

Accreditation Standards with Process Guide For Entry-Level Osteopathic Education Programmes November 2015



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The Osteopathic Council of New Zealand

The Osteopathic Council of New Zealand (OCNZ) is a Health Regulatory Authority established under the Health Practitioner Competence Assurance Act 2003 (HPCAA). One of the functions of the OCNZ under the HPCAA is to accredit osteopathy education programmes which lead to graduates' eligibility for registration as an osteopath in New Zealand.

The OCNZ's function under HPCAA for accreditation is:

To prescribe the qualifications required for scopes of practice within the profession, and, for that purpose, to accredit and monitor education institutions and degrees, courses of studies, or programmes (section 118(a))

Accreditation standards are used to assess whether a programme of study, and the education provider that delivers the programme of study, provide graduates who complete the programme with the knowledge, skills and professional attributes necessary to practise the profession in a competent and ethical manner. The accreditation standards are used to monitor accredited programmes of study throughout the year and assist in the OCNZ reaccreditation programme.

In line with the HPCAA, accreditation may be granted by the OCNZ if it is reasonably satisfied that a programme of study in osteopathy, and the education provider that provides this programme, meet the approved OCNZ accreditation standards. The OCNZ may also grant accreditation if it is reasonably satisfied the programme of study and the education provider substantially meet the approved accreditation standards, and the imposition of conditions the approval will ensure the programme meets the standard within a reasonable timeframe. The OCNZ further monitors programmes of study to ensure they continue to meet the accreditation standards; this is done through a reaccreditation process. There is a separate document on the OCNZ Reaccreditation Process known as *The Reaccreditation Process with Accreditation Standard Information*. Students studying in an approved programme and graduates of approved programmes are eligible to apply to be registered to practise in Aotearoa New Zealand.



The Accreditation Standards

The accreditation standards identify the expected requirements of entry-level osteopathic education programmes in New Zealand for the purpose of programme accreditation.

The standards currently required of osteopathic entry-level education programmes in Aotearoa New Zealand are outlined below, along with guidance on the evidence that can be used to demonstrate the standards have been met.

The standards encompass the following overarching principles:

- 1. Programme overview, philosophy and purpose
- 2. Curriculum content and sequence
- 3. Educational methods
- 4. Practice education/clinical practice
- 5. Local context of professional practice
- 6. Educators
- 7. Resources
- 8. Quality improvement processes.

The accreditation standards require that all programmes must prepare students to meet the OCNZ Capabilities for Osteopathic Practice , and OCNZ Code of Ethics.

The Capabilities for Osteopathic Practice outline the expected knowledge, skills and attitudes required of osteopaths at the point of completion of an entry-level programme of study. The Capabilities for Osteopathic Practice highlights the nature of osteopathic practice, and have been arranged within 6 domains. These reflect the model that professional capability is an expression of integrated skills, knowledge and attributes.

The domains are not listed hierarchically or linearly, but are designed to be reviewed as an integrated whole.



Section 1: Programme overview, philosophy and purpose

- 1.1 The programme must include the title osteopathy and be delivered from an institution that is an Aotearoa New Zealand University or Institute of Technology or Polytechnic.
- 1.2 The programme of study leads to the award of New Zealand Qualification Authority (NZQA) Level 7 or above. This is a minimum of 120 credits of level 5 and above standards including 72 which must be Level 7 or above.
- 1.3 The programme is delivered from a distinct osteopathy entity (e.g. osteopathy school or department) and the status of this entity is equivalent to comparable entry-level professional programs.
- 1.4 The programme has a documented philosophy which includes a client centred, osteopathic view of people.
- 1.5 The elements of the programme philosophy are congruent, and provide a comprehensive basis for the programme.
- 1.6 The philosophy and purpose of the programme reflect concepts of osteopathy shared by the international community of osteopaths.
- 1.7 The philosophy and purpose of the programme reflect current and predicted health and welfare needs, systems and priorities of the Aotearoa New Zealand population. This should include that the course is cognisant of Māori tribal tikanga, te reo and traditions; reflecting the entities commitment to the Treaty of Waitangi.
- 1.8 The programme is delivered in a research context that contributes to the advancement of osteopathy and informs the programme.

The programme needs to evidence development in student competence through academic staff. The entity should evidence their encouragement of staff being active in the research culture of Aotearoa New Zealand.

1.9 There are aims and objectives for the programme which identify expected graduate outcomes and these are congruent with the philosophy and purpose of the programme.



Section 2: Curriculum Content and Sequence

- 2.1 The curriculum content and process is clearly articulated, planned, systematically scheduled and managed effectively.
- 2.2 The curriculum content and sequence is congruent with the osteopathic philosophy of the programme.
- 2.3 The curriculum is designed, developed and revised by osteopaths with relevant practice education/clinical and educational curriculum design expertise.
- 2.4 The curriculum is developed through consultation and collaboration. The conceptual framework is grounded in current osteopathic science knowledge that is demonstrated to the Aotearoa New Zealand context.
- 2.5 The curriculum content and process addresses all of the knowledge, skills and attitudes in this document to equip graduates with the knowledge, skills and attitudes to work with individuals.
- 2.6 The programme is structured to meet the following guidelines :
 - 60 per cent is focused on osteopathy (including clinical practice to integrate knowledge)
 - 10 to 30 per cent is focused on knowledge supporting an understanding of body structure and function and biomedicine (including practice education/clinical to integrate knowledge)
 - 10 to 30 per cent is focused on knowledge supporting an understanding of the human and social environment, and social perspectives of health (including practice education/clinical to integrate knowledge).
- 2.7 The programme content includes approaches to health and osteoapthy for enablement and wellbeing.
- 2.8 The curriculum content reflects current and future emerging practice areas of Aotearoa New Zealand. This includes government strategic goals and policies along with public and private sector initiatives.
- 2.9 Contemporary national and international theories, research findings, osteopathic practice and expectations of professional practice inform the curriculum.



Section 3: Educational Methods

- 3.1 A contemporary educational philosophy underpins teaching and learning in the programme.
- 3.2 National and international educational theories and research inform the educational methods used within the programme.
- 3.3 The range of educational methods used supports the development of graduate knowledge, reasoning, practice skills and attitudes including the OCNZ Capabilities for Osteopathic Practice .
- 3.4 The educational methods used support the development of life-long learning behaviour including the OCNZ Capabilities for Osteopathic Practice .
- 3.5 The educational methods support the development of graduates to work as effective members of interprofessional teams.
- 3.6 Assessment methods are contemporary and congruent with the educational approach of the programme.
- 3.7 The range of assessment methods used support the development of graduate knowledge, reasoning, practice skills and attitudes developed by the programme.
- 3.8 The assessment strategies used are appropriate for developing graduates who are safe and competent to practise against the OCNZ Capabilities for Osteopathic Practice and Code of Ethics.

Where a student is granted dispensation(s) or exemption(s) from demonstrating one or more capabilities (for example on the basis of an impairment), or any skill or knowledge of the area contributing to a capability there are processes to record the decision and report to the OCNZ these exemption(s) and/or dispensation(s) on the completion of the programme by the student.



Section 4: Practice Education/Clinical

- 4.1. Clinicl experiences will encompass all of the following parameters:
 - a range of personal factors such as:
 - gender
 - ethnicity that is reflective of the population that will be recipients of osteopathy; individual, community, group and population approaches
 - health conditions that affect different aspects of body structure and function that cause different kinds of activity limitations
 - the practice of a range of osteopathic modailities
 - practice that covers the life span
 - practice that covers all the osteopathic capabilities for osteopathic practice
 - ethical practice.
- 4.2 Clinical practice education experiences are of sufficient duration to allow integration of theory to practise. In line with a minimum of 1000 hours is normally required. All clinical activity must be recorded in a log book held by the student and signed off by the clinic lecturer.
- 4.3 There are sufficient clinical practice education opportunities available for students that support every students learning abilities and activities.
- 4.4 There are sufficent osteopathic supervsiors in clinical practice to provided oversight and support fort students
- 4.5 Administrative arrangements for clinical practice meet legal statutory obligations.
- 4.6 Clinical placement is normally distributed throughout every year of the curriculum.
- 4.7 Learning agreements are used to guide and facilitate learning during clinical practice.
- 4.8 Clinical practice areas are prepared for student placements, and there is ongoing support and development of supervisors.

Supervisors know and practice the process in place of reporting concerns of a student's fitness to the institute.

Identify the process which supervisors use to raise concerns about a student's fitness to practise.

- 4.9 The programme adequately prepares students for their clinical placements so that they are fit to practise.
- Should there be concerns of a student's fitness health issues to practice a process is in place to record and report this concern.
- 4.10 Clinical practice draws on the literature and relevant research to support the programme.
- 4.11 There are clear policies on the use of any paid clinical practice ensuring that any employment issues that may reflect fitness to practise concerns are known to the institution and recorded.



Section 5: Local Context of Professional Practice

- 5.1The curriculum content is relevant to Aotearoa New Zealand national and local region health, well-being and osteopathy needs.
- 5.2 The programme prepares graduates to engage in culturally safe practice, in particular practices relevant to the health and well-being of Māori peoples.
- 5.3 The programme incorporates content in response to major national and local health priorities and practice standards of Aotearoa New Zealand.
- 5.4 Academic staff have up-to-date knowledge of the local contexts of practice.



