

Response template for the draft guidance on professional capabilities - public consultation

August 2024

This response template is the preferred way to submit your feedback to the public consultation on the draft **guidance on developing professional capabilities**.

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 guidance on developing professional capabilities*'.

Consultation closes on 18 October 2024.

Publication of submissions

At the end of the consultation period, submissions (other than those made in confidence) will be published on the Accreditation Committee's website to encourage discussion and inform the community and stakeholders about consultation responses.

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 These submissions will not be published on the website or elsewhere.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. Any 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 want us to treat all or part of it as confidential.**

We will not place on the 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 identifying information from submissions, including contact details.

The views expressed in the submissions are those of the individuals or organisations who submit them, and their publication does not imply any acceptance of, or agreement with, these views by the review.

Published submissions will include the names of the individuals and/or the organisations that made the submission, unless confidentiality is requested. If you do not wish for your name and/or organisation's name to be published, please use the words '**Confidential submission**' in the subject title when emailing your submission.

Initial questions

To help us better understand your situation and the context of your feedback please provide us with some details about you. These details will not be published in any summary of the collated feedback from this consultation.

Question A

Are you completing this submission on behalf of an organisation or as an individual?

Your answer:

☒ Organisation

Name of organisation: **Australian Psychological Society**

Contact email: **z.burgess@psychology.org.au**

☐ Myself

Name: [Click or tap here to enter text.](#)

Contact email: [Click or tap here to enter text.](#)

Question B

If you are completing this submission as an individual, are you:

☐ A registered health practitioner?

Profession: [Click or tap here to enter text.](#)

☐ A member of the public?

☐ Other: [Click or tap here to enter text.](#)

Question C

Would you like your submission to be published?

☒ Yes, publish my submission **with** my name/organisation name

☐ Yes, publish my submission **without** my name/ organisation name

☐ No – **do not** publish my submission

Your responses to the consultation questions

Good practice in the development of professional capabilities

1. Does any content need to be added to or amended in the draft guidance on developing professional capabilities?

Based on our responses to the questions below, there may be some opportunities to amend content within the *draft guidance on developing professional capabilities*.

In addition, the development of new or revised professional capabilities should include consideration of the impact(s) on currently practicing professionals and how they may need to prepare to ensure that they meet any additional requirements related to the new capabilities. Ensuring due consideration of the impact on practicing professionals is an essential component to the development of new capabilities.

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

It will be important for the Accreditation Committee to establish an appropriate process and outcome evaluation framework that can effectively monitor the impact of the guidance and make any necessary changes. Obtaining feedback from stakeholders, throughout the current consultation as well as early in the implementation phase, can provide useful data to better understand and identify potential barriers and unintended consequences of the draft guidance. The Accreditation Committee may consider developing supplementary or explanatory material to aid implementation and address any related concerns.

The Accreditation Committee may also benefit from developing and implementing a communication strategy that will enable the appropriate information and documents to be disseminated to appropriate stakeholders. We also encourage the Committee to consider any potential legal and ethical considerations, particularly within the context of proceeding to develop shared professional capabilities across health professions.

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

The potential unintended consequences of the draft guidance may relate to our response to questions 2, 6 and 7. This is particularly relevant within the context of the guidance discussing shared professional capabilities. As per our responses below, the APS is not supportive of shared professional capabilities due to concerns regarding the risk of deprofessionalisation of the primary care sector via professional substitution and other potential ethical issues.

4. Do you have any general comments or feedback about the draft guidance on developing professional capabilities?

Our comments and feedback about the draft guidance are reflected within our responses to the questions on this template.

Good practice professional capabilities

5. Do you agree that the threshold capabilities required for registration should be owned and governed by Ahpra and the National Boards? Why or why not?

The key role and function of the Psychology Board of Australia (PsyBA) is to focus on supporting safe practice by publishing regulatory standards, codes, guidelines, updates and other resources for practitioners, employers, students and the public. It is therefore appropriate that the PsyBA owns and governs the professional competencies for psychology.

6. Do you support having shared professional capabilities across health professions regulated by the National Scheme? Why or why not?

Whilst we recognise there may be common skills and competencies across various professions, the APS does not support having shared core professional capabilities across health professions regulated by the National Scheme. Doing so runs the risk of a loss of skill and capability by creating an artificial simplification and delineation of specific skills and capabilities of health professionals, which would be inconsistent with the complexity of clinical practice. Whilst we recognise that at times the work undertaken by various health professions may overlap, these professions often bring different theoretical orientations and competencies into their work. These differences need to be recognised and affirmed so that the right kind of work by the right kind of professional can be provided at the right time. That is, the surface-level description of a skill may appear to be the same, but the underlying differences – both within and between professions – should be recognised as part of professional distinctiveness, and, therefore, different capabilities related to good practice.

7. What professional capabilities do you think should be shared across professions?

As per our response to Question 6, the APS does not support the development of shared core capabilities across professions. While the capabilities listed on p. 12 of the *Draft guidance on developing professional capabilities* may at first appear generic, when applied within the lens of a specific profession, there may be vast differences, e.g., patient-centred care and planning and performing a comprehensive assessment in physiotherapy is very different to patient-centred care and planning and performing a comprehensive assessment in psychology. Although there may be shared principles, to share such capabilities across professions risks a lack of specificity that could potentially impact the efficacy of the profession and the safety of the public. The same could be said for ethics – particularly as they apply to a profession that involves hands-on care as opposed to a profession where this would be entirely inappropriate and potentially unethical.

Multidisciplinary teams bring an array of skills and competencies to health care providing holistic support from a range of practitioners. This is their strength and to subsume core capabilities under one umbrella ignores the distinct contribution made by each profession and risks a poorer level of care being provided to consumers.