



**Updating accreditation standards for education
programmes leading to registration as an osteopath**

Consultation document

August 2021

Overview

The Osteopathic Council New Zealand (OCNZ) is a Health Regulatory Authority established under the Health Practitioners Competence Assurance Act 2003 (the Act). The OCNZ's accreditation function under Section 118 (a) of the Act is:

to prescribe the qualifications required for scopes of practice within the profession, and, for that purpose, to accredit and monitor educational institutions and degrees, courses of studies, or programmes.

Accreditation standards are used to assess whether a programme of study and the education provider delivering the programme provide graduates with the knowledge, skills and professional attributes necessary to practise the profession in a competent and ethical manner. All programmes and education providers accredited by OCNZ are assessed and monitored against these accreditation standards.

The accreditation standards identify the minimum expected requirements and are designed to be read as an integrated whole. They are reviewed on a five-year cycle to ensure continuing public safety and were last revised in July 2017.

The OCNZ is seeking feedback on its draft accreditation standards developed in this review process.

Review process

Stage 1: Analysis of national and international trends

International osteopathic education policies and standards, and accreditation standards used by relevant health professions in New Zealand and Australia, were analysed to identify current trends applicable to New Zealand osteopathic education.

Osteopathic education: International search

The international search covered North America, Europe, the UK and Australia. It included the strategic involvement of the World Health Organisation (WHO) in osteopathic education and the combined effort of European countries towards standardisation. This is a response to the broad variation in programmes, the increase in globalisation of education and professional mobility and the resulting need to have a more reliable way to recognise qualifications across countries.^(1, 2, 3) The most relevant documents were from Australia.^(4, 5, 6)

Health professional education: New Zealand and Australia

The search of New Zealand and Australian education standards for other health professions provided a general context of health education standards. The search included nursing, medicine, dentistry, occupational therapy and physiotherapy. The most relevant documents were from nursing, physiotherapy and dentistry.^(7, 8, 9, 10, 11, 12, 13)

Analysis: Trends

Comparison of WHO, European and UK documents with those from Australia and New Zealand indicated a marked shift away from a focus on course content and outcomes to more strategically-focused accreditation standards in the second group.

A high degree of cross-linking is evident among health professions' accreditation standards in New Zealand and Australia. Some are jointly developed;^(12, 13) some are drawn from the same profession in Australia,⁽¹⁰⁾ and others appear to be based on those of another profession.⁽⁶⁾

Analysis: Key themes

Analysis of all selected osteopathic and other health professional education documents revealed seven significant themes:

- the shift to higher level, strategic accreditation standards, rather than detailed, mid-level or low level standards. The most straightforward examples typically relate to five strategic domains – public safety, academic governance and quality improvement, programme of study, student experience, and assessment
- 'future-proofing' standards by simplifying them, enabling innovations in education design and delivery and timely responses to changing health and education contexts
- the need to address the importance of culture – for example, the inclusion of 'cultural safety' and the need to support culturally diverse students in their education experience
- in New Zealand professional education, the importance of recognising Te Tiriti o Waitangi responsibilities, engaging with Māori in course design and review, and including te Ao Māori and Māori health in programmes
- the inclusion of evidence-based practice and research (research knowledge, scholarly activity and sometimes a dissertation or project appropriate to the level of programme)
- preparation for the independent yet inter-professional context of osteopathic practice, including ethics and, in the UK example, the inclusion of skills and ethics relating to business
- the need for continual learning, including graduate mentoring and continuing professional education and pathways

Stage 2: Review of current OCNZ accreditation standards

Themes identified in Stage 3 formed the framework for reviewing OCNZ's current accreditation standards and process guide.

Review summary

The main points arising from the review that indicate areas to be considered in revising the standards are:

- shifting to fewer, higher level, more strategic standards to provide flexibility while maintaining quality
- future-proofing standards through simplification, enabling ease of use, flexibility, programme innovation and timely response to changing health and education contexts
- strengthening the focus on culture, cultural safety and support for a diverse student group, throughout the revised standards
- highlighting Te Tiriti o Waitangi responsibilities by combining these in a separate standard

Stage 3: Development of draft accreditation standards

Accreditation standards were developed to reflect national and international trends. This included adapting with permission the Nursing Council of New Zealand's education standard relating to Te Tiriti o Waitangi responsibilities.⁽⁸⁾ The draft standards were then compared with the draft revised accreditation standards of the Australian Osteopathic Accreditation Council to enable harmonisation with them.⁽⁶⁾

Stage 4: Consultation

The OCNZ consultation process seeks views from the profession and relevant stakeholders.