Section 6: Educators

6.1 The academic leadership of the programme is provided by an osteopathy who is registered and holds a practising certificate. The academic leader will:

have experience in leadership in the osteopathy practice field and/or higher education sector; have a post-graduate qualification, normally at masters level, and research experience in osteopathy; have demonstrated capacity to develop innovative and contemporary osteopathy education at undergraduate and postgraduate level, and has demonstrated leadership capacity in complex and changing environments across multiple sectors (e.g. education, health, disability, community, higher education); have the capacity to manage complex polytechnic/university processes to ensure the academic approval of the programme.

- 6.2 There are a sufficient number of appropriately qualified academics to ensure effective development and delivery of the programme.
- 6.3 The combined qualifications and experience of the academic staff supports the curriculum content and education methods used in the programme.
- 6.4 Academics have a relevant qualification that is higher than the qualification received by graduates of the programme and/or can demonstrate excellence in their area of teaching.
- 6.5 Academic staff are up-to-date with knowledge, skills and attitudes relevant to their teaching.

They maintain their currency with the national and international osteopathy, health, disability, welfare, community and educational thinking and practice, and they are competent to teach in their allocated areas.

- 6.6 The programme supports academic staff to actively engage in research and scholarship relevant to their teaching.
- 6.7 There are policies and practices that address the balance of teaching, research, community or institute service and administrative functions for academic staff.
- 6.8 Adequate numbers of administrative staff are providing support for the academic activities of the educators.
- 6.9 Osteopathy lecturers are registered with the OCNZ and hold a current practising certificate.



Section 7: Resources

- 7.1 The programme is adequately resourced in terms of physical facilities to effectively deliver on its intent.
- 7.2 The educational facilities and resources available to the programme are consistent with the programme's philosophy and purpose.
- 7.3 Plans are in place for the continual improvement of facilities and resources to support curriculum development where needed.
- 7.4 Adequate and effective administrative services are provided to the programme to support its effective delivery.
- 7.5 There is suffecitent information technology (I.T.) both hardware and software to deliver the programme.
- 7.6 Students have adequate access to (I.T.)
- 7.7 There is adequate classrooms, and lecture theatres to deliver the programme.



Section 8: Continuing Quality Improvement

6.8 Conditions and recommendations made in previous accreditation reports have been addressed.

NOTE: Only for reaccreditation

6.8 The programme philosophy and purpose, curriculum, content/sequence and educational methods (including clinical practice) are reviewed in an ongoing manner and revised in response to local changes and development of international knowledge.

Current literature/evidence is used to inform programme improvement.

- 8.3 Key stakeholders are engaged in the provision of feedback relevant to the programme and the feedback informs the development of the curriculum and delivery of the programme.
- 8.4 A steering committee or advisory board including key osteopathic stakeholders provides advice to the programme.
- 8.5 There is support for the programme from key stakeholders including local employers, practitioners and professional association.
- 8.6 The perspective of consumers/service users/clients (i.e people with a health and/or osteopathic issue/people who are recipients of osteopathic services) are valued and integrated within the design, delivery and evaluation of the programme.
- 8.7 There are processes in place to evaluate and monitor the effectiveness of the programme's graduates as ethical and competent osteopaths.
- 8.8 The programme draws on current research from new/recent graduates to shape the curriculum and the teaching and learning methods used (including clinical practice), and to promote successful integration of students into the workplace and workforce following graduation.
- 8.9 Strategies/admission policies are in place to target groups under-represented in the programme to ensure student profile is reflective of the community profile.
- 8.10 Processes/accommodations including the assessment and management of at risk/special needs students are used across all aspects of the programme, including clinical practice.
- 8.11 Monitoring by internal and external parties.



How to prove the educational programme meets the OCNZ Standards

To receive accreditiation from the OCNZ an educational provider must prove they meet the Accreditation Standard. To do this the following evidence is required.

Section 1: Programme overview, philosophy and purpose	
Standard	Evidence Required
1.1 The programme must include the title osteopathy and be delivered from an institution that is an Aotearoa New Zealand University or Institute of Technology or Polytechnic.	1.1.1 Name of the institution.1.1.2 Name other existing osteopathy entry-level programmes within the institution or within New Zealand.
1.2 The programme of study leads to the award of New Zealand Qualification Authority (NZQA) Level 7 or above. This is a minimum of 120 credits of level 5 and above standards including 72 which must be Level 7 or above.	 1.2.1 Name of the level of award which needs to include the words osteopathy. 1.2.2 Indicate the length of the programme in years, semesters and weeks. 1.2.3 If the programme is new and will replace an existing programme, indicate which programme it will replace and outline the process and proposed date for phasing out the existing programme.
1.3 The programme is delivered from a distinct osteopathy entity (e.g. osteopathy school or department) and the status of this entity is equivalent to other comparable entry-level professional programs.	 1.3.1 Indicate where the program aligns within the organisation using an organisational chart. 1.3.2 State the mission of the institution and outline the way this mission influences the osteopathy program. 1.3.3 Comment on any specific institutional focus that influences the delivery of the osteopathy programme e.g. a specific research agenda, a shift to graduate entry professional programmes, a focus on regional/rural remote issues, a focus on primary care.
1.4 The programme has a documented philosophy which includes a client centred, osteopathic view of people.	1.4.1 Provide the relevant documents that demonstrate this philosophy.
1.5 The elements of the programme philosophy are congruent, and provide a comprehensive basis for the programme.	1.5.1 Provide programme documents that demonstrate that the philosophy is embedded throughout the curriculum and informs graduate outcomes.



Standard	Evidence Required
1.6 The philosophy and purpose of the programme reflect concepts of osteopathy shared by the international community of osteopaths.	1.6.1 Include key references.
1.7 The philosophy and purpose of the programme reflect current and predicted health and welfare needs, systems and priorities of the Aotearoa New Zealand population. This should include that the course is cognisant of Māori tribal tikanga, te reo and traditions; reflecting the entities commitment to the Treaty of Waitangi.	1.7.1 Provide programme documents that demonstrate the programme incorporates the health and welfare needs, systems and priorities of Aotearoa New Zealand and the geographical region.
	1.7.2 Provide a detailed outline of the philosophy, purpose, and graduate outcomes of the programme as they pertain to Māori peoples.
	1.7.3 Include key references.
1.8 The programme is delivered in a research context that contributes to the advancement of osteopathy and informs the programme.	1.8.1 Provide evidence of the way the institution supports osteopathy scholarship and research, or has the structures in place to do this as the programme
The programme needs to evidence development in student competence through academic staff contribution. The entity should evidence their encouragement of staff being active in the research culture of Aotearoa New Zealand.	develops.
1.9 There are aims and objectives for the programme which identify expected graduate outcomes and these are congruent with the philosophy and purpose of the programme.	1.9.1 Provide programme documents that outline the aims and objectives.
	1.9.2 Indicate how the programme duration and stated learning outcomes reflect the nominated NZQA Framework level 7 requirements.



Section 2: Curriculum Content and Sequence	
Standard	Evidence Required
2.1 The curriculum content and process is clearly articulated, planned, systematically scheduled and managed effectively.	2.1.1 Provide an overview of the curriculum content and sequence for each semester of the programme.
	2.1.2 Provide individual subject/course outlines as provided to the students, including an abstract; objectives /learning outcomes; content overview; prescribed textbooks; details of assessment; teaching and learning strategies.
	2.1.3 Provide copies of current timetables, or outlines of teaching activities in each subject, for all years of the programme, in a format that indicates the time and study demands for students.
2.2 The curriculum content and sequence is congruent with the osteopathy philosophy of the programme.	2.2.1 Demonstrate how the osteoapthy philosophy of the programme informs and shapes the curriculum content, the sequence and delivery of the programme.
2.3 The curriculum is designed, developed and revised by osteopaths with relevant practice education/clinical and educational curriculum design expertise.	2.3.1 Provide the name, title, qualifications and contact details of person(s) developing, updating or modifying the programme.
	2.3.2 Provide evidence that the academic staff members responsible for new curriculum have demonstrated capacity to develop innovative and contemporary osteopathy education programmes.
	2.3.3 If there are aspects of the programme that were not designed and developed by osteopaths (e.g. foundation subjects such as anatomy; psychology, sociology) explain how these aspects of the program are integrated into an osteopathy framework in the curriculum.
	2.3.4 Indicate how the osteopathy perspective is incorporated into any inter-professional aspects of the programme.
2.4 The curriculum is developed through consultation and collaboration. The conceptual framework is grounded in current osteopathy and osteopathic science knowledge that is demonstrated to the Aotearoa New Zealand context.	2.4.1 Provide evidence of the way this consultation has shaped the curriculum.



