



# Protocol for the review and development of accreditation standards

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# Background

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## Australian Osteopathic Accreditation Council

The Australian Osteopathic Accreditation Council (AOAC) is the independent organisation to assess and accredit osteopathic education programs leading to eligibility for registration as an osteopath in Australia. AOAC also assesses the suitability of overseas qualified osteopaths to practice in Australia.

Under the National Registration and Accreditation Scheme, AOAC is the appointed accrediting authority for osteopathy in Australia in accordance with the *Health Practitioner Regulation National Law Act 2009*.

AOAC helps protect the health and safety of the Australian community by establishing high-quality standards of osteopathy education and assessment.

AOAC facilitates the development of accreditation standards in consultation with our stakeholders and professional representatives. AOAC is also responsible for determining whether programs of study for osteopaths seeking to practice in Australia meet required accreditation standards.

## Legislative and regulatory context

The *Health Practitioner Regulation National Law Act 2009* (the National Law) establishes a national registration and accreditation scheme for health practitioners. It was successively passed in states and territories to commence on 1 July 2010.

The National Registration and Accreditation Scheme was established by intergovernmental agreement on 26 March 2008. It provides for a single national registration board and a single national accreditation function for each of the 10 health professions that joined the scheme in July 2010. The scheme's intention is to better deal with workforce shortages and/or pressures faced by Australia's health workforce. It also aims to increase the flexibility, responsiveness, sustainability and mobility of the health workforce, and reduce red tape.

Under Section 49(1) of the National Law, graduates of programs of study are not eligible for registration or endorsement unless their program of study is accredited by AOAC and approved by the Osteopathy Board of Australia (OBA). This is part of a broader process of assuring the community that, having completed an accredited program of study, beginning professional practitioners have achieved agreed professional outcomes and are able to practise in a safe and competent manner. This means they are equipped with the necessary foundation knowledge, professional attitudes and essential skills.

Section 42(a) of the National Law describes the accreditation function of appointed accreditation authorities as:

- a. Developing accreditation standards for approval by a National Board.

Reviewing and developing accreditation standards involves considering the purpose of professional education accreditation. This is concerned with the quality of the profession and its work, from the perspective of public interest and community safety.

This process relies on these two fundamental principles on which the accreditation standards framework is built:

1. education providers themselves are authorised to issue the relevant qualification and evaluated to assure continued quality learning outcomes for their graduates (Tertiary Education and Quality Standards Agency; Australian Qualification Framework)
2. a set of agreed and contemporary standards for practice exists against which the capability of intending graduates of entry to practice programs can be assessed (Osteopathy Board of Australia, Capabilities for osteopathic practice).

Accreditors of health practitioner programs of study must ensure professional standards are protected without inhibiting diversity and innovation or constraining continuous quality improvement. AOAC must observe the 'Procedures for the development of accreditation standards' (Appendix 1) as determined by the Australian Health Practitioner Regulation Agency under Section 25 of the National Law. In line with Section 46(2), AOAC must ensure wide-ranging consultation on the content of new or revised standards.

As an accreditation authority, AOAC must submit the accreditation standards it develops to the OBA for approval. Section 11 of the National Law permits the Australian Workforce Ministerial Council to give direction to the OBA about the policies it applies for this approval but only if proposed standards are considered to have a substantive and negative impact on the recruitment or supply of health practitioners. In issuing such direction, the Council must consider the potential impact on quality or safety of health care.

# Review of accreditation standards

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The 'Protocol for the review and development of accreditation standards' (the Protocol) details AOAC's consultation procedures for upholding the Council of Australian Governments' principles for best practice regulation (continuity, targeting, appropriate timeliness, accessibility, transparency, consistency and flexibility, evaluation and review).

The review and development process for accreditation standards must consider the objectives and guiding principles in the National Law. In particular, the following objectives of the national registration and accreditation scheme:

- a. to provide for the protection of the public by ensuring that only health practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered
- b. to facilitate the provision of high- quality education and training of health practitioners
- c. to enable the continuous development of a flexible, responsive and sustainable Australian health workforce and to enable innovation in the education of, and service delivery by, health practitioners.

The review and development of accreditation standards must align with the guiding principles of the National Registration and Accreditation Scheme, which is to operate in a transparent, accountable, efficient, effective, and fair way.

## Development and review process

AOAC's review process ensures that stakeholder feedback and expert opinion is sought and that relevant national or international benchmarks and the best available evidence is used in developing standards. The iterative process for stakeholder consultation gives AOAC an opportunity to:

1. validate whether revised accreditation standards are accurate and relevant for a contemporary Australian health care system and education environment
2. evaluate whether the expectations on education providers to meet the revised standard are reasonable in terms of benefits and burdens.