Draft accreditation standards

The OCNZ draft accreditation standards address six domains:

1. Te Titiri o Waitangi partnership responsibilities
2. Public safety
3. Academic governance and quality assurance
4. Programme of study
5. Student experience
6. Assessment

How to make a submission

The OCNZ values your views and encourages you to respond to this document. Questions are included at the end of each standard domain. A link can also be found here <https://www.surveymonkey.com/r/MTXLHH3> The closing date for submission is 4 November 2021.

Next steps

The OCNZ will consider the outcome of the consultation and expects to publish final accreditation standards in the New Year.

Commencement and transition

The OCNZ is aware that changes to the accreditation standards will have an impact on osteopathic education programmes and providers. To recognise this, the OCNZ expects to introduce them with a transition plan from 1 April 2022, with accreditation of existing programmes against the new standards from 2023. Any new providers of education programmes seeking accreditation in 2021 will be expected to meet the new standards.

Standard 1: Te Tiriti o Waitangi responsibilities

1.1 The education provider is committed to its Te Tiriti o Waitangi partnership with Māori

1.2 The education provider has policies and processes that assist it to assess its institutional culture and responsiveness to Māori, and takes action to address racism and unconscious bias within its institution

1.3 The education provider has authentic and active partnerships with Māori that support the co-design, co-delivery and co-review of the programme of study

Do you agree with draft Standard 1?

If so, why?

If not, why not?

Do you think draft Standard 1 will ensure that osteopathic education providers meet their Tiriti o Waitangi responsibilities?

If you consider draft Standard 1 needs to be more effective and applicable to osteopathic education programmes and providers, what changes would you suggest?

Standard 2: Public safety

2.1 Public safety is a key guiding principle of the programme of study, learning outcomes and students' clinical learning experience
2.2 The programme delivery prepares graduates for safe, legal and ethical practice and their professional responsibilities as a registered osteopath
2.3 Students demonstrate knowledge and skills required for safe practice before providing supervised client care during their clinical learning experience
2.4 Clients give informed consent to student provision of supervised care during students' clinical learning experience
2.5 Suitably qualified and experienced practitioners, who are prepared for their supervisory role, supervise and assess students during their clinical learning experience
2.6 Services and practices providing student clinical learning experience have appropriate health and safety, client safety, and quality policies and processes and meet all relevant regulations
2.7 The education provider has effective processes to identify and manage student impairment that might place the public at risk during student clinical learning experience

Do you agree with draft Standard 2?

If yes, why?

If not, why not?

Do you think draft Standard 2 will ensure osteopathic education programmes and providers will focus on safe and socially accountable practice?

If you consider draft Standard 2 needs to be more effective and applicable to osteopathic education programmes and providers, what changes would you suggest?

Standard 3: Academic governance and quality assurance

3.1 The education provider meets all requirements of the relevant higher education authority

3.2 The education provider has robust academic governance arrangements for the programme of study, including systematic monitoring, review and improvement

3.3 The education provider's academic governance structure ensures the head of the programme of study is an osteopath registered with the OCNZ, with no conditions or undertakings on their registration relating to performance or conduct, and holds a relevant postgraduate qualification

3.4 Student, client, service, Māori, academic, professional and other relevant stakeholder evaluations contribute to the design, management and review of the programme of study

3.5 Curriculum review processes ensure timely, evidence-based and effective response to contemporary developments in health and professional education

Do you agree with draft Standard 3?

If yes, why?

If no, why not?

Do you think draft Standard 3 will ensure appropriate academic governance, leadership and partnerships?

If you consider draft Standard 3 needs to be more effective and applicable to osteopathic education programmes and providers, what changes would you suggest?

Standard 4: Programme of study

4.1 The programme develops students' understanding of Te Tiriti o Waitangi's principles and their application to health and osteopathy
4.2 The education provider promotes and supports the recruitment, retention and completion of the programme by Māori and Pasifika
4.3 Coherent osteopathic and educational philosophies inform the programme's design and delivery
4.4 The programme's content and learning outcomes embed culture, diversity, inclusion, and cultural safety for all people
4.5 The programme's learning outcomes effectively prepare graduates for competent, culturally safe, and ethical osteopathic practice in a range of settings
4.6 The programme's design, delivery, environment and resources enable achievement of learning outcomes
4.7 The programme reflects contemporary osteopathic practice and responds effectively to changes and priorities in health and healthcare, evidence-based research, and professional education
4.8 The programme fosters intra-professional and inter-professional collaborative learning and practice
4.9 The programme develops research literacy and capability relevant to the programme's level and supports integration of research evidence in practice
4.10 The programme includes a minimum of 1000 hours of clinical learning experience, exclusive of simulation and of sufficient range and quality to ensure graduates are competent to practise across the lifespan and across osteopathic practice settings
4.11 The programme provides opportunities for students to undertake clinical learning experiences with Māori and requires students to reflect on these experiences, including how they incorporated cultural safety in their practice

4.12 Teaching staff are appropriately qualified and experienced to deliver their educational responsibilities and use learning and teaching methods designed to support student achievement of learning outcomes
4.13 Contractual arrangements with relevant clinical services ensure access to quality clinical learning experience
4.14 The programme meets all requirements of the relevant higher education authority

Do you agree with draft Standard 4?