Standard	Evidence Required
2.5 The curriculum content and process addresses all of the knowledge, skills and attitudes in this document to equip graduates with the knowledge, skills and attitudes to work with individuals.	2.5.1 Provide a detailed curriculum map to indicate where and how the units and elements map to the Capabilities for Osteopathic Practice.2.5.2 Indicate how the knowledge, skills and attitudes
	embedded within the units of competence and performance indicators are developed for students across all years of the curriculum.
2.6 The programme is structured to meet the following guidelines :	2.6.1 Provide evidence of how these approaches are addressed in the curriculum.
 60 per cent is focused on osteopathy (including clinical practice to integrate knowledge) 	
 10 to 30 per cent is focused on knowledge supporting an understanding of body structure and function and biomedicine (including practice education/clinical to integrate knowledge) 	
 10 to 30 per cent is focused on knowledge supporting an understanding of the human and social environment, and social perspectives of health (including practice education/clinical to integrate knowledge). 	
2.7 The programme content includes approaches to health and osteoapthy for enablement and wellbeing.	2.7.1 Provide programme documents which demonstrate how the programme prepares graduates in accordance with the expectations of practitioners' key practice areas, as well new and emerging practice areas.
	2.7.2 Provide evidence of the curriculum content focussing on the health of Māori and evidence of the contribution of Māori to the development of the curricula.
	2.7.3 Provide evidence that the programme content is responsive to international andnational specific practice standards that have been developed by the profession, and indicate how these inform the curriculum.
2.8 The curriculum content reflects current and future emerging practice areas of Aotearoa New Zealand. This includes government strategic goals and policies along with public and private sector initiatives.	2.9.1 Provide evidence that the programme meets the standard e.g. outline the theories and research used, collaborative relationships with other osteopathy programmes, peer review processes, faculty exchange and involvement of international educators in programme review and development.



Section 3: Educational Methods	
Standard	Evidence required
3.1 A contemporary educational philosophy underpins teaching and learning in the programme.	3.1.1 Outline the rationale for this educational philosophy and include key references.
3.2 National and international educational theories and research inform the educational methods used within the programme.	3.2.1 Show examples of academic research informing delivery of the programme as required for degree approval from NZQA ¹ .
3.3 The range of educational methods used supports the development of graduate knowledge, reasoning, practice skills and attitudes including the OCNZ Capabilities for Osteopathic Practice.	3.3.1 & 3.4.1 Describe the range of educational/teaching and learning strategies used within the programme including the underlying premise for their inclusion (refer to individual subject outlines to illustrate this). Outline the evidence which
3.4 The educational methods used support the development of life-long learning behaviour including the OCNZ Capabilities for Osteopathic Practice.	supports the choice of teaching and learning approaches used, including key references.
3.5 The educational methods support the development of graduates to work as effective members of inter- professional teams.	3.5.1 Outline the activities used to support development of knowledge of the role and contribution of the other professionals involved in delivering client services, and to develop cooperative and collaborative working relationships with other members of a team.
3.6 Assessment methods are contemporary and congruent with the educational approach of the programme.	3.6.1 Describe the range of assessment strategies used and indicate how assessment items ensure students meet the subject and the programme learning objectives.
3.7 The range of assessment methods used support the development of graduate knowledge, reasoning, practice skills and attitudes developed by the programme.	3.7.1 Outline the research evidence for the assessment processes used including key references.
	3.7.2 Indicate the strategies used to assure the quality of the assessment process (e.g. committee review of exam questions, documentation of expected answers, and moderation between markers).
	3.7.3 Outline strategies used to manage poorly performing and failing students.
	3.7.4 Describe the processes and methods used to evaluate a student's performance in clinical practice (e.g. learning agreements, reflective assignments).

¹ NZQA Programme Approval and Accreditation Rules



Standard

3.8 The assessment strategies used are appropriate for developing graduates who are safe and competent to practise against the OCNZ Capabilities for Osteopathic Practice, and Code of Ethics.

Where a student is granted dispensation(s) or exemption(s) from demonstrating one or more competencies (for example on the basis of an impairment), or any skill or knowledge of the area contributing to a competency there are processes to record the decision and report to the OCNZ these exemption(s) and/or dispensation(s) on the completion of the programme by the student.

Evidence required

- 3.8.1 Comment on the cumulative assessment process or specific items of assessment used for this purpose.
- 3.8.2 Provide programme documents that indicate how and where ethical and professional conduct is assessed throughout the programme and how and where graduates are made aware of their responsibilities as outlined in the OCNZ Capabilities for Osteopathic Practiceand Code of Ethics.
- 3.8.3 Comment specifically on strategies used to ensure core osteopathy practice skills as identified by key stakeholders.
- 3.8.4 Provide evidence of record keeping and reporting of dispensation(s) or exemption(s).



Section 4: Clinical Practice

Standard

- 4.1. Clinical practice experiences will encompass all of the following parameters:
 - a range of personal factors such as:
 - gender
 - ethnicity that is reflective of the population that will be recipients of osteopathy; individual, community, group and population approaches
 - health conditions that affect different aspects of body structure and function that cause different kinds of activity limitations
 - social care
 - different delivery systems such as:
 - hospital and community
 - public, private, and non government organisations
 - health and educational
 - urban and rural, local and international cllincal practice.

Note: Clinical practice that takes place outside of Aotearoa New Zealand must meet OCNZ Capabilities for Osteopathic Practiceand Code of Ethics. It must not compromise the students' ability to show competence in this context.

Evidence required

- 4.1.1 Provide detail of the range of clinical practice opportunities available for students (clinical practice is the time where students implement an osteopathy process, or an aspect of this process, with or for a real living person and may include up to 20 per cent of well-designed simulation experience).
- 4.1.2 Provide programme documents that identify the systems used and the administrative processes in place to manage, monitor and report on student clinical practice.
- 4.1.3 Comment on areas of strength/difficulty in obtaining adequate range of clinical placements and/or supervision, and the strategies used to obtain the required number of clinical placements.
- 4.1.4 Provide evidence that demonstrates all students have the range of clinical practice experiences required.
- 4.1.5 Outline the systems and processes in place to ensure students are exposed to a range of clinical and non-clinical practice education experiences including role-emerging and more traditional practice.
- 4.1.6 Provide evidence that the practice education experiences support the development of students' understanding of the role of osteopathy and the contributions of other professions.
- 4.1.7 Evidence from clinical placement assessors.



Standard	Evidence required
4.2 Clinical practice education experiences are of sufficient duration to allow integration of theory to practise. In line with a minimum of 1000 hours is	4.2.1 Provide detail of all activities contributing to student clinical practice experiences.
normally required. All clinical activity must be recorded in a log book held by the student and signed off by the clinic lecturer.	4.2.2 Outline the nature and extent of consultation with local osteopathy practitioners and others in relation to gaining and sustaining placements.
4.3 There are sufficient numbers of clinical placements available for students that support every students' learning abilities and activities.	4.3.1 Provide documentation which outlines the strategies used to ensure a minimum of 1000 hours of clinical practice which will be completed by students in the programme. Also indicate where students may experience extended clinical practice placement that support the integration of theory and practice.
	4.3.2 Provide evidence of agreements that ensure students have access to an appropriate range of clinical placements.
4.4 There are sufficent osteopathic supervsiors in clinical practice to provide oversight and support fort students.	4.4.1 Outline the process to ensure: all supervisors of clinical practice are osteopathic practitioners with at least two (2) years' experience, or an experienced osteopathic educator; supervision requirements match the student's learning level (e.g. close direct supervision progressing to more independent practice); an osteopathic educator provides effective supervision where the supervisor is not on site and/or where a person other than an osteopath has a supervisory role (e.g. in a project placement).
4.5 Administrative arrangements for clinical practice meet legal statutory obligations.	4.5.1 Outline the legal agreements in place, and include examples of contracts, memoranda of understanding.
	4.5.2 Provide evidence that indicates affiliation and/or placement agreements are in place for all clinical placement locations.
	4.5.3 Provide evidence that agreements indicate arrangements for public protection and student protection (e.g. Working with Children checks, police checks, immunisation, safe food handling, first aid, public liability insurance/indemnity for practice education/fieldwork experiences, work health and safety legislation). ^{2.}
	4.5.4 Provide evidence of process for managing students raising concerns about clinical placements.
	4.5.5 Identify the process for managing concerns raised by students about another health practitioner.

² Vulnerable Children's Act 2014



Standard	Evidence required
4.6 Clinical placement is normally distributed throughout every year of the curriculum.	4.6.1 Describe the distribution of hours of clinical practice through the curriculum, and provide a rationale for this distribution. Include the documentation used to log the required hours of experience.
4.7 Learning agreements are used to guide and facilitate learning during clinical practice.	4.7.1 Include, as an attachment, examples of student learning agreements.
4.8 Clinical practice areas are prepared for student placements, and there is ongoing support and development of supervisors. Supervisors know and practice the process in place of reporting concerns of a student's fitness to the institute.	4.8.1 Indicate how the quality of supervision is promoted, and comment on: strategies used to respond to student feedback about their supervision; strategies used to ensure all supervisors of clinical practice are adequately trained, supported and mentored.
Identify the process which supervisors use to raise concerns about a student's fitness to practise.	4.8.2 Provide documentation which details the support provided to supervisors in distant, rural and regional locations.
	4.8.3 Outline guidelines or policy to promote a situation in which the number of students placed at a clinical placement will be in proportion to the number of available clients.
4.9 The programme adequately prepares students for their clinical placements so that they are fit to practise. Should there be concerns of a student's fitness to practice a process is in place to record and report this concern.	4.9.1 Provide documentation on the strategies used to ensure the roles and responsibilities of students on clinical placement, including expected professional behaviours and attitude standards including the OCNZ Capabilities for Osteopathic Practiceand Code of Ethics, are made known to them, made clear, explicit and relevant to the particular context. This should include the compabilities and information on fitness to practise and requirements for registration.
	4.9.2 Provide detail about how the prerequisite knowledge assumed by the clinical placement agency is obtained and made known to students.
	4.9.3 Provide documented evidence on how the roles and responsibilities of clinical practice supervisors and educators are made known to students, and made clear, explicit and relevant to the particular context.
	4.9.4 Provide evidence of process to record and report fitness to practise concerns.