Stakeholder-identified benefits and burdens are considered by the Office of Best Practice Regulation during its preliminary assessment of the revised standards for their regulatory impact. A robust review process is essential for AOAC to assure the OBA and the community that a graduate of an accredited osteopathy program is eligible for registration and can practice in a safe and competent manner.

## Aim of accreditation standards review

The review aims to revise accreditation standards, so they are:

- contemporary and aligned with emerging research, policy and relevant industry guidance

- able to ensure that osteopaths are suitably educated and qualified to practise in a competent and ethical manner to the required OBA Capabilities for practice
- acceptable to the profession and relevant stakeholders
- able to support continuous development of a flexible, responsive and sustainable Australian health workforce
- supportive of innovation in the education of health practitioners
- acceptable to the community in supporting safe, accessible, quality care
- supportive of recruitment and supply of osteopathy workforce.

### Stages of the accreditation review and development process

Stage	AOAC task	Purpose
1	Establish a Professional Reference Group (PRG) who report to the AOAC Accreditation Committee	Comprises key stakeholders responsible for providing advice, understanding and having knowledge of key issues likely to affect the review and development of the accreditation standards. Responsible for analysing stakeholder feedback and responses to feedback.
2	Undertake a scoping survey	Distribute a scoping survey to identify any key issues for practitioners and stakeholders
3	Develop consultation paper 1	Describes context of and framework for the review and development of the accreditation standards. Evaluates current accreditation standards and identifies key issues to consider in the review and development of the accreditation standards.
4	Stakeholder consultation	Engage stakeholders to provide feedback on consultation paper 1.
5	Develop consultation paper 2	Provides initial draft of accreditation standards, taking into consideration feedback from the first stage of consultation. Explores outstanding issues identified by the PRG and stakeholder feedback from the first stage of consultation.
6	Stakeholder consultation	Engage stakeholders to provide feedback on consultation paper 2.
7	Develop final draft of accreditation standards	Provides final draft of accreditation standards, taking into consideration feedback from second consultation stage.
8	Submit final accreditation standards to the AOAC Accreditation Committee	Conduct final check to ensure integrity of standards and explain the differences and changes made in the revised standards before submitting to the AOAC Board for approval.
9	Submit final accreditation standards to the AOAC Board	Conduct final check to ensure integrity of standards and explain the differences and

Stage	AOAC task	Purpose
		changes made in the revised standards before submitting to the OBA for approval.
10	Submit to the OBA for final approval	Seek approval of accreditation standards as required by the National Law.
11	Launch revised standards approved by the OBA	Inform stakeholders that the accreditation standards have been approved by the OBA and released by AOAC.  Evaluate review and development process with the PRG and stakeholders that participated in the consultation.

### Professional Reference Group

AOAC convenes Professional Reference Group (PRG) to guide the process and oversee project planning, document development, stakeholder engagement and feedback synthesis.

The PRG makes recommendations to the AOAC Accreditation Committee based on its understanding and knowledge of key issues likely to affect the review and development of accreditation standards.

PRG membership reflects the diversity of stakeholders affected by the review and the development of osteopathy accreditation standards. Membership includes representatives covering the interests of consumer advocacy, clinical practice, higher education, health service delivery and management, regulation, industrial matters and Aboriginal and Torres Strait Islander peoples.

The role of the PRG is outlined in the AOAC PRG Policy and Terms of Reference

### Consultation paper 1

Consultation paper 1 is developed to provide stakeholders with an opportunity to ask questions, discuss and consider key issues and current accreditation standards. It covers the background, context, purpose and processes of the review. It also evaluates current accreditation standards and addresses key issues in education and health policy pertinent to their revision.

The PRG develops the first consultation by:

1. conducting a literature review to check the evidence base (for example, the inclusion of research in the undergraduate curriculum).
2. reviewing Tertiary Education and Quality Standards Agency; course accreditation standards
3. evaluating how issues are handled by accrediting agencies nationally (other health professions) and internationally (Osteopaths)
4. identifying key issues for stakeholder consultation.

### Stakeholder consultation

Stakeholder consultation is based on the content of consultation papers and accompanying questions.

AOAC Accreditation Committee and the PRG identify stakeholders to invite to provide feedback on consultation papers. AOAC asks stakeholders to disseminate the consultation papers among their own networks to achieve wide-ranging consultation.

