

Consultation paper

Review of accreditation arrangements for the osteopathy profession

This public consultation paper seeks feedback on the National Board's review of accreditation arrangements for the osteopathy profession.

Please provide any feedback by email to accreditationreview@ahpra.gov.au by 2 November 2012.

Contents

- 1. Preamble.....3**
- 2. History of the assignment and requirement for the review of the accreditation arrangements.....4**
- 3. Scope of the National Board review.....6**
- 4. Consultation process.....6**
- 5. Your submission7**
- 6. Preliminary conclusion of the National Board about whether current arrangements are satisfactory17**

20 September 2012

Accreditation arrangements for the osteopathy profession

1. Preamble

The Health Practitioner Regulation National Law Act as in force in each state and territory (the National Law) requires National Boards to review the arrangements for the exercise of the accreditation functions no later than 30 June 2013.

These arrangements have been in place since before the commencement of the National Law and involve the appointment of an external Accreditation Council for each of the first ten professions to join the National Registration and Accreditation Scheme (the National Scheme) on 1 July 2010¹.

When Health Ministers appointed the first of the Accreditation Authorities, they indicated that the assignment of accreditation functions would be 'subject to the requirement to meet standards and criteria set by the national agency for the establishment, governance and operation of external accreditation bodies'.

The National Law provides that:

- *the National Board..... must decide whether an accreditation function for the health profession for which the Board is established is to be exercised by (a) an external accreditation entity; or (b) a committee established by the Board (s43), and*
- *the National Board must ensure the process for the review includes wide-ranging consultation about the arrangements for the exercise of the accreditation functions (s.253 (5)).*

Given that there are already arrangements in place, the review process will need to begin with an assessment of the way each Accreditation Authority has performed its functions. It will also need to take account of the differences in size of the health professions as well as in the volume and range of accreditation activities undertaken.

Note on terminology

There are a number of words used to describe the accreditation entities that have been appointed to exercise functions under the National Law. The National Law uses the words 'external accreditation entity' and 'accreditation authority', and these words are used in other documents referred to in this paper. However, more commonly these organisations are referred to as Accreditation Councils, and this term is generally used in this paper.

Review principles

The key principles guiding the approach to the review are set out below. The *Quality Framework for the Accreditation Function* (the Quality Framework), which outlines the benchmarks agreed to by the National Boards and Accreditation Authorities, is also a fundamental consideration in the review process.

The key principles include:

- an agreed and transparent process for the review
- an appropriate focus on the current accreditation arrangements
- an agreed cross-profession framework as outlined in this paper with the capacity to take differences between the professions into account

¹ 18 October 2010 in Western Australia

- weighing of relative risks, benefits and costs, and
- evaluation of the suitability of the process for future reviews required under the National Law.

Review process

The review commenced with the National Board writing to the Council inviting them to indicate whether they wished to continue exercising accreditation functions, and if so, to provide a report to the National Board. The National Board has reviewed this report and formed a preliminary view about whether the current arrangements for the accreditation function are satisfactory, taking into account the Board's experience with the Council over the past two years. The Board is consulting about its preliminary view through this consultation paper.

2. History of the assignment and requirement for the review of the accreditation arrangements

Accreditation functions assigned

On 12 December 2008 the Australian Health Ministers' Conference assigned the Accreditation Functions for the Osteopathy Board to the Accreditation Authority for a period of three years, commencing 1 July 2010.

In accordance with an agreement between the Australian Health Practitioner Regulation Agency (AHPRA) on behalf of the Osteopathy Board of Australia and the Australian and New Zealand Osteopathic Council (ANZOC), an agreed amount of funding is paid to ANZOC each year for the provision of the following accreditation functions:

1. Development and review of accreditation standards
 - a. Advice about accreditation standards
 - b. Development of accreditation standards, for programs of study leading to a qualification required for registration or endorsement of registration, including acupuncture, under s 46 of the National Law
 - c. Review of accreditation standards
2. Accreditation of programs of study
 - a. Accrediting programs of study as provided for in section 48 of the *Health Practitioner Regulation National Law Act 2009 (National Law)* as in force in each state and territory (the National Law)
 - b. Monitoring programs of study as provided for in section 50 of the National Law
 - c. Submitting reports on programs of study, including monitoring
 - d. Advising the Osteopathy Board of Australia if the accreditation authority refuses to accredit a program of study
 - e. Providing advice to the Osteopathy Board of Australia about matters relating to accreditation of programs of study as required
3. Competency Assessments
4. Assessment of applicants for registration who have completed an unapproved osteopathy course
5. Assessment of overseas qualified osteopaths
6. Assessment of overseas assessing authorities

Past history of accreditation functions prior to the National Scheme

The former State and Territory Osteopathic Registration Boards established the Australian Osteopathic Council on July 2008. The Osteopathic Council of New Zealand (OCNZ) joined as a member and the name was changed to the Australian and New Zealand Osteopathic Council (ANZOC). ANZOC registered with the Australian Securities and Investments Commission as a company limited by guarantee on 23 February 2010.