Standard	Evidence required
4.10 Clinical practice draws on the literature and relevant research to support the programme.	4.10.1 Indicate how the evidence based on clinical practice education is applied to the development, implementation and evaluation of the clinical practice (e.g. supervisory strategies, supervisor education, teaching learning strategies, types of clinical placements offered). Include key references. 4.10.2 Identify and describe simulation activity provided within the curriculum.
4.11 There are clear policies on the use of any paid clinical placements ensuring that any employment issues that may reflect fitness to practise concerns are known to the institution and recorded.	4.11.1 Provide policy.



Section 5: Local Context of Professional Practice	
Standard	Evidence required
5.1The curriculum content is relevant to Aotearoa New Zealand national and local region health, well- being and osteopathy needs.	5.1.1 Provide documented evidence of strategies used to ensure the curriculum content is relevant to the needs of the health, welfare, and disability systems including ACCand the legislative environment in which the programme is being delivered.
	5.1.2 Outline the strategies used to enable students to learn how to adapt their approach to take account of the local context of their practice e.g. clinical placements in role-emerging locations as well as hospital based acute care; learning tasks that address a diverse range of social, economic and cultural factors.
5.2 The programme prepares graduates to engage in culturally safe practice, in particular practices relevant to the health and well-being of Māori peoples.	5.2.1 Identify how the curriculum incorporates the principles/standards of culturally safe practice. 5.2.2 Provide specific description of content with particular relevance for the health and well-being of Māori people.
5.3 The programme incorporates content in response to major national and local health priorities and practice standards of Aotearoa New Zealand.	5.3.1 Provide specific detail of how the curriculum incorporates and updates current health priority policy directions set by the government, consumer bodies and advocacy organisations.
	5.3.2 Indicate how knowledge gained directly from the osteopathy practice field informs the delivery of the curriculum.
5.4 Academic staff have up-to-date knowledge of the local contexts of practice.	5.4.1 Provide documented evidence on the strategies undertaken to ensure academics maintain up-to-date knowledge of the local contexts of practice.



Section 6: Educators Standard	Evidence required
6.1 The academic leadership of the programme is provided by an ostopath. The academic leader will: have experience in leadership in the osteopathy practice field and/or higher education sector; have a post-graduate qualification, normally at masters level, and research experience in osteopathy; have demonstrated capacity to develop innovative and contemporary osteopathy education at undergraduate and postgraduate level, and have demonstrated leadership capacity in complex and changing environments across multiple sectors (e.g. education, health, disability, community, higher education); have the capacity to manage complex university processes to ensure the academic approval of the programme.	 6.1.1 Provide the name, title, qualifications, CV and contact details of the academic leader of the programme. 6.1.2 Provide the name, title, qualification, CV and contact details for the people who lead specific elements of the programmes. E.g. clinical placement co-ordinator. 6.1.3 Provide evidence of registration and current practising certificate with the OCNZ.
6.2 There are a sufficient number of appropriately qualified osteopathic academics to ensure effective development and delivery of the programme.	 6.2.1 Provide evidence that the number of academics is sufficient for the size of the intake and demands of the curriculum to be implemented. 6.2.2 Indicate how the balance of full-time, part-time, sessional, contract and tenure ensures effective
	programme development and delivery. 6.2.3 Where there are aspects of the programme not fully supported by the academic staff, indicate strategies used to address this.
	6.2.4 Provide evidence of registration and current practising certificate with the OCNZ.



Standard	Evidence required			
 6.3 The combined qualifications and experience of the academic staff supports the curriculum content and education methods used in the programme. 6.4 Academics have a relevant qualification that is higher than the qualification received by graduates of the programme and/or can demonstrate excellence in their area of teaching. 	6.3.1 & 6.4.1 Detail staff expertise that prepares them to deliver the programme; include comment on how the mix of professional backgrounds, qualifications and experience of the educators enables the delivery of the programme that is consistent with its stated philosophy and purpose. Attach CVs for those in leadership positions.			
	6.3.2 & 6.4.2 Provide an outline of the expertise of osteopathy educators (permanent and regular sessional teaching staff) responsible for the delivery of the programme, including names, qualifications, fraction of appointment, key relevant expertise, role and research interests.			
	6.3.3 & 6.4.3 Provide evidence of registration and current practising certificate with the OCNZ.			
	6.3.4 & 6.4.4 Provide detail of the teaching and learning qualifications and achievements of the staff, as well as strategies used to support their ongoing development as educators. Describe the management strategies implemented to support, supervise and mentor sessional and less experienced osteopathy academic staff.			
6.5 Academic staff are up-to-date with knowledge, skills and attitudes relevant to their teaching. They maintain their currency with the national and international osteopathy and educational thinking and practice, and they are competent to teach in their allocated areas.	6.5.1 Indicate the methods used by osteopathy educators to remain up-to-date e.g. engagement with the professional community, accessing international literature, gaining further formal qualifications, attending professional development programmes and conferences, international collaboration with recognised experts, engaging in research, practising as an osteopath, supervision of practising osteopaths, learning from visiting experts, student feedback, critical appraisal of teaching practice by consumers; knowledge of teaching/learning research findings, and skills in effective teaching. 6.5.2 Describe and provide documents of the performance appraisal system based within institution.			
6.6 The programme supports osteopathy academic staff to actively engage in research and scholarship relevant to their teaching.	6.6.1 Outline how the post-graduate and research activity undertaken by staff is supported, and how this contributes to the overall quality of the education of osteopathy students.			
	6.6.2 Provide documented evidence on how the institution's policies support and value the teaching and professional activity of academic staff.			



Standard	Evidence required
6.7 There are policies and practices that address the balance of teaching, research, community or institute service and administrative functions for academic staff.	6.7.1 Provide documentation on the policies and procedures in place to address the balance between teaching, research, administrative and community service functions of staff. Include any published policy documents as attachments.
6.8 Adequate numbers of administrative staff are providing support for the academic activities of the osteopathy educators.	6.8.1 Outline the administrative systems and number of administrative staff, their fractional appointment, and key roles.
6.9 Osteopathy lecturers are registered with the OCNZ and hold a current practising certificate.	6.9 Provide proof of registration and practising status for all lecturers.



Section 7: Resources Standard	Evidence required		
7.1 The programme is adequately resourced in terms of physical facilities to effectively deliver on its intent.	7.1.1 Provide evidence that demonstrates the programme currently, and will continue to be adequately resourced to deliver its intent (e.g. a business case or three to five-year budget for new programmes or documentation) demonstrating there is:		
	adequate and accessible teaching space		
	 library and information technology resources that are accessible, up-to-date 		
	These resources should include:		
	 information on osteopathy 		
	 osteopathic theory and practice information on disciplines such asanatomy and physiology, human development and supported by effective internet and off campus access. as well asoffices for educators and support staff, venues for specialist learning activities 		
	 equipment that is relevant to osteopathy services, storage space to adequately deliver the programme simulation laboratories. 		
	Comment on any strategies used to manage limitations.		



Standard	Evidence required	
7.2 The educational facilities and resources available to the programme are consistent with the programme's philosophy and purpose.	7.2.1 Outline how the educational facilities and resources are consistent with the programme's philosophy and purpose (e.g. a programme that includes a focus on developing economically viable employment options).	
	7.2.2 Describe any interprofessional learning opportunities with other health and social care professions.	
	7.2.3 Provide programme budgets and business plan.	
7.3 Plans are in place for the continual improvement of facilities and resources to support curriculum development where needed.	7.3.1 Outline the strategies to ensure facilities and resources will remain up-to-date and support curriculum development.	
	7.3.2 Outline the strategies used to ensure students have access to emerging technologies that will enable their transition into the workplace.	
	7.3.3 Provide evidence from the institution's strategic plan.	
7.4 Adequate and effective administrative services are provided to the osteopathy programme to support its delivery.	7.4.1 Outline the administrative arrangements in place. Where aspects of the programme are not fully supported, indicate the strategies being used to address this.	
7.5 There is sufficient information technology (I T) both hardware and software to deliver the programme.	7.5.1 Please provide student to technology ratios and discuss all clouded and/or web based applications used by the programme.	
7.6 Students have adequate access to I.T.	7.6.1 Please provide student to technology ratios and discuss all clouded and/or web based applications used by the programme.	
	7.6.2 If there is an IT lab for studnets please advise us how they access this and what hours it is available to them.	
7.7 There are adequate classrooms, and lecture theatres to deliver the programme.	7.7.1 Please provide a list of the classrooms and lecture theatres to be used and their capacity.	



