

Dear Executive Officer

## **Registration Standards – Continuing Professional Development**

As you may be aware, the Australian Commission on Safety and Quality in Health Care (ACSQHC) mandated the National Safety and Quality Health Service Standards for the accreditation of health facilities in both the public and private sectors from 1 January 2013.

Amongst other things, these standards include requirements to ensure that clinical professionals are trained in:

- Open disclosure processes (1.16.2)
- Aseptic non-touch technique (3.10.1), and
- Basic life support (9.6.1)

Although the National Standards provide criteria for the accreditation of health facilities, the Australian Private Hospitals Association suggests that the reviews currently being conducted by various professional boards, including your own, provide an ideal opportunity for alignment of the various requirements that clinicians are need to meet.

Of the requirements mentioned above, the requirement regarding life support is perhaps the most important given that the ACSQHC is currently undertaking further work regarding the training and competency requirements pertaining to recognising and responding to clinical deterioration. Proposed requirements will be informed by both the National Standards and by the *National Consensus Statement: essential elements for recognising and responding to clinical deterioration*.

As you will be aware many clinicians work across multiple organisations in both public and private sectors and must consequently verify that they meet training and competency requirements in multiple contexts. Hospitals for their part are also faced with the challenge of verifying the level of skills and current competency held by new employees and clinicians seeking to be credentialed. Hospitals also need to establish the base level of skills and competency held in order to plan and coordinate appropriate induction and on-going training.

It is our view that it would be in the interests of both private hospitals and the clinical professions working with them if requirements such as those referred to above were reflected in the registration requirements of their respective board. To this end we make the following recommendations:

- **Basic skill requirements should be embedded within requirements for registration**

The requirements of an appropriate skill base for clinical professionals are best determined by the professional medical bodies, colleges, universities and AHPRA. This approach offers the following advantages:

- Clinicians working across multiple hospitals and sectors would be able to provide a single and independently verified record of training and competence.
- Training requirements could be tailored to the needs of the particular specialty for which the clinician was registered.
- Hospitals would be assured of the base level of skills held by clinicians.

Universities and colleges providing health care education programs should include these requirements in their curricula, so that clinicians have at least these basic skills and competencies when they emerge into the hospital environment.

- **Maintenance requirements should be embedded within mandatory CPD requirements for registration**

Colleges and professional boards ought mandate regular training requirements appropriate to each registered profession. AHPRA should publish compliance to that hospitals can access this information for credentialing purposes.

In making these recommendations, the APHA recognises that private hospitals can in no way abrogate their responsibilities to provide induction for the clinical professionals working with them. Likewise private hospitals are responsible for ensuring that employed staff are provided with relevant training. Rather the proposals outlined above are intended to promote greater integration and consistency between the requirements with which hospitals and clinicians must respectively comply.

I trust that these comments will be of assistance to the Board and APHA would be happy to discuss these proposals further.

Yours sincerely

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