Background to accreditation under the National Law

National Boards and accreditation authorities (through the Forum of Australian Health Professions Councils) have developed a document which provides a background to accreditation under the National Law.

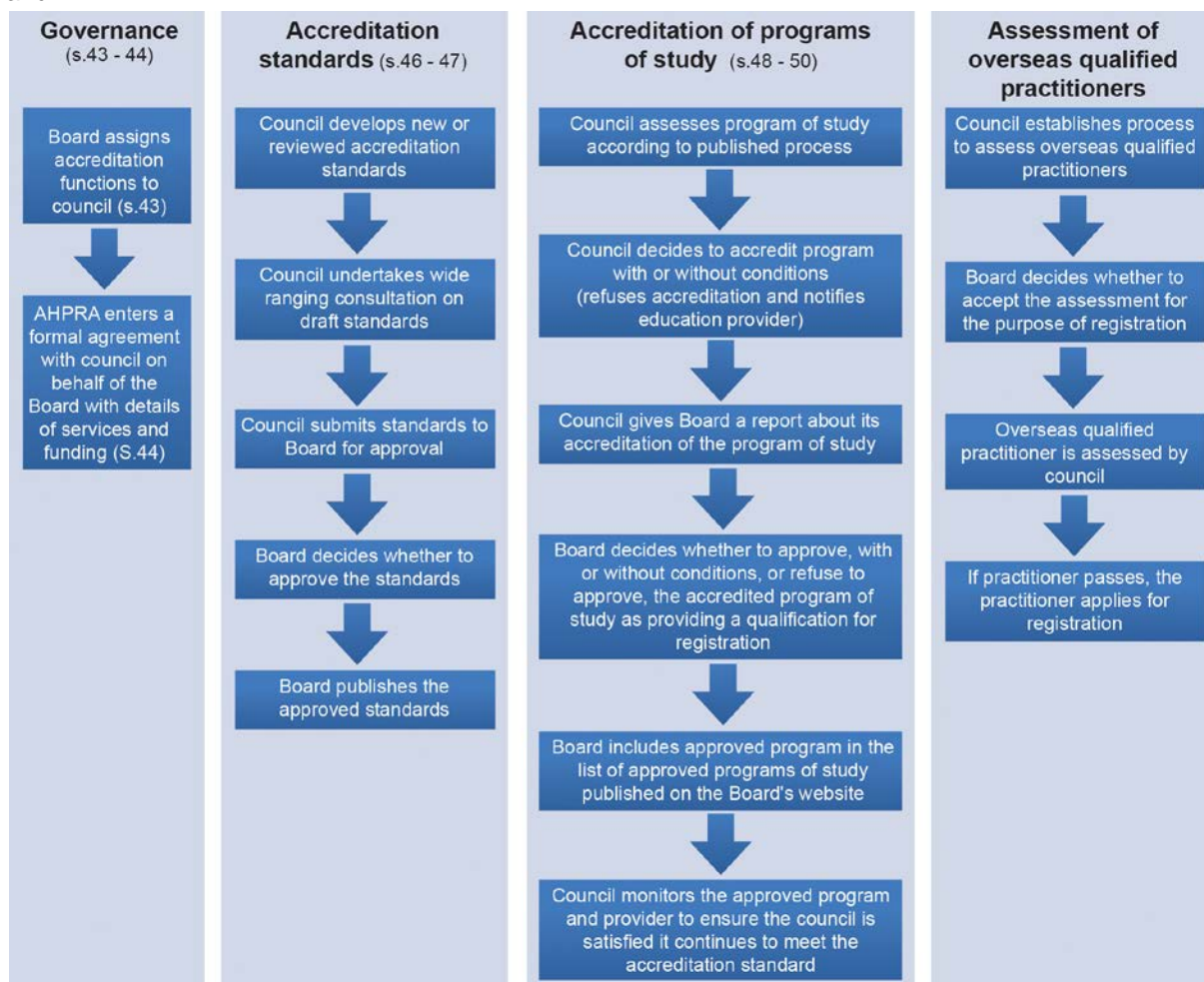
This is available at: www.healthprofessionscouncils.org.au/AHPRA-Reference-Accreditation-under-the-Health-Practitioner-Regulation-National-Law-Act.pdf.