Section 8: Continuing Quality Improvement			
Standard	Evidence required		
8.1 Conditions and recommendations made in previous accreditation reports have been addressed. NOTE: Only for reaccreditation	8.1.1 None if accrediting. For reacredditing provide evidence of how the conditons/recommendations were addressed.		
8.2 The programme philosophy and purpose, curriculum, content/sequence and educational methods (including clinical practice) are reviewed in an ongoing manner and revised in response to local changes and development of international knowledge. Current literature/evidence is used to inform programme improvement.	8.2.1 Provide documented evidence of the quality improvement/ assurance processes that are used to review and revise the programme. Include comment on the strategies used to ensure that current evidence is used to inform programme improvement. Provide documented evidence of a whole-of-staff review of the entire programme.		
	8.2.2 Identify at what point the OCNZ will be advised of changes to curriculum.		
	8.2.3 Describe the threshold that requires the institution to report programme changes.		
	8.2.4 Provide an overview of the institute's teaching and learning policies and procedures of direct relevance to the development, implementation and review of the osteopathy programme.		
8.3 Key stakeholders are engaged in the provision of feedback relevant to the osteopathy programme and the feedback informs the development of the curriculum and delivery of the programme.	8.3.1 Provide evidence of adequate and appropriate consultation with key stakeholders on programme design and delivery, including curriculum content and the clinical practice arrangements.		
	8.3.2 Provide detailed evidence that the programme receives and is responsive to feedback from:		
	 experienced osteopathic practitioners in a range of practice areas. 		
	 funders representing a range of government, private, and non- government organisations servicing a range of human service activities across the lifespan of the professional association, recent graduatesand students (including their perspective on all aspects of the teaching and learning experience). 		
	 representatives, such as allied health advisors, from government departments (health, education, disability), Māori health professionals, organisationsand/or local communities, consumers and consumer organisations. 		



Stadard	Evidence Required		
8.4 A steering committee or advisory board including key osteopathy stakeholders provides advice to the programme.	8.4.1 Provide names and titles of members of the advisory board or steering committee.8.4.2 Provide evidence that the advisory body meets regularly and is used effectively to inform the ongoing development of the programme.		
8.5 There is support for the programme from key stakeholders including local employers, practitioners and professional association.	8.5.1 Provide documented evidence that there is support for the programme, and where there are areas of concern, indicate the processes being used to address these.		
8.6 The perspective of consumers/service users/clients i.e people with a health and/or health issues/people who are recipients of osteopathic services, are valued and integrated within the design, delivery and evaluation of the programme.	 8.6.1 Provide details and examples of the manner in which consumer feedback and perspectives are obtained and incorporated into the design, delivery and evaluation of the programme. 8.6.2 Indicate how consumers are providing input into the programme in roles beyond that of providing their perspective as service recipients. 		
8.7 There are processes in place to evaluate and monitor the effectiveness of the programme's graduates as ethical and competent osteopaths.	8.7.1 Provide evidence of stakeholder feedback and review mechanisms used to determine the preparedness of graduates to practise safely and competently in initial employment and in the early years of their practice. 8.7.2 Indicate how feedback about graduate performance (e.g. from graduate destination survey, survey of employers and graduates, advisory group feedback) is incorporated into and informs the ongoing development of the programme. 8.7.3 Provide evidence of continuing demand for the programme (e.g. enrolment statistics and completion rates, attrition rates, graduate employment data.)		
8.8 The programme draws on current research from new/recent graduates to shape the curriculum and the teaching and learning methods used (including practice education/fieldwork), and to promote successful integration of students into the workplace and workforce following graduation.	8.8.1 Provide evidence of how current research on the experiences of new/recent graduates informs the curriculum and facilitates their integration into the workforce.		
8.9 Strategies/admission policies are in place to target groups under-represented in the programme to ensure student profile is reflective of the community profile.	8.9.1 Provide details of admission policy documents. Outline Māori and Pacific Islanders' specific initiatives, and strategies to support the recruitment and retention of these students within the programme.		



Standard	Evidence Required	
8.10 Processes/accommodations including the assessment and management of at risk/special needs students are used across all aspects of the programme, including practice education/ fieldwork.	8.10.1 Provide policy documents relevant to Māori, international and culturally and linguistically diverse students, students with disabilities, and students with academic performance issues.	
8.11 Monitoring by internal and external parties.	8.11.1 Provide monitoring reports from internal and external monitors.	
	8.11.2 Describe the internal quality assurance mechanism and how these support and develop the programme.	



The Accreditation Process

THE PURPOSE

The key objective of accreditation is to provide independent confirmation that an accredited osteopathy programme is producing graduates who have acquired the academic capabilities, competencies and understanding required of them to practise safely and competently in Aotearoa New Zealand

POSSIBLE ACCREDITATION OUTCOMES AND WHAT THEY MEAN TO AN EDUCATIONAL PROVIDER

The range of possible outcomes is set out in Table 1. The table summarises the justification for each outcome (in terms of accreditation findings) and sets out consequential actions, such as the term to next accreditation/re-accreditation and the need for reporting and additional assessment.

UNCONDITIONAL ACCREDITATION

Unconditional accreditation is granted to programmes that meet all standards. Unconditional accreditation is granted for a five (5) year period.

Unconditional accredited programmes are required to provide a yearly report summarising progress in respect of any recommendations made by the accreditation panel and developments with delivery of the programme(s). Institutes with accredited programmes must allow the OCNZ to visit the programme facility(ies) two times per year in order to undertake monitoring of the programme as required by Health Practitioners Competence Assurance Act, Section 118a.

CONDITIONAL ACCREDITATION

Conditional accreditation may be granted where the programme does not satisfy one or more standards. Depending on the nature of deficiencies, conditional accreditation may be granted for up to two (2) years. Conditions may include, but are not limited to, changes in curriculum, clinical placements, reporting and/or required site visits.

Prior to the end of the period of conditional accreditation, the institution is required to provide a self—review or external monitoring report with supporting evidence to show how deficiencies identified by the accreditation panel have been addressed.

The OCNZ will determine the means to evaluate whether the requirements have been met.

Note: Deficiencies relating to the achievement of a graduate from the programme being fit to practise upon graduating are deemed serious and may result in a decline for new programmes seeking accreditation.

PROVISIONAL ACCREDITATION

Provisional accreditation may be granted to new or revised programmes, which have yet to have graduates emerge.

The overarching view of the OCNZ accreditation panel for provisional accreditation is that the development of the programme already undertaken, and the plans in place for further development of the programme, are collectively of a sufficient standard that it is assessed as likely (although not necessarily certain) that the programme can achieve the full standards.

In evaluating a programme for provisional accreditation standards are interpreted by the assessment. This is against the potential to achieve the requirement by the time students graduate, rather than the actual status of the programme at the time of assessment.

DECLINE

Programmes seeking accreditation may be declined if they fail to meet a number of standards upon review.



Table 1
Accreditation Result –
Quick Reference

Accreditation Status	Term to next assessment	Accreditation Findings	OCNZ Obligations	Possible Outcome of Review Report	Graduate Credit Applies to
Unconditional accreditation	5 years	All accreditation standards are met and no requirements are set, but the panel may make recommendations.	Mid-term report on responses to any recommendations is required. Monitoring site visits to programme is required on a six monthly basis. External monitoring reports may also be required.	No change to unconditional accredited programme is needed, however additional recommendations may be placed on the programme when a report is received.	Graduates of unconditionally accredited programmes are deemed to have graduated from an approved programme of osteopathy from an Aotearoa New Zealand based education provider.
Conditional accreditation	Up to 2 years	One or more accreditation standards are not met, however any deficiencies relating to the achievement of graduate outcomes are assessed as relatively minor and not putting the public at risk of substantial harm. Requirements to fix each deficiency will be made.	Self-review and supporting evidence showing how the requirements have been addressed is required prior to the end of the conditional term subscribed. It is recommended that programme directors who believe they may be in breach of the requirements discuss this as early as possible with the OCNZ or the Accreditation Panel Chair.	Should all the requirements be met, the programme is given unconditional accreditation status and date of next review is set to be 5 years from previous full review done. Example: review done in 2008 with condition placed for 2 year period. In 2010 report is given and unconditional status is received, the date of next full review is 2013. Should requirements not be	Graduates of unconditionally accredited programmes are deemed to have graduated from an approved programme of osteopathy from an Aotearoa New Zealand based education provider.



				at end of the last year within the conditional accreditation period term will result. Example: review done in 2008 with condition placed for 2 year period. In 2010 report is received and requirements not met, the date of removal will be Dec 31st, 2010.	
Provisional accreditation	Two years post the first graduates are awarded degrees	There is reasonable evidence that accreditation standards can be achieved, but the panel may summarise (in the form of recommendations.)	No reporting is required.	No outcomes to note.	Provisional accreditation lapses if conditional or unconditional accreditation is not gained within 2 years of the first graduates completing or at next scheduled accreditation visit (whichever is later)
Decline Accreditation	Two years from decline	There is substantial concern in the programme's ability to meet the standards and to produce graduates who are competent and fit to practice in accordance with the Capabilities for Osteopathic Practice.	No reporting is required.	The programme will be declined and the school will be advised that it cannot offer the programme.	Not applicable.



REQUIREMENTS

Requirements will be set to address any areas where an accreditation panel identifies that standard(s) are not being met. All requirements will be time bound as they will lead to a decision on accreditation status.

Where requirements are identified, accreditiation may be conditional. Requirements must be addressed for accreditation to continue beyond the period of conditional accreditation.

RECOMMENDATIONS

A key objective of the accreditation process is continuous improvement. The accreditation panel may list recommendations, which are not mandatory, but which will, in the opinion of the accreditation panel, improve the programme.

