



21st January 2020

Medical Council of New Zealand
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The Terrace
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Via email: education@mcnz.org.nz

Consultation on proposed fees for the accreditation of New Zealand-based vocational training and recertification providers

Thank you for consulting with the Royal New Zealand College of General Practitioners ('the College') and providing the opportunity for feedback to the Medical Council of New Zealand ('the Council') on the proposed fees for vocational programme accreditation.

The College notes and is broadly supportive of the Council charging a fee for accrediting vocational training programme but proposes that, rather than having a single set fee (\$30,736.71 as suggested), the fee charged should reflect the actual quantum and scope of work required for accreditation. Currently accreditation charges are absorbed through the Council membership fees, so splitting out the accreditation fee as proposed should see a reduction, or at least a freeze in the current annual fees levied to members.

Activity Based Approach:

We believe an activity-based approach to fee setting that is varied based on the work associated with the accreditation process used, will be more equitable and transparent. It will encourage Colleges to maintain high quality standards of delivery and reporting, will encourage an evidence-based self-evaluative approach to accreditation/reaccreditation, and further encourage and maintain a collegial working relationship between Colleges and the Council.

Therefore we suggest that the Council establish a minimum fee for accreditation, that is based on the desk review evaluation process along with associated overheads. We propose that this minimum fee be set at approximately \$15,000 per application. Any fee charged over and above this minimum would be based on the actual costs of any additional processes and resources required to complete the accreditation process and be capped at a maximum of \$30,736.71.

Taking a hybrid approach to the fee setting in this way would recognise that the activity required for accreditation of a new programme versus reaccreditation of an existing programme may differ and that this should be taken into account when determining the fee to be charged. The type of accreditation activity should also be varied based on the differences in activities required to reaccredit an updated programme, a programme that has undergone minor revision, a programme that has undergone major revision or a completely redeveloped programme. Recognising where the existing systems and processes are performing well could enable a reduced or combined fee to be applied.

College and Programme Sustainability:

We urge the Council to consider the potential impacts the proposed fee will have on the provider. Charging a single set fee could impact on the sustainability of the programme in some cases, and result in equity issues where providers need to recover the fee from their members.

From the consultation document, the Council has not provided clarity on whether the fee is for each accredited programme within a similar scope. For the College, we manage the General Practice Education Programme (GPEP) and the Rural Hospital Medicine (RHM) programmes. The two programmes are distinct and are currently accredited separately, with many of the resources, systems and processes used to support the programmes shared across the programmes. The proposed cost of accreditation for the GPEP programme is achievable given its size, but to charge the same accreditation fee for the RHM programme that has substantially smaller registrar numbers would be inequitable, and may impact on the future sustainability of the RHM programme.

Accreditation cycles:

The consultation document is silent on the expected timeframe of an accreditation cycle. Historically the accreditation cycle has varied depending on multiple factors. We understand that it mostly settles around five years. The establishment of the proposed accreditation fee requires the Council to be more transparent regarding the anticipated future accreditation cycle. We appreciate that the cycle can be variable based on the achievement of the programme standard at the time of accreditation, which supports the College's position that an activity based approach to fee setting be established.

If a College has to be reaccredited in a shorter time period than the normal cycle, then the scope of the reaccreditation activity should be taken into account in setting the accreditation costs of the mid cycle review.

Summary:

In applying such a fee, the College suggests that the Council:

1. Ensure that the process for determining and applying the fee is transparent and based on the actual time, resources and time spent to process each individual application. We would encourage the Council to publish its hourly rates for evaluation and to differentiate between the activities that may be carried out as a "desk review" with those that require a site visit.
2. Ensure that the fee charged reflects the type of accreditation being undertaken and is differentiated accordingly. The proven history of a College that has successfully managed their programme for a number of years should be taken into account when undertaking a new programme accreditation or re-accreditation. This would encourage Colleges to provide the Council with comprehensive records that demonstrate quality delivery. We would encourage the Council to require Colleges to use an evidence-based self-evaluative approach to undertake their accreditation applications. Using this approach should reduce the actual time, resources and accreditation process required for further applications (i.e. site visit or desk-based evaluation) which should be charged accordingly.
3. Apply discretion of the fee charged for programmes that have low numbers of trainees. The RHM programme, attracts between 15-20 new registrars each year and has approximately 70 registrars

currently in training. To maintain equitable access to such strategically important training, a reduced fee could be charged.

We believe a fee that can be varied and considers the factors outlined above would provide a fair and equitable solution for the Council and Colleges. This would also result in potential financial incentives for Colleges to submit a comprehensive self-evaluative application supported by robust evidence may benefit by a lower fee being applied due to a reduction in actual time taken to evaluate the application.

Thank you for once again for providing the College with the opportunity to give feedback. We trust that the Council will consider the College's feedback accordingly.

Yours sincerely

Lynne Hayman
Chief Executive