If yes, why?

If no, why not?

Do you think draft Standard 4 will enable graduates to achieve safe and competent practice?

If you consider draft Standard 4 needs to be more effective and applicable to osteopathic education programmes and providers, what changes would you suggest?

Standard 5: Student experience

5.1 Programme information is clear, relevant, timely, transparent and accessible
5.2 Admission and progression requirements, policies and processes are fair and transparent
5.3 The education provider identifies and provides support to meet students' academic learning needs and a quality educational experience
5.4 Students are informed of and have access to effective grievance and appeals processes and personal support services by qualified personnel
5.5 Students have effective representation in the programme's advisory and decision-making processes
5.6 Equity, diversity, inclusion and cultural safety principles are observed and promoted in the student experience
5.7 The education provider supports and encourages Māori students' participation and experience in the programme of study
5.8 The student experience is regularly evaluated and informs the programme's continual quality improvement

Do you agree with draft Standard 5?

If yes, why?

If no, why not?

Do you think draft Standard 5 will ensure students are appropriately supported?

If you consider draft Standard 5 needs to be more effective and applicable to osteopathic education programmes and providers, what changes would you suggest?

Standard 6: Assessment

6.1 The programme's theoretical and clinical assessment of student learning is comprehensive, fair, valid, reliable and embodies principles of equity and cultural safety
6.2 The programme's learning outcomes and assessment strategies are clearly aligned and the scope of assessment is comprehensive
6.3 Multiple validated assessment tools, modes and sampling are used and include direct observation in the clinical setting
6.4 Moderation procedures are appropriate, robust, fair, consistent and transparent
6.5 Assessments enhance learning, provide clear and appropriate feedback to the student, and inform student progression
6.6 The education provider exercises ultimate accountability for student assessment in relation to students' clinical learning experience

Do you agree with draft Standard 6?

If yes, why?

If no, why not?

Do you think draft Standard 6 will ensure assessments are robust and effectively demonstrate that graduates meet the required competence?

If you consider draft Standard 6 needs to be more effective and applicable to osteopathic education programmes and providers, what changes would you suggest?

References

- (1) World Health Organisation (WHO), *Benchmarks for Training in Osteopathy*, WHO, Geneva, 2010
- (2) Forum for Osteopathic Regulation in Europe (FORE), *European Framework for Standards of Osteopathic Education and Training*, FORE, London, 2008
- (3) General Osteopathic Council [UK], *Guidance for Osteopathic Pre-Registration Education*, General Osteopathic Council, London, 2015
- (4) Australian Osteopathic Accreditation Council (AOAC), *Review of the Osteopathic Accreditation Standards: Synthesis of Responses to Consultation Paper 1*, AOAC, [Canberra], 2021
- (5) Australian Osteopathic Accreditation Council (AOAC), *Review of the Osteopathic Accreditation Standards: Consultation Paper 2*, AOAC, [Canberra], 2021
- (6) Australian Osteopathic Accreditation Council (AOAC), *Review of Osteopathic Accreditation Standards: Consultation Paper 3*, AOAC, [Canberra], 2021
- (7) Nursing Council of New Zealand (NCNZ), *Towards Updated Education Standards for Nursing Education Standards leading to Registration as a Registered Nurse – Consultation Document*, NCNZ, Wellington, 2020
- (8) Nursing Council of New Zealand (NCNZ), *RN Education Programme Standards (2021)*, NCNZ, Wellington, April 2021
- (9) Australian Nursing and Midwifery Accreditation Council (ANMAC), *Registered Nurse Accreditation Standards*, ANMAC, Canberra, 2019
- (10) Physiotherapy Board of New Zealand (PBNZ), *Accreditation Standard for Physiotherapy Practitioner Programmes in Aotearoa New Zealand*, PBNZ, Wellington, 1919
- (11) Australian Physiotherapy Council (APC), *Guidelines for Accreditation: Entry-Level Physiotherapy Practitioner Programs of Study*, APC, Richmond VIC, 2021
- (12) Dental Council New Zealand (DCNZ), *New Zealand Accreditation Standards for Oral Health Practitioner Programmes*, DCNZ, Wellington, January 2021
- (13) Australian Dental Council/Dental Council New Zealand, *Accreditation Standards for Dental Practitioner Programs*, Australian Dental Council/Dental Council New Zealand, [Melbourne and Wellington], 2021