The respective roles of the National Board, Accreditation Council and AHPRA

Section 42 of the National Law defines the accreditation function as:

- (a) developing accreditation standards for approval by a National Board
- (b) assessing programs of study, and the education providers that provide the programs of study, to determine whether the programs meet approved accreditation standards,
- (c) assessing authorities in other countries who conduct examinations for registration in a health profession, or accredit programs of study relevant to registration in a health profession, to decide whether persons who successfully complete the examinations or programs of study conducted or accredited by the authorities have the knowledge, clinical skills and professional attributes necessary to practise the profession in Australia; or
- (d) overseeing the assessment of the knowledge, clinical skills and professional attributes of overseas qualified health practitioners who are seeking registration in a health profession under this Law and whose qualifications are not approved qualifications for the health profession; or
- (e) making recommendations and giving advice to a national board about a matter referred to in paragraph (a), (b), (c) or (d).

The following diagram describes the respective roles of the National Board, Accreditation Council and AHPRA.



3. Scope of the National Board review

Options open to the Board

The following options are open to the Board:

1. continue the existing arrangements of assigning accreditation functions to the Council
2. appoint an alternative external accreditation entity, where an entity with the appropriate skills, expertise and infrastructure exists and is willing to take on the role
3. establish an accreditation committee of the National Board

A combination of some of the above options may also be possible.

4. Consultation process

Making a submission

Section 6 of this consultation paper sets out each domain of the Quality Framework and refers to the evidence that the National Board has considered in forming its view about how the current accreditation arrangements are working. Information provided by the accreditation council describing how it has undertaken the accreditation functions is attached and referenced for each domain.

There are spaces for comments throughout the paper.

To make a submission:

1. complete the attached paper, preferably electronically, using the spaces and tickboxes provided
2. save the document with your name and the word "multi" in the document name and
3. email the document to accreditationreview@ahpra.gov.au by 2 November 2012.

How submissions will be handled

As part of the consultation process, the Board will acknowledge submissions received.

Submissions will generally be published unless you request otherwise. The Board publishes submissions on its website to encourage discussion and inform the community and stakeholders.

However, the Board will not place on its website, or make available to the public, submissions that contain offensive or defamatory comments or which are outside the scope of reference. Before publication, the Board may remove personally-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 Board.

The Board also accepts 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 the Board know if you do not want us to publish your submission, or want us to treat all or part of it as confidential.

However, due to the nature of this review, while there may be a request not to publish a submission publicly, the National Board will provide all submissions to the Accreditation Council.

The National Board may choose to consult with key stakeholders individually in addition to the National Board's broader consultation processes published at <http://www.ahpra.gov.au/Legislation-and-Publications/AHPRA-Publications.aspx>

If you would like further information about any aspects of the consultation process, please contact Dr Cathy Woodward, Executive Officer, Osteopathy Board, at osteoboardconsultation@ahpra.gov.au

5. Your submission

Name of person or organisation making the submission:

Contact person:

Telephone:

Email:

Information about you

❖ Are you responding as a/an (please tick all that apply)

Education provider

Peak professional organisation

Health consumer

Community member

Employer

Government (eg Health Department)

Government agency

Health Workforce Australia

TEQSA

ASQA/State based VET sector regulatory authority

Individual practitioner

Other
–please specify

❖ What experience have you had with the accreditation council? (please tick all that apply)

Education Providers -

The Council has undertaken an accreditation assessment of one or more of our education programs since the introduction of the National Scheme

The Council undertook an accreditation assessment of one or more of our education programs before the introduction of the National Scheme

We are currently planning for, or undergoing, an accreditation assessment on one or more of our education programs

We are new to the accreditation process

We have been through an accreditation process previously with a different accreditation body previously

❖ Stage of accreditation assessment (if you are currently involved in an accreditation process)

Nearing completion

Half way

Just commenced

Intention to apply submitted

Planning and preparation underway

Have sought information or advice from the Council

❖ Overseas qualified practitioner:

Assessment completed

Assessment nearing completion

Assessment just commencing

Have sought information or advice from the Council

❖ Other stakeholders

Have sought information or advice from the Council on other matters

Council has consulted with us/me on Accreditation Standards, policy or individual accreditation assessments