Stakeholders can provide feedback by written submission or through an online survey. These forms of engagement are deemed to be the most appropriate, cost-effective and efficient way to collect feedback. The consultation periods are open for 30 business days.

Written submission	Online survey
<p>a. must include the stakeholder’s name, phone number and email address</p> <p>b. you are requested to respond to the individual questions and not provide a general response</p> <p>c. can be emailed to: standardsreview@osteopathiccouncil.org.au or addressed to: Standards Review Australian Osteopathic Accreditation Council GPO Box 400 Canberra ACT 2601</p> <p>d. will be formally acknowledged by AOAC on receipt.</p>	

To invite and encourage participation in consultations, an alert is put up on AOAC’s website (homepage) with a link to consultation information.

In the interest of transparency, all written submissions are published on AOAC’s website, unless a stakeholder has asked for confidentiality.

A summary of survey results is also published on the website.

The PRG provides a general response to the stakeholder feedback received in each consultation round. This response is published on AOAC’s website.

### Consultation paper 2

After feedback is collated and synthesised by the PRG, consultation paper 2 is developed. This paper contains a progress report on the revision of the standards, a synopsis of issues needing further input or discussion, and the first draft of the accreditation standards.

The PRG develops consultation paper 2, which contains:

1. stakeholder feedback
2. further research on outstanding issues
3. details of outstanding issues needing further consideration by the PRG and stakeholders
4. consideration of how outstanding issues are handled by accrediting agencies nationally (other health professionals) and internationally (osteopaths)
5. draft accreditation standards.



Accompanying consultation paper 2 are questions on the content and structure of the draft standards as well as outstanding issues identified in the first consultation.

#### **Final draft of accreditation standards**

Following the second consultation round, AOAC and the PRG develop the final draft of the accreditation standards. The final draft incorporates refinements or amendments the Accreditation Committee and the PRG proposes after considering consultation feedback.

#### **Submit final accreditation standards to the AOAC Accreditation Committee**

The PRG submits the accreditation standards to the Accreditation Committee for final review before recommending to the AOAC Board for approval to submit to the OBA for consideration. The AOAC Accreditation Committee proposed any further changes to the accreditation standards. If the AOAC Accreditation Committee asks for another opportunity to review changes, the accreditation standards can be distributed for approval out of session to submit to the AOAC Board.

#### **Submit final accreditation standards to the AOAC Board**

AOAC submits the accreditation standards to the AOAC Board with the updated mapping document and a draft covering letter to the OBA summarising key changes.

The AOAC Board proposed any further changes to the accreditation standards and, where necessary, asks the Accreditation Committee and the PRG for advice and/or a decision.

If the AOAC Board asks for another opportunity to review changes, the accreditation standards can be distributed for approval out of session.

The accreditation standards are submitted to a professional editor for a plain English review, readability and formatting.

#### **Submit to Osteopathy Board of Australia for final approval**

While AOAC is responsible for developing accreditation standards, the OBA is responsible for approving them under Section 47 of the National Law.

AOAC formally submits the edited revised standards and accompanying mapping document to the OBA for approval, along with a covering letter. The OBA has the right to ask for further amendments or revisions, especially with concerns over potential impact on workforce supply.

#### **Launch revised standards approved by Osteopathy Board of Australia**

After AOAC receives approval from the OBA, AOAC develops and implements a communication plan to launch the revised accreditation standards.

Resources for the launch include:

- published accreditation standards
- frequently asked questions.

Correspondence on the launch is sent to all stakeholders involved in the review and development of the accreditation standards.

The review and development process of the accreditation standards is evaluated using an online survey.

# Appendix 1

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## Procedures for the development of accreditation standards

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*Under section 25 of the Health Practitioner Regulation National Law as in force in each state and territory (the National Law), one of the functions of the Australian Health Practitioner Regulation Agency is: 'to establish procedures for the development of accreditation standards, registration standards and codes and guidelines approved by National Boards, for the purpose of ensuring that the national registration and accreditation scheme operates in accordance with good regulatory practice'.*

### **Procedures for the development of accreditation standards**

In putting forward a proposal for a new or amended accreditation standard, an accreditation authority must be satisfied that the proposal:

1. takes into account the objectives and guiding principles in the National Law, in particular a), c) and f) of the objectives and a) of the guiding principles. The objectives and guiding principles set out in the National Law at Section 3 (2) and (3) read as follows:

'The objectives of the national registration and accreditation scheme are—

- (a) to provide for the protection of the public by ensuring that only health practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered; and
- (b) to facilitate workplace mobility across Australia by reducing the administrative burden for health practitioners wishing to move between participating jurisdictions or to practise in more than one participating jurisdiction; and
- (c) to facilitate the provision of high quality education and training of health practitioners; and
- (d) to facilitate the rigorous and responsive assessment of overseas-trained health practitioners; and
- (e) to facilitate access to services provided by health practitioners in accordance with the public interest; and
- (f) to enable the continuous development of a flexible, responsive and sustainable Australian health workforce and to enable innovation in the education of, and service delivery by, health practitioners.'