Recommendations are defined as specific suggestions for improvement and while education programmes are not required to act on them, they are expected to report on their consideration of the recommendation and any subsequent action taken.

BENEFITS TO GRADUATES

Only graduates from accredited programmes in Aotearoa New Zealand are eligible to practise in Aotearoa New Zealand and be registered with the OCNZ.

Programmes accredited by the the OCNZ are deemed to be educating students in the most contemporary, current and internationally known practices in osteopathy that meet the OCNZ's Capabilities for Osteopathic Practice.

DECLINED OR REMOVED ACCREDITATION

In cases where accreditation is terminated, a further application will not be considered for two years, when a new panel is formed to undertake the new review.

In making a decision to terminate accreditation, a decision on the extent to which students currently enrolled on the programme can be recognised by the OCNZ will be made by the Council.

MULTIPLE CAMPUS PROVISION

If a programme is offered from an education provider from more than one permanent location, the accreditation panel will visit each location to gain assurance of the standard of provision and achievement of graduate outcomes. If the programme award is undifferentiated, the provision at every campus must satisfy the standard for the programme as a whole to be accredited. The panel will assess the impacts of such aspects as:

- any differences in physical and staffing resources
- any differences in programme structure
- the effectiveness of moderation processes across sites to ensure consistent assessment of common courses.

DISTANCE LEARNING

Panels evaluating programmes that are substantially delivered in some form of distance learning will ensure that the nature of delivery overall provides students with an appropriate learning experience and does not compromise the achievement of graduate outcomes. The panel is expected to consider the adequacy by considering the "student experience". Does the way of facilitating learning by the student through the use of various aids to teaching including block courses, condensed laboratory programmes, transportable equipment facilities etc. create an equivalent learning experience to that experienced by students undertaking an oncampus educational experience?

The evaluation will consider whether the provider is taking reasonable steps to ensure the adequacy of:

any part-time or occasional physical resources such as teaching or laboratory facilities



- instructional design in the development of distance (electronic or hard-copy) learning materials
- laboratory activities, which might include mobile laboratories, laboratory access agreements, use of site visits, virtual laboratory experiments
- online learning management systems
- mechanisms for staff-student, staff-staff and student-student interaction
- all accreditation standards are met.

IN-TERM PROGRAMME DEVELOPMENT

Accredited programmes which undergo substantial changes to structure, content, delivery, or staffing, and/or experience a significant decline in student numbers or institutional support arrangements during the period of their accreditation may be required to undergo re-evaluation prior to the expiry of the current accredited period. It is the responsibility of the education provider to advise the OCNZ of any such changes. The OCNZ will determine the accreditation status of the programme and, in conjunction with the provider, decide if a reaccreditation process is required earlier then the period originally granted as well as the form an assessment will take.

Substantial changes may include, but are not limited to, the following:

- change of qualification title
- changes to regulations concerning entry requirements and cross-crediting arrangements
- changes to the level or credits necessary to gain the qualification
- changes to overall programme objectives
- significant changes to the structure of the qualification
- significant changes to staffing
- significant changes in student numbers that brings the financial or academic viability of a programme into question, or lead to concern as to whether the graduate attributes can be consistently delivered
- changes to the mode of delivery
- a programme being offered at a new site
- introduction of a new major or programme strand.

DISCONTINUED PROGRAMMES

When a provider makes a decision to discontinue delivery of an accredited programme, the provider must advise the OCNZ who will determine the run out period of accreditation of the programme.

PUBLIC REPORTING

After an accreditation decision is made, the OCNZ updates the list of accredited programmes on its website. The list shows the initial and current period of accreditation. Where a programme is no longer accredited the previous period of accreditation is shown. Provisional or conditional accredited programmes are identified as such.

Programme providers are expected to ensure that current and prospective students are aware of the current accreditation status of their programme(s).



OPERATIONAL PRINCIPLES

CONFIDENTIALITY

The OCNZ will not divulge details of investigation, documentation, correspondence and discussions between the OCNZ, the accreditation panel and the institution concerned to third parties or those not involved in the accreditation process without the approval of the institution.

LINKS TO OTHER PROCESSES

New Zealand Qualifications Authority

When reviewing proposed new osteopathy programmes offered within Aotearoa New Zealand the OCNZ will work in co-operation with the New Zealand Qualification Authority (NZQA) as stipulated within their memorandum of understanding. This includes collaboration, parallel processes for institutes, sharing of information and representations of NZQA on the OCNZ accreditation panel.

Universities New Zealand

Osteopathy programmes offered by New Zealand universities must be accredited by the Committee of University Authority Programmes (CUAP).

Requests for academic approval from CUAP must be accompanied by written evidence of consultation with, and acceptability to, the appropriate professional registration or licensing bodies.

In order to respond to this CUAP requirement, for new programmes, the OCNZ will assess new programme proposals to ensure they have a systematic programme development process that suggests:

- alignment to a coherent and recognised body of osteopathy knowledge consistent with the proposed programme title
- engagement with, and consideration of feedback with key stakeholders
- constructive alignment of the proposed curriculum with a set of programme graduate outcomes

OUALITY ASSURANCE PROCESSES

Institutions may have an internal review system or be monitored through the NZQA accreditation process. The OCNZ may consider the reporting and records of these processes during their accreditation process of the programme.

ACCREDITATION VISIT COSTS

Direct costs associated with individual accreditation visits are the responsibility of the institution seeking accreditation. This includes all travel and accommodation costs associated with the the OCNZ accreditation process. Panel members are reimbursed expenses. Refer to Appendix 2 for expense claim guidelines.

The OCNZ will make the travel and accommodation arrangements for the accreditation process.

The amount to be recovered is Gazetted and is currently capped at \$25,000.

ROLES AND APPOINTMENTS

GUIDELINES FOR SELECTION OF PANELS

Accreditation panels are led by a Chair and supported by a Quality Monitor selected by the OCNZ. The panel members are selected by the OCNZ and include representation from NZQA. The institution being accredited is asked to comment on the composition of the panel. The accreditation panel are responsible for the review of an individual programme. The panel will, whenever possible, have one member who has previously been part of the OCNZ accreditation panel or re-accreditation panel.



ACCREDITATION PANEL ROLES

Chair

The Accreditation Chair is responsible for the accreditation report and for leadership of the panel. This person is appointed by the Registrar of the OCNZ.

The Chair has the following responsibilities:

- chairing all plenary sessions
- general co-ordination and problem solving during all plenary sessions and meetings
- reviewing high-level considerations such as institutional and school/deperatment governance, strategy, finance and culture
- liaison with representatives of the programme being accredited or re-accredited
- providing verbal feedback of accreditation outcomes at the end of meetings
- approving final reports before submission to the OCNZ
- providing the OCNZ with feedback on the contributions of panel members to assist with future accreditation panel selection
- provide feedback on the accreditation process.

Quality Manager

The Quality Manager will be selected by the Register of the OCNZ following confirmation by the Chair of the accreditation panel.

Quality Manager responsibilities are:

- collecting and collating evidence from the institutions
- ensuring that all necessary information to support the panel's findings is verified
- ensuring that any concerns are reported to the Accreditation Chair
- collating panel member submissions for plenary sessions
- producing a panel report, within three (3) weeks of the accreditation meetings.

ACCREDITATION PROCEDURES

The accreditation procedure for a programme comprises the steps set out below:

THE REQUEST FOR ACCREDITATION

The institute submits a request along with the Accreitation Application Form (Appendix 3) to the Registrar of the OCNZ for a programme to be accredited.

SCHEDULING OF ACCREDITATION VISIT

The OCNZ will acknowledge the request and schedule a date for the accreditation visit in consultation with the institution. A date will be established by which the institution must submit its documentation to the OCNZ; the OCNZ estimates a date by which it will make a decision on accreditation following consideration of the panel's report.

APPOINTMENT OF ACCREDITATION PANEL

The accreditation panel will be selected in accordance with section 15.



FINALISATION OF VISIT TIMETABLE (accreditation)

The OCNZ, with assistance from the accreditation panel, will finalise the accreditation visit timetable with the institution.

A visit will be scheduled and notification of at least four weeks before the visit will be made. Visits will normally extend over one and a half days, but may take longer. A sample timetable of the visit is given in Appendix 1.

SUBMISSION OF DOCUMENTATION

At least eight (8) weeks prior to the accreditation the institute is required to submit an Accreditation Standrad Review for Institutes (seen in appendix 4) and supporting documentation setting out how the programme address(es) the standards. A suggested list of documents can be found in appendix 5.

INITIAL REVIEW OF DOCUMENTATION

On receipt of the documentation, the OCNZ will send them to the quality monitor who will review the adequacy of the documentation. If the documentation is considered seriously deficient the institute will be advised and the accreditation process will be delayed until adequate documentation is received, or the visit cancelled. All costs of rescheduling is the responsibility of the institute.

REVIEW OF DOCUMENTATION BY PANEL

The panel will receive and review the documentation from the institute once it is deemed sufficient by the quality manager. The panel will have at least one (1) month to review the documentation.

PRE-VISIT TELECONFERENCE BY PANEL

Two (2) weeks prior to the visit the panel will confer to discuss any preliminary findings and to particularly identify any concerns for which additional information is required from the institute. The institute will be advised accordingly and requested to provide a formal response, either prior to, or at the time of, the accreditation visit.