Involved Council activities eg accreditation or assessment processes

Little or no direct engagement with Council

Other –
please specify

Review of Accreditation Council against the Quality Framework for the Accreditation Function

5.1 Governance (Domain 1):

The Accreditation Council effectively governs itself and demonstrates competence and professionalism in the performance of its accreditation role

Attributes

- The Accreditation Council is a legally constituted body and registered as a business entity.
- The Accreditation Council's governance and management structures give priority to its accreditation function relative to other activities (or relative to its importance).
- The Accreditation Council is able to demonstrate business stability, including financial viability.
- The Accreditation Council's accounts meet relevant Australian accounting and financial reporting standards.
- There is a transparent process for selection of the governing body.
- The Accreditation Council's governance arrangements provide for input from stakeholders including input from the community, education providers and the profession/s.
- The Accreditation Council's governance arrangements comply with the National Law and other applicable legislative requirements.

Governance – Accreditation Council submission

The evidence that the Board has taken into account in forming its preliminary view about governance is primarily at pages 6 to 7 of the report from the Council published on the Board's website at www.osteopathyboard.gov.au.

❖ Comments

5.2 Independence (Domain 2):

The Accreditation Council carries out its accreditation operations independently

Attributes

- Decision making processes are independent and there is no evidence that any area of the community, including government, higher education institutions, business, industry and professional associations - has undue influence.
- There are clear procedures for identifying and managing conflicts of interest.

Independence – Accreditation Council submission

The evidence that the Board has taken into account in forming its preliminary view about independence is primarily at page 8 of the report from the Council published on the Board's website at www.osteopathyboard.gov.au.

❖ Comments

5.3 Operational Management (Domain 3):

The Accreditation Council effectively manages its resources to carry out its accreditation function

Attributes

- The Accreditation Council manages the human and financial resources to achieve objectives in relation to its accreditation function.
- There are effective systems for monitoring and improving the authority's accreditation processes, and identification and management of risk.
- The authority can operate efficiently and effectively nationally.
- There are robust systems for managing information and contemporaneous records, including ensuring confidentiality.
- In setting its fee structures, the Accreditation Council balances the requirements of the principles of the National Law and efficient business processes.

Operational management – Accreditation Council submission

The evidence that the Board has taken into account in forming its preliminary view about operational management is primarily at pages 9 to 10 of the report from the Council published on the Board's website at www.osteopathyboard.gov.au.

❖ Comments

5.4 Accreditation standards (Domain 4):

The Accreditation Council develops accreditation standards for the assessment of programs of study and education providers

Attributes

- Standards meet relevant Australian and international benchmarks.
- Standards are based on the available research and evidence base.
- Stakeholders are involved in the development and review of standards and there is wide ranging consultation.
- The Accreditation Council reviews the standards regularly.
- In reviewing and developing standards, the Accreditation Council takes account of AHPRA's Procedures for Development of Accreditation Standards and the National Law.

Accreditation standards - Accreditation Council submission

The evidence that the Board has taken into account in forming its preliminary view about accreditation standards is primarily at pages 11 to 12 of the report from the Council published on the Board's website at www.osteopathyboard.gov.au.

❖ Comments

5.5 Processes for accreditation of programs of study and education providers (Domain 5):

The Accreditation Council applies the approved accreditation standards and has rigorous, fair and consistent processes for accrediting programs of study and their education providers

Attributes

- The Accreditation Council ensures documentation on the accreditation standards and the procedures for assessment are publicly available.
- The Accreditation Council has policies on the selection, appointment, training and performance review of assessment team members. Its policies provide for the use of competent persons who are qualified by their skills, knowledge and experience to assess professional programs of study and their providers against the accreditation standards.
- There are procedures for identifying, managing and recording conflicts of interest in the work of accreditation assessment teams and working committees.
- The Accreditation Council follows documented processes for decision-making and reporting that comply with the National Law and enable decisions to be made free from undue influence by any interested party.
- Accreditation processes facilitate continuing quality improvement in programs of study by the responsible education provider.
- There is a cyclical accreditation process with regular assessment of accredited education providers and their programs to ensure continuing compliance with standards.
- The Accreditation Council has defined the changes to programs and to providers that may affect the accreditation status, how the education provider reports on these changes and how these changes are assessed.
- There are published complaints, review and appeals processes which are rigorous, fair and responsive.