'The guiding principles of the national registration and accreditation scheme are as follows—

- (a) the scheme is to operate in a transparent, accountable, efficient, effective and fair way;
- (b) fees required to be paid under the scheme are to be reasonable having regard to the efficient and effective operation of the scheme;
- (c) restrictions on the practice of a health profession are to be imposed under the scheme only if it is necessary to ensure health services are provided safely and are of an appropriate quality.'

Australian Health Practitioner Regulation Agency  
G.P.O. Box 9958 | Melbourne VIC 3001 | [www.ahpra.gov.au](http://www.ahpra.gov.au)

2. meets the consultation requirements in the National Law, namely:

'In developing an accreditation standard for a health profession, an accreditation authority must undertake wide-ranging consultation about the content of the standard.' (Section 46(2))

Accreditation authorities should consult fully on any significant change to standards, or on new standards. The education sector, relevant profession, and governments should be consulted as a minimum, and proposed changes should also be published on the authority's website at the commencement of a consultation process.

3. takes account of relevant international standards and statements relating to education and training in the profession, and the accreditation standards applied in countries with comparable education and practice standards for the profession, and
4. takes into account the [COAG Principles for Best Practice Regulation](#) by considering the following matters:
  - a. whether the proposal is the best option for achieving the proposal's stated purpose and protection of the public
  - b. whether the proposal results in an unnecessary restriction of competition among health practitioners
  - c. whether the proposal results in an unnecessary restriction of consumer choice
  - d. whether the overall costs of the proposal to members of the public and/or registrants and/or governments are reasonable in relation to the benefits to be achieved
  - e. whether the proposal's requirements are clearly stated using 'plain language' to reduce uncertainty, enable the public to understand the requirements, and enable understanding and compliance by registrants, and
  - f. whether the Board has procedures in place to ensure that the proposed standard remains relevant and effective over time.

#### **Development, consultation, and recommendation by an accreditation authority**

Accreditation authorities must make an assessment of proposed new or amended standards against the COAG principles expressed above. This assessment should be made publicly available including during the consultation process.

It is recommended that the accreditation authority contacts the Office of Best Practice Regulation (the OBPR) at preliminary consultation (and at a later stage/s if requested by OBPR) to seek advice about the regulatory impact of the proposal and whether it is necessary to do a regulatory impact statement (RIS).

Accreditation authorities will provide to the relevant National Board any feedback on regulatory impacts (including advice on the assessment by the OBPR) that has been provided in the consultation process or identified in developing the new or revised accreditation standard. This is to be done when the accreditation authority submits its recommended new or amended accreditation standard to the relevant National Board for approval.

#### **Decision by National Boards**

Section 11 of the National Law provides that the Ministerial Council may give directions to a National Board about the policies to be applied by the National Board in exercising its functions under the National Law.

A Ministerial Council direction may relate to matters including a particular proposed accreditation standard, or a particular proposed amendment of an accreditation standard, for a health profession.

However, the Ministerial Council may give a National Board a direction in relation to an accreditation standard or proposed amendment of an accreditation standard only if:

- (a) in the Ministerial Council's opinion, the proposed accreditation standard or amendment will have a substantive and negative impact on the recruitment or supply of health practitioners, and
- (b) the Ministerial Council has first given consideration to the potential impact of the Ministerial Council's direction on the quality and safety of health care.

When a National Board considers, based on the accreditation authority's advice or its own analysis, that the proposed accreditation standard or amendment will have a substantive and negative impact on the recruitment or supply of health practitioners, the National Board will advise the Ministerial Council of its view and the reasons for it so that the Ministerial Council can consider whether any action is required under s.11(4) of the National Law.

The National Board will not make a decision to approve (or not approve) the new or amended accreditation standard until the Ministerial Council provides its view to the Board.



**Michael Gorton AM**  
Chair  
Agency Management Committee

**Date of issue:** 6 November 2014

**Date of review:** These procedures will be reviewed from time to time as required. This will generally be at least every 3 years.