The chair will use the outcomes of the panel's discussion(s) to develop a set of targeted (and generic) questions to guide the accreditation panel during the visit.

PANEL ORIENTATION AND TRAINING

The accreditation panel normally convenes the afternoon before they visit the institute. Most of this session is treated as an orientation and briefing session, where panel members are given advice on their role, responsibilities and procedures during the visit. The objective is to ensure that the panel is consistent in their standards and approach across all programmes being accredited in Aotearoa New Zealand.

Panel members are expected to have reviewed all documentation before arriving at the orientation session. They will have been provided with worksheets for the programme being reviewed. These worksheets are intended as an aid to the panel to ensure they comprehensively evaluate the programme. The OCNZ does not insist these worksheets are completed by each panel member, but does expect the areas for evaluation set out are considered in a systematic manner by the panel using the indicators of attainment to support their evaluation.

Prior to the orientation session each panel member will send their evaluation to the quality monitor who will collate the forms and have a collated form available at the orientation session for the panel to review and consider questions for the institute's representatives.



ON-SITE VISIT

The visit will focus principally on:

- verifying the documents supplied
- · verifying that the stated programme objectives and graduate competency profiles are being met
- evaluating factors that cannot readily be described in, or verified from, documentation provided by the institute.
- auditing quality systems and processes of the institution or meeting with the institution's quality manager.
- meeting with the Dean, Heads of Departments or their equivalents and representative samples of students, academic staff, technical support staff, alumni and industry advisory group members; some of the panel members will accompany the accreditation anel Chair when they meet with the Vice Chancellor or equivalent of the institute.
- reviewing and discussing assessment procedures and examining representative samples of assessment
 tasks of the programme, students' work (both marginal and highly capable students), focusing
 particularly on whether all aspects of the graduate capability profiles are being proficiently and
 comprehensively assessed.
- evaluating factors such as the professional culture in the institute, the morale and calibre of the staff and students, and the general awareness of current developments in osteopathy education and practice;
- reviewing facilities, particularly simulation laboratories and independent study facilities, including the library and information technology.
- examining and discussing evidence of how well the quality processes are functioning.

THE EXIT MEETING

The exit meeting should be confined to:

- Stating the likely outcome of the visit. The Chair will note what they will be recommending to the OCNZ, who will make the final decision
- stating any requirements and if possible the method and timing of any follow up
- noting any recommendations.

The purpose of the exit meeting is to report findings; it is not the place to conduct open or detailed discussions of any of the recommendations or requirements outlined.

FINAL DRAFT REPORT AND RESPONSE FROM THE INSTITUTE

As soon as possible after the visit, normally within three (3) weeks, a draft report is prepared and sent to the institute.

The institute has two weeks from the date of receipt of the report to provide a written response if it so wishes. The response is normally limited to correcting any errors of fact, but it may comment on any issue which the institute feels the panel has misunderstood.

REPORT AND COUNCIL DECISIONS

The report and recommendations are then finalised by the panel noting any response from the institute, and forwarded to the OCNZ for review and consideration at their next Council meeting.

The Council formally accepts the report and considers the recommendations outlined in it. The Chair of the accreditation panel is invited to attend the Council meeting at which the visit report is considered.



NOTIFICATION OF OUTCOME

The outcome of the accreditation process is then communicated to the Dean or Head of Department and the OCNZ listing of Accredited Programmes is updated, as appropriate. A copy of the final accreditation report will be attached to the notification letter and accreditation certificate will be produced for all conditionally or unconditionally accredited programmes.

APPEALS

If the institute wishes to appeal against a refusal to accredit a programme, an appeal must be lodged with the Registrar of the OCNZ within twenty (20) working days of receipt by the institute of the accreditation decision and must state the grounds on which it is based. Grounds for the appeal are normally limited to errors of fact or breach of the policy, standard and/or procedures set out in this manual. The OCNZ Council shall consider the appeal and may appoint an appeals panel of no fewer than one experienced academic and one experienced practising osteopath to investigate the appeal and advise the Council. The Council's decision, which is final, will be given within eight (8) weeks of receipt of the appeal.

ASSISTANCE TO INSTITUTE

GUIDANCE AND ADVICE REPORTS

Institutes of osteopathy programmes can request that the OCNZ nominate an advisory panel to review new programmes or proposed programmes prior to applying for accreditation. The panel then provides a Guidance and Advice Report indicating the readiness of the programme in question for accreditation.

Institutes are expected to meet the full costs associated with Guidance and Advisory Reports, and to make their own arrangements with advisory panel members.

Guidance and Advisory Reports should be taken as advisory only and cannot be taken as assurance that the programmes reviewed will necessarily be granted accreditation.

Members of any advisory panel may not serve on the accreditation panel considering the programme.



APPENDIX 1 - TIMETABLE EXEMPLAR

A possible accreditation vist agenda is given below.

A specific visit programme will be developed for each institute to ensure the accreditation panel has the time necessary to assess each new programme.

Notes

- 1. There is some flexibility in the order and timing of activities but the general aim is to consider the information presented in a logical order.
- 2. Experience has shown that some presentations tend to repeat material already provided. Care should be taken to avoid this where practical.

Period	Venue	Team activity			
		Two to three weeks prior to visit			
1-2 hours	Teleconference Accreditation panel teleconference to identify gaps in documentation and key areas of focus for visit				
	Afternoon or evening before visit				
At least 4 hours		Panel introductions and advice on role and functions if not done previously. Discuss gaps in documentation and list specific questions for the institute.			

Day one of the Visit

Period	Venue	Team activity
1 hour		Opening session: panel meets with senior departmental staff Introductions. (10 mins) Overview presentation by Dean on recent developments and strategic directions. (30 mins)
1.5 hours	Departments	The panel meet with relevant programme leaders. Objective : opportunity for further discussion at programme level. Areas for discussion should include: curriculum developments within individual programmes, coverage of the OCNZ Capabilities for Registration and Continuing Practice, staffing, departmental research activity, and stakeholder input.
1 hour	·	Meet with Head of School and their most senior staff (this should be limited to 1 to 3 people and should be focused on academic quality systems).
1 hour (Lunch)		Lunch with Programme Advisory Group (or like) members and stakeholders. Objective : review level of engagement with industry and consumers and level of stakeholder support.



Period	Venue	Team activity
1 hour	Departments	The Panel meet with relevant academic staff. Objective : Consideration of issues relating to: curriculum development, teaching and learning approaches, assessment, programme objectives, graduate profile, workloads, and resourcing, technical support, research, professional culture
1.5 hours	Departments	The Panel reviews samples of student work, examination scripts, projects and assessment tasks Objective : Review learning outcomes against course descriptors and the OCNZ Capabilities for Registration and Continuing Practice.
1 hour	Departments	Panel meets with selection of undergraduate students.
30 Minutes	Central	Private session for panel.
45 minutes - early evening		The Panel meets with recent alumni and/or postgraduate students.
Later evening	Off campus	Working dinner for the Panel while revieiwing the days findings.

DAY 2

Period	Venue	Team Activity
1 Hour	Central	Private session for Panel. Objective: consolidate initial findings. Note: Programme leaders available to discuss issues arising from day 1, as required.
1 hour	Departments	The Panel tour facilities, focusing on classrooms, laboratories and independent study facilities.
1 hour	Central	The Panel meets with the Head of School. Objective : Review matters relating to institutional strategy, governance and support.
	Potential Session	Staff research, teaching and learning support initiatives.
	Potential Session	Student learning support initiatives.
	Potential Session	Work experience support initiatives.
1 hour	Departments	The Panel reviews student work and assessment tasks. Objective : Further opportunity to review samples of student work, examinations/projects.
30 Minutes	Departments	The Panel meet with technical staff. Objective : Consideration of levels of administrative and technical support and associated systems.
2 hours	Central	Private session for the Panel. Objective : Consolidate findings and begin to draft report.
30 min	Central	Exit Meeting. Objective : Present verbal report on findings to senior management.



Note: the institution is expected to provide lists of names and titles/affiliations of attendees at panel sessions with academic staff, students, alumni and advisory group members. Where possible, name badges should be provided to assist with interaction.



APPENDIX 2: EXPENSE CLAIM GUIDELINES

Institutions seeking accreditation of osteopathy programmes by the OCNZ are expected to cover all direct costs associated with the accreditation process. The following guidelines have been developed to ensure consistency across accreditation costs.

1.1 Overseas Representatives

The OCNZ considers possible Australian panel members and the travel costs against the advantages the representative brings to the panel. The OCNZ considers the opportunity to develop networks, and the ability to benchmark standards to those used in Australia.

Australian representatives have direct costs associated with their participation in the accreditation process that will be reimbursed. They would be expected to travel economy class if the flight time is less than five hours. The OCNZ will arrange travel. They will have their accommodation costs met for one day either side of the actual accreditation visit, for example, if the visit required two nights' stay, then overseas representatives would be accommodated for up to four nights.

1.2 Travel within New Zealand

Travel within New Zealand will be economy class. Bookings will be made at least one month in advance so advantages can be taken of airfare discounts. If panel members use their own vehicle when travelling to participate in an accreditation visit, they will be reimbursed at the OCNZ standard mileage rate. A claim form will be provided.