Processes for accreditation of programs of study and education providers – Accreditation Council submission

The evidence that the Board has taken into account in forming its preliminary view about processes for accreditation of programs of study and education providers is primarily at pages 13 to 15 of the report from the Council published on the Board's website at www.osteopathyboard.gov.au; and is also based on the experience of the National Board in receiving accreditation reports for the accreditation decisions reported to the Board in the period 1 July 2010 to 1 August 2012.

❖ Comments

5.6 Assessing authorities in other countries (than Australia) (Domain 6):

Where this function is exercised by the Accreditation Council, the authority has defined standards and procedures to assess examining and/or accrediting authorities in other countries

Attributes

- The assessment standards aim to determine whether these authorities' processes result in practitioners who have the knowledge, clinical skills and professional attributes necessary to practice in the equivalent profession in Australia.
- Stakeholders are involved in the development and review of standards and there is wide ranging consultation.
- The procedures for initiating consideration of the standards and procedures of authorities in other countries are defined and documented.
- There is a cyclical assessment process to ensure recognised authorities in other countries continue to meet the defined standards.
- The Accreditation Council follows documented systems for decision-making and reporting that enable decisions to be made free from undue influence by any interested party.
- There are published complaints, review and appeals processes which are rigorous, fair and responsive.

Assessing authorities in other countries (than Australia) – Accreditation Council submission

The evidence that the Board has taken into account in forming its preliminary view about assessing authorities in other countries is primarily at pages 16 to 17 of the report from the Council published on the Board's website at www.osteopathyboard.gov.au.

❖ Comments

5.7 Assessing overseas qualified practitioners (Domain 7):

Where this function is exercised by the Accreditation Council, the authority has processes to assess and/or oversee the assessment of the knowledge, clinical skills and professional attributes of overseas qualified practitioners who are seeking registration in the profession under the National Law and whose qualifications are not approved qualifications under the National Law for the profession

Attributes

- The assessment standards define the required knowledge, clinical skills and professional attributes necessary to practise the profession in Australia.
- The key assessment criteria, including assessment objectives and standards, are documented.
- The Accreditation Council uses a recognised standard setting process and monitors the overall performance of the assessment.
- The procedures for applying for assessment are defined and published.
- The Accreditation Council publishes information that describes the structure of the examination and components of the assessments.
- The Accreditation Council has policies on the selection, appointment, training and performance review of assessors. Its policies provide for the use of competent persons who are qualified by their skills, knowledge and experience to assess overseas qualified practitioners.
- There are published complaints, review and appeals processes which are rigorous, fair and responsive.

Assessing overseas qualified practitioners – Accreditation Council submission

The evidence that the Board has taken into account in forming its preliminary view about assessing overseas qualified practitioners is primarily at pages 18 to 20 of the report from the Council published on the Board's website at www.osteopathyboard.gov.au.

❖ Comments

5.8 Stakeholder collaboration (Domain 8):

The Accreditation Council works to build stakeholder support and collaborates with other national, international and/or professional accreditation authorities

Attributes

- There are processes for engaging with stakeholders, including governments, education institutions, health professional organisations, health providers, national boards and consumers/community.
- There is a communications strategy, including a website providing information about the Accreditation Council's roles, functions and procedures.
- The Accreditation Council collaborates with other national and international accreditation organisations.
- The Accreditation Council collaborates with accreditation authorities for the other registered health professions appointed under the National Law.
- The Accreditation Council works within overarching national and international structures of quality assurance/accreditation.

Stakeholder collaboration - Accreditation Council submission

The evidence that the Board has taken into account in forming its preliminary view about stakeholder collaboration is primarily at pages 21 to 22 of the report from the Council published on the Board's website at www.osteopathyboard.gov.au.

❖ Comments

6. Preliminary conclusion of the National Board about whether current arrangements are satisfactory

The National Board has undertaken a preliminary review of the current arrangements, including an analysis of risks, benefits and costs. The review was based on the submission provided by the Australian and New Zealand Osteopathic Council against the Quality Framework for the Accreditation Function as referenced in section 5 above and the Board's experience working with the Council over the last two years.

Proposed decision of the National Board based on a preliminary review of current arrangements including analysis of risks, benefits and costs

Based on its preliminary review, the view of the National Board is to continue the current arrangements of exercising accreditation functions through the Australia and New Zealand Osteopathic Council.

❖ To what extent are you in agreement with the preliminary view of the Board?

Strongly disagree

Strongly agree

❖ Please provide comments about the Board's preliminary view