

## Proposed principles and structure of a medical science workforce certification scheme: release of the Position Paper – December 2018

Throughout 2018, representatives from 14 medical laboratory science professional and industry groups have continued to work together to debate and refine what a certification scheme for the scientific workforce in those laboratories might look like and how it could operate to incorporate the wide range of professional interests in that workforce.

### *Consultations to date*

With the assistance and guidance of steering group representatives from AIMS, AACB and NPAAC, the HCA project team has conducted several consultation rounds and at the end of each round reshaped the elements of a proposed scheme into an evolving “positions”. The core content of these positions was informed by the project’s initial literature review but the detail has been shaped by testing those positions through discussion and surveys within the consultation process. The most recent discussions were held in Sydney on 22 November 2018 in preparation for release of a penultimate Position Paper to the wider stakeholder population and particularly to the scientists and technical officer workforce groups that have been proposed for initial inclusion in the scheme. The Australasian Cytometry Society was represented by Sandy Smith at this meeting.

### *Alignment with broader quality and safety activities*

Certification schemes are primarily “owned” and led by the relevant professional groups (as has been the case for all other Australian health professions). However, discussions have clearly recognised the importance of trying to align a certification scheme with other competency development and assessment processes that may be occurring in laboratories at present.

### *Overview of the proposed positions*

**Participation:** Like all professional certification schemes, this scheme would commence operation on the basis of voluntary participation but the benefits will be greatest to the profession if as many people join the scheme as possible.

**Entry requirements:** Scientists will be required to hold a bachelor degree qualification (Australian Qualification Framework Level 7 or above) that satisfies the NPAAC definition of a Scientist. Technical Officers will be required to hold a qualification (equivalent of a relevant VET qualification requiring two years’ study and/or Australian Qualification Framework Level 5 or 6 or above) that satisfies the NPAAC definition of a Technical Officer. A two year initial period of professional practice and competency-based preparation will be required prior to full (unconditional) certification of each applicant.

**Levels:** The scheme will start with two broad levels – Medical Scientist and Technical Officer – with capacity for some reflection of each applicant’s current laboratory context, discipline-specific competence and complexity of skill in the assessment arrangements. Additional levels and discipline-specific arrangements may be implemented over time, depending on stakeholder needs and capacity to contribute expertise to the establishment of such structures.

**Competence framework:** The scheme will strongly reference the current medical scientist Competency Based Standards (CBS) framework that has been endorsed by the Pathology Associations Council (PAC). Stakeholders have endorsed the usefulness of the current CBS framework but indicated there is some minor updating to be done.

[http://www.health.gov.au/internet/main/publishing.nsf/Content/74F0211140F493B9CA257BF0001FEAB2/\\$File/20180612-Final-Supervisor-in-the-Clinical-Governance.pdf](http://www.health.gov.au/internet/main/publishing.nsf/Content/74F0211140F493B9CA257BF0001FEAB2/$File/20180612-Final-Supervisor-in-the-Clinical-Governance.pdf)

<sup>2</sup> Ibid

**Assessment methods:** Assessment will be focused on competence as the scheme develops, noting that there is some development of capacity in the sector required to achieve a higher level of uniformity of approach. This development process should be strongly aimed at alignment with current laboratory accreditation requirements for the assessment of employee competence. Recommended initial assessment methods are a simple portfolio of evidence made up of a) a competence-focused logbook (preferably online and easy to use in order to support employer engagement), b) an agreed amount of Continuing Professional Development participation relevant to current practice level and c) completion of an agreed number of online scenario-based competence assessment modules set by the certification body, which will include scenarios derived from de-identified incident monitoring (e.g. KIMMS) data and be set at a range of competency levels.

**Re-certification:** Re-certification will be required every three years and will be based on similar assessment processes, adapted as required to suit current practice level and laboratory context.

**Accountability and Governance:** Governance of the scheme will be built upon the principles of ensuring a) effective engagement and input of existing (and potentially, future emerging) medical science professional associations in order to ensure that the certification arrangement is effectively and enduringly “owned” by the profession and b) that the needs of other key stakeholders (such as employers, consumers and quality standard setters) are carefully considered. The governance and accountability structures will also be put in place to manage the scheme in a fiscally responsible and lawful manner.

**Sanctions:** The focus of the scheme will be on promoting competence of its certified members so formal sanctions will be limited to removal of certification status for non-payment of fees (to protect the financial viability of the scheme) and/or for issues that would damage the credibility of the scheme (for example, if the certification scheme becomes aware of a major breach of practitioner competence that could affect public perception of the profession and the scheme).

**Cost:** In order to ensure its independence, it is important for the scheme to achieve financial viability without the benefit of ongoing investment from other bodies. Tax-deductible fees for participation in certification and recertification by the scheme will be set at the lower end of fee scales paid by other Australian health professions with similar salary levels. It will be critical for all stakeholders to promote participation in the scheme and ensure its relevance so that financial viability can be attained. There will be a need for some seed funding from professional associations to support the initial start-up phase of the scheme’s operation.

### **More detail and feedback**

The Australasian Cytometry Society will be canvassing the views of their members and providing feedback to HCA – if you wish to comment on The Position Paper, which can now be downloaded from the HCA website at <http://humancapitalalliance.com.au/projects-and-publications/projects/cert-med-science/>, please email [contact@cytometry.org.au](mailto:contact@cytometry.org.au). While we believe that a consensus response on behalf of ACS members is the best way to achieve traction, you may also submit your individual comments to the HCA contact page on their website.