

Australian Qualifications Framework Review

March 2019

The Dietitians Association of Australia (DAA) is the national association of the dietetic profession in Australia with over 6700 members, and branches in each state and territory. DAA is a leader in nutrition and advocates for food and nutrition for healthier people and healthier nations. DAA and its independent regulatory Councils, the Australian Dietetics Council (ADC) and the Dietetics Credential Council (DCC) appreciate the opportunity to provide feedback on the Australian Qualifications Framework (AQF) Review by the Australian Government Department of Education and Training.

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DAA interest in this consultation

In Australia, nutrition and dietetics is self–regulated by DAA to achieve equivalence in protecting the public and maintaining professional standards to that provided by registration with the Australian Health Practitioners Regulation Agency (AHPRA). In regulating its profession, DAA sets the minimum standards¹ to which Universities must comply to achieve and maintain accreditation status, and assure graduate dietitians have demonstrated competence as described in the DAA National Competency Standards.² This accreditation process is governed by the independent Australian Dietetics Council (ADC). There are currently 15 accredited dietetics programs available in Australia, comprising six undergraduate (AQF level 7 and 8) and 11 postgraduate (AQF level 9) programs, and an estimated 650 dietetics graduates per year.

DAA also administers the credentialing program for dietitians, the Accredited Practising Dietitian (APD) program,³ for which graduates of domestic accredited dietetics programs and successful applicants of the Dietetics Skills Recognition (DSR) process for overseas-qualified dietitians can apply.⁴ The APD program is governed by the independent Dietetic Credentialing Council (DCC) and is the only credential for dietitians recognised by the Australian Government (for Medicare and Department of Veterans' Affairs purposes), many state governments and many private health insurers.

The AQF provides the base requirements for dietetics education in Australia, and DAA also applies this framework in assessing overseas credentials for eligibility to apply to join the APD program.

Discussion

DAA and its Councils are overall supportive of the changes suggested in the discussion paper and has raised some issues for consideration moving forward. Our position on each of the three consultation questions is outlined below.

1. In what ways is the AQF fit, or not fit, for purpose?

We agree with the points raised on page 12 of the discussion paper regarding the changing context and need for further review of the AQF. This is particularly the case given the increased importance of post-school qualifications, changing nature of work, focus on technology, and need for broader skills such as interpersonal, creativity and decision-making skills.

DAA currently faces challenges with graduates from various AQF levels (7-9) entering the profession with the same competency requirements. Whilst we acknowledge the need for qualifications being obtainable through differing pathways, being faster, cheaper, involving self-directed and on demand learning, we are concerned with the risk of introducing new pathways to study and graduation that may compromise the quality of graduates and therefore patient safety.

2. Where the AQF is not fit for purpose, what reforms should be made to it and what are the most urgent priorities? Please be specific, having regard to the possible approaches suggested in the discussion paper and other approaches.

4.1 A wider range of credentials could be included in the AQF

We are supportive of a process in which micro-credentials are accredited and recognised, specifically to address a need that is not already met in the tertiary education system and that industry, employers or the community support. This provides great opportunity for supporting extended scope of practitioners, ensuring professionals have access to courses that are recognised as being appropriate for their professional needs. We agree that micro-credentials should be required to meet the seven criteria outlined on page 15 of the discussion paper, as for any qualification included in the AQF. DAA is also supportive of the possible approaches outlined on page 18, specifically:

• Include shorter form credentials in the AQF:

We are supportive of this approach as preferable to having a separate framework for micro-credentials. Incorporating micro-credentials in to the AQF will provide the opportunity to clearly identify how a short course fits in to the greater qualification framework.

• Use the existing criteria for adding a qualification type to the AQF, possibly adapted for shorter form study, to determine whether shorter form credential types should be added to the AQF:

We agree with this approach as a means of providing a clear regulatory framework for the appropriateness of a micro-credential to be nationally recognised.

• Determine what groupings of shorter form credentials are required, and create them as credential types in the AQF:

It is essential that shorter form credentials are grouped according to the level at which they are targeted. DAA views the most appropriate groupings for nutrition and dietetics to be 1. foundation studies for potential future dietitians; 2. courses for graduate dietitians with skill gaps that may arise in an evolving work-force; 3. programs for regular upskilling of practitioners and for development of expertise in specific practice areas.

