

*OIA Education Session September 2017*  
**Outcome-based Accreditation Standards**

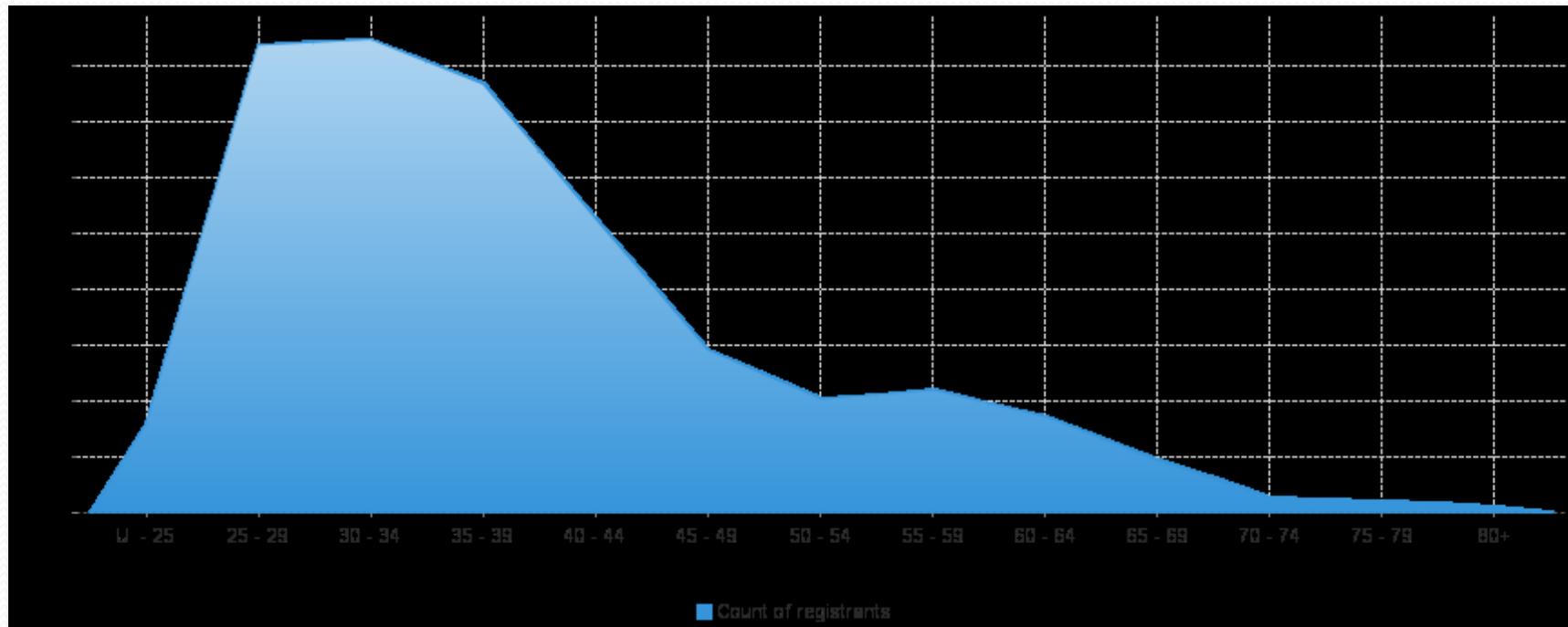




## The Australasian Osteopathic Accreditation Council

- AOAC is a small independent company, registered under the Corporations Act 2001.
- AOAC oversees education of osteopaths in Australia by:
  - Developing, reviewing and maintaining accreditation standards and processes to assess osteopathic programs.
  - Assessing education programs leading to eligibility for registration as an osteopath and accrediting them
  - Assessing overseas authorities for equivalence
- AOAC also assesses the suitability of overseas-trained osteopaths to practise in Australia, and conducts competency assessments of Australian osteopaths.

# Age profile of osteopaths



# Accreditation

Successful accreditation depends upon maintaining robust, respectful and productive relationships between the accrediting authority, education providers and regulators.

# Accreditation Standards 2016

- 2015 Review and process
- Contextual – relate to current political, professional and educational environment in Australia & beyond
- Compatible with general Australian higher education accreditation standards and processes
- Consistent with international accreditation principles
- Continued promotion of education environments in which teaching and clinical practice is informed by and engaged with scholarship and research



# Accreditation Standards 2016

- Focus on outcomes
  - Allows for flexibility and innovation
  - Relies on dialogue with providers, ongoing monitoring
  - National consensus on direction of osteopathic education

## Accreditation Standards: Education provider

- Education provider registration and standing
  - Meets tertiary education standards and provides documentary evidence
- Programme accreditation
  - Programme accreditation by higher education regulator within the AQF
- Resource allocation
  - Specialised resources
  - Staffing (number and quality)
  - Clinical placements
  - Mechanisms to monitor program delivery

## Accreditation Standards: Scholarship and Research

- Program reflects current osteopathic knowledge
  - Study of underlying theoretical and conceptual frameworks of osteopathy and related fields
  - Informed by recent scholarship and current research
- Learning and teaching is informed by up-to-date evidence
- Students have deep understanding of the importance of using evidence to inform clinical practice and skills to identify, critically evaluate, interpret and integrate evidence into their clinical practice.

