper available at: | https://ahha.asn.au/allied-health-rural-generalist |
| Submit to: | Kylie Woolcock at kwoolcock@ahha.asn.au |
| Due date: | 30 April 2018 |

If responding on behalf of a stakeholder group, please identify:

|  |  |
| --- | --- |
| Name of group |  |
| Contact name  |  |
| Email/phone contact |  |
| Profession represented (if applicable): |  |
| Jurisdiction represented (if applicable):*[Please reflect national/state/territory; also metropolitan/regional/rural/remote]* |  |
| Stakeholders represented: |  |

If responding as an individual, please identify:

|  |  |
| --- | --- |
| Name: |  |
| Email/phone contact: |  |
| Profession (if applicable): |  |
| Jurisdiction:*[Please reflect national/state/territory; also metropolitan/regional/rural/remote]* |  |

# Summary of consultation questions

## Consultation questions for Resource 1: Competency Framework

* 1. Please identify any changes required. Please provide rationale for your recommendations wherever possible.
	2. Please consider the profession-specific areas listed. With reference to the information in the Education Framework, what work needs to be done to ensure these clinical focus areas are well understood by all stakeholders?

## Consultation questions for Resource 2: Accreditation Standards

* 1. Please identify any other changes required. Please provide rationale for your recommendations wherever possible.
	2. Please provide any comments about evidence expectations for meeting each of the standards.

*Specifically*:

* 1. Please consider the responsibilities of TEQSA accreditation vs professional accreditation.
* What overlap do you see? How do you recommend this be addressed?
* What alignment in evidence requirements do you see? How do you recommend this be managed?
	1. Please consider that students for these programs will have a primary health professional qualification and be practising under the regulatory instruments relevant to their specific allied health profession (unlike those for professions currently using the ADC standard template for entry-level programs).
* How does this impact on the standards?
* What evidence requirements need to be considered in relation to this?

## Consultation questions for Resource 3: Accreditation Procedures

1. How early should the relationship between the accreditation entity and institution be established?
2. Should there be a requirement that an accreditation decision be made prior to accepting students?
3. What information about the program is important for the accreditation entity to review at the point an institution notifies them of their intent to develop a program?
4. What expertise and experience are required by those evaluating a program? How should an evaluation team be composed to balance rigour and efficiency?
5. To what extent is profession-specific input to a program evaluation required? How should this be implemented?
6. What opportunities are there to align with existing team selection processes or training mechanisms? How might this work?
7. Are site evaluation visits necessary or can an evaluation of the program be done remotely (e.g. desktop review of documentation and internet-enabled interviews)? Please explain your response.
8. Will a typical accreditation decision-making structure (i.e. team→committee→board) be most appropriate for education to effectively support the AHRG Pathway? If not, what are the other considerations/recommendations?
9. If an accreditation committee is established, how should it be composed?
10. What opportunities are there to align with existing decision-making structures and processes? How might this work?
11. What recommendations do you have for indicators of program quality or risk that should be monitored for education to effectively support the AHRG Pathway?
12. What recommendations do you have for the emphasis being placed on ongoing monitoring rather than a set period of accreditation?
13. Is it feasible to provide a mechanism for accreditation of a selection of standards within the Competency Framework? If so, is there a minimum level of program alignment to the standards that should be used as a threshold for an application for accreditation (e.g. minimum number of professions with a clinical training pathway in the program, any requirements to include both the inter-professional and clinical/profession-specific components in a single program)? What are the implications of this approach for different stakeholders? Are there alternative approaches that should be explored?
14. What mechanisms should be put in place for grievances in relation to accreditation of education supporting the AHRG Pathway?
15. Please provide any other feedback you have on the procedures for accreditation that are being developed.