4.2 The treatment of enterprise and social skills could be clarified in the AQF

We recognise the importance of focussing training programs to deliver health services to meet future workforce and public needs and are supportive of inclusion of specific enterprise and social skills in the AQF as a way of providing greater strength to entrants of post-graduate dietetics programs and the broader Australian workforce. The list of enterprise and social skills in table 1, page 19 of the discussion paper are certainly of relevance to dietitians. These skills go beyond the previously outlined generic skills which seemed to be more applicable to AQF levels 1-6.

We agree with the paper's proposition regarding amending the AQF reference to sector dependence on applying enterprise and social skills and replacing this with "guidance on how specific enterprise and social skills could be applied in different qualifications - having regard to the purpose and discipline of the qualification and the primary learner cohort for whom the qualification is intended (p. 20)".

5.1 AQF Policies

We are supportive of a system that provides certainty and transparency to students about the potential outcome of a request for credit.

3. In relation to approaches suggested by the Panel or proposed in submissions or through consultations, what are the major implementation issues the Review should consider? Please consider regulatory and other impacts.

Major implementation issues for DAA and its Councils in regard to regulatory impacts and considering various proposed approaches are:

- 4.1 A wider range of credentials could be included in the AQF
- A clear and robust process will be required for ensuring that the level at which a micro-credential is assigned is appropriate for its target group. This will need to be managed by a credentialing authority in close consultation with industry. The scope and graduate outcomes of the micro-credential must also be made very clear. DAA is aware of a high level of confusion among the public in relation to the qualification provided by currently available short courses in nutrition. In some cases, graduates of these courses provide health services to the public that they are not qualified and do not have the skills to provide, posing a great risk to public safety. There should be a process in place for minimising this confusion to ensure that students completing micro-credentials are very clear on their future career/study options and scope provided by the course.
- Extensive consultation with professional bodies will be required in deciding whether a micro-credential is fit for purpose for the profession and therefore appropriate for inclusion in the AQF. The time and resources required for industry involvement in this process should be considered throughout the review of the AQF.
- Professional bodies will require significant time to consult with stakeholders and consider how micro-credentials will fit with professional credentialing and extended scope of practice, should the plan to include these in the AQF go ahead. Consideration for how long a micro-credential remains current in providing extended scope and the on-going requirements for maintaining the credential also need to be considered.
- The cost of micro-credentials for students must be considered as there
 might be potential negative impacts on professionals who may not be
 able to afford micro-credentials in comparison to those who can.
 Measures to achieve equitable provision of micro-credentials for all
 stakeholders will be required.
- The introduction of micro-credentials to the AQF will provide significant challenges for universities and accreditation bodies in assessing the appropriateness of aggregation of credentials for entry to post-graduate programs. This will be particularly challenging in an outcomes-focused accreditation environment that does not provide scope for including specific criteria to the level that will be required for assessing entry in this new system. It is important that universities and accrediting bodies are supported through the implementation process of introducing credentials in an outcomes-focused environment.

5.1 AQF Policies

• There will need to be a clear and transparent register of micro-credentials that are considered appropriate for contributing to pre-requisites. This needs to be discipline-specific to recognise the differing skill sets required for different health professions, and supported by a robust system of ensuring changes made to courses/units are clearly assessed for any impact on the appropriateness of the course for credit to be granted. A credentialing body is essential for ensuring this is achieved.

References

- Dietitians Association of Australia. Accreditation Standards and Processes. Available from https://daa.asn.au/becoming-a-dietitian-in-australia/accreditation-of-dietetics-education-programs/accreditation-standards-and-processes/, accessed 4 March 2019.
- Dietitians Association of Australia. National Competency Standards for Dietitians. Available from https://daa.asn.au/maintaining-professional-standards/ncs/, accessed 4 March 2019.
- 3. Dietitians Association of Australia. Accredited Practising Dietitian Program. Available from https://daa.asn.au/apd-program/, accessed 4 March 2019.
- 4. Dietitians Association of Australia. Dietetics Skills Recognition (DSR). Available from https://daa.asn.au/becoming-a-dietitian-in-australia/recognition-of-dietetic-qualifications/dietetic-skills-recognition/, accessed 4 March 2019.