## Accreditation Standards: Learning Outcomes

- Designed to achieve capabilities expected for registration
- Appropriate delivery methods for stage of learning
- Evidence of proportion of face-to-face learning and self-directed study etc
- Integration and clear articulation of cultural competence
- Must lead to award of qualification at AQF Level 7 or higher

## Accreditation Standards: Osteopathic Curriculum

- **Clinical Content**
  - Adequate, appropriate and monitored
  - Clinics well-equipped, well managed, appropriately staffed
  - Skilled clinical supervisors
  - Patient group with broad range of health problems
- **Clinical education**
  - Provides extensive clinical experience in screening, diagnosis, treatment and management for range of pts
  - Develops graduates able to meet the capabilities required for osteopathic practice/registration

## Accreditation Standards: Assessment

- Range of formative and summative assessment methods with clear mapping of assessments against learning outcomes and capabilities for osteopathic practice
- Fair, valid and reliable assessment methodology and appropriate assessors
- Internal and external moderation that benchmarks with other education providers
- Student assessment profiles demonstrate that graduates meet the capabilities required for safe, inter-professional, innovative and evolving osteopathic practice.

# Issues: providers

- Changing/broadening paradigms of osteopathic practice and implications for education
  - Traditional 'craft' knowledge & skills co-existing with evidence-informed/scientific/intellectual
- Shortage of, difficulty in recruiting, qualified teaching staff
- Access to range of clinical experience
  - 1929 students: 2300 registered practitioners!
- Resource allocation to program within university
  - Student/staff ratios
  - Investment in skills laboratories etc
- Small number of programs limits external moderation and benchmarking

# Issues: accreditation

- What should be taught?
  - Generalist versus specialisms – scopes of practice
- Impacts of small scale
  - Infrequency of accreditation events
  - Access to resources
- Challenge of outcome based standards
  - Increase ongoing monitoring
  - Clear definition of expectations of beginning practitioner
- Flexibility
  - Level and length of program

# Strategic education forum 2016

- Good faith relationships
- Definitive program documents lodged with AOAC
  - Changes within agreed limits expected of and taken by providers within their institutional policy framework
  - Digest of changes added annually
- “Relationship manager” for each institution?
- Annual visit by RM
- Self-assessment key element of re-accreditation

# Points, possibilities, to ponder...

“Wisdom comes from experience. Experience is often a result of lack of wisdom.”

Terry Pratchett

# Points, possibilities, to ponder...

- Outcomes-based accreditation will
  - Require deep reporting of assessments, and thus
  - Appropriate expertise in reviewing and analysing assessments
  - Be – probably – more retrospective and thus entail
  - Satisfaction surveys: employers, graduates, patients?
  - Promote diversity of types of graduate, within expected capabilities

# Concerns

- “Are ‘outcomes’ measurable, reliable, controllable?”
- *But – were ‘content and process’ any more reliable and controllable?*
- How “minimally competent“ must new graduates be?
- *How will the balance between pre-registration and continuing education evolve?*
- What will be the impact of these changes on the osteopathic profession, and on osteopathic practice?
- *Who will take a lead role in responding?*
- How ‘retrospective’ can these systems be? Should accreditation agencies have the right to see details of disciplinary processes?



“Capable clinicians need to be able to integrate and apply multiple competencies, not just in familiar and focused settings, but in novel, complex and changing circumstances.”

“Foundation doctors quickly get out of their depth when working in complex settings.”

*Neve & Hanks, Medical Education 2016: 50: 610–611*



“The trouble with having an open mind, of course, is that people will insist on coming along and trying to put things in it.”

Terry Pratchett

# Independent Review of Accreditation Systems

**The Accreditation Systems Review will provide advice to AHMAC on the effectiveness of the accreditation system in order to ensure that the educational programs provide a sustainable registered health profession workforce that is flexible and responsive to the changing health needs of the Australian community.**

- **The terms of reference for this review include:**
  - **cost effectiveness of the regime for delivering the accreditation functions**
  - **governance structures including reporting arrangements**
  - **opportunities for the streamlining of accreditation including consideration of the other educational accreditation processes**
  - **the extent to which accreditation arrangements support educational innovation**
  - **opportunities for increasing consistency and collaboration across professions.**
- **The review will be completed by the end of 2017.**

# Independent Review of Accreditation Systems

- Draft report issued 4 September.
- Key recommendations:
  - Improving efficiency and effectiveness
  - Relevance and responsiveness
  - The importance of consumers
  - Reforming governance as an enabler of change:  
Establish integrated accreditation governance.

# Independent Review of Accreditation Systems

- Draft report issued 4 September.
- Key recommendations:
- Improving efficiency and effectiveness
  - “There are elements within comparator international regulatory systems which can inform improvements in Australia and they need to be addressed in a continuous cycle of improvement and review.
  - Assessment of the cost effectiveness of the National Scheme can only be achieved once there is a consistent and transparent funding and accounting framework.”

# Independent Review of Accreditation Systems: Key recommendations

- Relevance and responsiveness:
  - *Adoption of outcome-based approaches for accreditation standards.*
  - Encouragement of innovative use of technological and pedagogical advances, such as simulation-based education and training and... a common, cross-professional approach to the inclusion of inter-professional education as a mandatory requirement
  - A requirement that clinical placements to occur in a variety of settings...
  - Adoption of a common approach to the development of domains and learning outcomes for competency standards for professions that ensures relevance to contemporary health care needs.

# Conclusions

- The advantages of scale
- Communities of practice
  - National USA: 33 COMs, 48 campuses
  - International