1.3 Hotel Accommodation

The OCNZ will make all accommodation and meeting room bookings.

1.4 Meals

Morning and afternoon teas and lunches are arranged by the institute during visits and evening meals are organised by the OCNZ unless other arrangements are requested.

1.5 General Expenses

Panel members receive a set fee which is agreed upon in the service agreement signed by the panel member and the Registrar of the OCNZ. If a panel member is coming as a representative of an institution, the institution will be paid the invoiced amounts.

1.6 Costs of Extra Activities

If the institution wishes to use local or Australian panel members for other contiguous reviews or activities before or after the accreditation visit, the costs of doing so will be the responsibility of the institute.

Costs of the attendance by an accreditation panel member at any meeting where accreditation reports are considered, are the responsibility of the OCNZ.



APPENDIX 3 – ACCREDITATION APPLICATION FORM

INSTITUTE DETAILS		
Institution Name:		
Head Office Mailing Address:		
Head Office Physical Address		
Does the institute have a constitu	ution or principal purpose?	□ YES □ NO
If yes, please attach it to your app	olication or cut and paste below:	
Dean or Head of School:		
CONTACT DETAILS		
Will the person noted above be th	ne lead contact for OCNZ: ☐ YES ☐ NO	
If you answered NO above, who w	vill be the lead contact:	
	Landline:	
Lead Contact Details	Mobile:	
	Email:	
Lead Contact Mailing Address:		



PROGRAMME DETAIL	<u>LS</u>						
Programme Name:							
When is the program	me sch	eduled to be par	t of the i	nstitute's curricul	um if accredit	ed?	
SUGGESTED DATE:							
Student capacity:	T	OTAL: :		Overseas:		Domestic:	
Please list all physical	locatio	ons the programi	ne will b	e delivered:			
	Physic	cal Address:					
	Mailiı	ng Address:					
Daliana Cita 4	Site V	Vebsite:					
Delivery Site 1	Does the institute own this site: ☐ YES ☐ NO						
	If leased please include tenancy agreement with application.						
		act Person:	de tena	ncy agreement w	теп аррпсастог	1.	
		act Phone:					
	Stude	ent Capacity:					
	Physic	cal Address:					
	Mailiı	ng Address:					
Dolivory Sito 2	Site V	Vebsite:					
Delivery Site 2	Does the institute own this site: ☐ YES ☐ NO						
	If leas	sed please includ	e tenan	cy agreement with	h application.		
		act Person:	2 2011411	-, 20. 00			
		act Phone:					
	Stude	ent Capacity:					



	Physical Address:				
	Mailing Address:				
Delivery Site 3	Does the institute own this site: ☐ YES ☐ NO				
	If leased please include tenancy agreement with application.				
	Contact Person:				
	Contact Phone:				
	Student Capacity:				
Will you be contractir	g other providers for any part of the programme? \square YES $\ \square$ NO				
If yes for each provide required cells below to	er please provide the following. If additional spaces are needed please cut and paste the he three provided.				
	Their Role:				
	Their Responsibilities:				
	What pre-enrollment contact, if any, do they have with students?				
	Planned care and/or service to students.				
Name of Provider 1	If the students will be going to the providers' place of work, please list their address				
		-			
	Please include a copy of your contract with the provider in your application.	_			



	Their Role :				
	Their Responsibilities:				
	What pre-enrollment contact if any do they have with students?				
Name of Provider 2	Planned care and/or service to students.				
	If the students will be going to the providers' place of work, please list their address				
	The state of the s				
	Please include a copy of your contract with the provider in your application.				
	Their Role :				
	Their Responsibilities:				
Name of Provider 3	What pre-enrollment contact if any do they have with students?				
	Planned care and/or service to students.				
	If the students will be going to the providers' place of work, please list their address				
	Please include a copy of your contract with the provider in your application.				
PROVIDER ST					
Has the progr	amme been assessed for accreditation through NZQA ? ☐ YES ☐ NO				
If yes when? _	If yes when? Please provide evidence of this.				
List the conditions or attach them to this application.					



Please list below the key personnel for this programme. For each person listed you will need to attach proof of their qualifications to this application.				
NAME	Title/Responsibility			
	+			



BUSINESS AND FINANCIAL STANDING

Please provide a business plan for the next three years. The plan should include financial resourcing that demonstrates the capacity to provide education of a satisfactory standard.

Attach a copy of the business plan to this application.

Please provide audited general financial statements for the last two recent years for the institute. Attach audited general purpose financial statements to this application.

Projected Student and Staff Numbers						
	Year 1		Year 2		Year 3	
	EFTSL	Head	EFTSL	Head	EFTSL	Head
		Count		Count		Count
Commencing						
Overseas Students						
Returning						
Overseas Students						
Total						
	FTE	Head	FTE	Head	FTE	Head
		Count		Count		Count
Academic Staff						
Supporting Staff						
Total						



EDUCATION RESOURCES					
For each delivery site, describe the library and learning resources available to staff and students for this programme.					
Cut and paste additional rows as neede	Cut and paste additional rows as needed below the three provided.				
	RESOURCES				
Delivery Site 1					
Delivery Site 2					
Delivery Site 3					
Are these resources available currently? ☐ YES ☐ NO					
If ye,s please attach a list of the relevant library holdings to this application.					
If no, please attach evidence on the planned approach to acquire the resources					



For each delivery site describe the facilities for education and learning available to staff and students for this programme.

p. eg. ae.	
Cut and paste additional rows as neede	ed below the three provided.
	RESOURCES
Delivery Site 1	
Delivery Site 2	
Delivery Site 3	
For each delivery site describe the teac programme.	hing and learning equipment available to staff and students for this
Cut and paste additional rows as neede	ed below the three provided.
	RESOURCES
Delivery Site 1	
Delivery Site 2	
•	
Delivery Site 3	



APPENDIX 4 ACCREDITATION STANDARDS REVIEW FORM FOR INSTITUTES nstitution Name:			
Programme Name:			
Lead contact details for queries in regards to this form	Landline:		
	Email:		

Please ensure that your responses include reference(s) to the document(s) with specific sections or pages that you believe hold evidence on how the programme meets the standard.

In instances where you believe a similar reference can be used in a subsequent standard you may place a reference to the previous standard for the accreditation panel to view.



Section 1: Programme overview, philosophy and purpose		
Standard	Evidence Required	Commentary on how programme meets the standard
1.1 The programme must include the title osteopathy and be delivered from an	1.1.1 Name of the institution.	
institution that is an Aotearoa New Zealand University or Institute of Technology or Polytechnic.	1.1.2 Name other existing osteopathy entry-level programmes within the institution or within New Zealand.	
1.2 The programme of study leads to the award of New Zealand Qualification Authority	1.2.1 Name of the level of award which needs to include the words osteopathy.	
(NZQA) Level 7 or above. This is a minimum of 120 credits of level 5 and above standards including 72 which must be Level 7 or above.	1.2.2 Indicate the length of the programme in years, semesters and weeks.	
	1.2.3 If the programme is new and will replace an existing programme, indicate which programme it will replace and outline the process and proposed date for phasing out the existing programme.	
1.3 The programme is delivered from a distinct osteopathy entity (e.g. osteopathy	1.3.1 Indicate where the programme aligns within the organisation using an organisational chart.	
school or department) and the status of this entity is equivalent to other comparable entry-level professional programmes.	1.3.2 State the mission of the institution and outline the way this mission influences the osteopathy programme.	
	1.3.3 Comment on any specific institutional focus that influences the delivery of the osteopathy programme e.g. a specific research agenda, a shift to graduate entry professional programmes, a focus on regional/rural remote issues, a focus on primary care.	



Standard	Evidence Required	Commentary on how programme meets the standard
1.4 The programme has a documented philosophy which includes a client centred, osteopathic view of people.	1.4.1 Provide the relevant documents that demonstrate this philosophy.	
1.5 The elements of the programme philosophy are congruent, and provide a comprehensive basis for the programme.	1.5.1 Provide programme documents that demonstrate that the philosophy is embedded throughout the curriculum and informs graduate outcomes.	
1.6 The philosophy and purpose of the programme reflect concepts of osteopathy shared by the international community of osteopaths.	1.6.1 Include key references.	



Standard	Evidence Required	Commentary on how programme meets the standard
1.7 The philosophy and purpose of the programme reflect current and predicted health and welfare needs, systems and priorities of the Aotearoa New Zealand population. This should include that the course is cognisant of Māori tribal tikanga, te reo and traditions; reflecting the entitie's commitment to the Treaty of Waitangi.	 1.7.1 Provide programme documents that demonstrate the programme incorporates the health and welfare needs, systems and priorities of Aotearoa New Zealand and the geographical region. 1.7.2 Provide a detailed outline of the philosophy, purpose, and graduate outcomes of the programme as they pertain to Māori peoples. 1.7.3 Include key references. 	
1.8 The programme is delivered in a research context that contributes to the advancement of osteopathy and informs the programme. The programme needs to evidence development in student competence through academic staff contribution of local evidence to inform practice. The entity should evidence their encouragement of staff being active in the research culture of Aotearoa New Zealand.	1.8.1 Provide evidence of the way the institution supports osteopathy scholarship and research, or has the structures in place to do this as the programme develops.	
1.9 There are aims and objectives for the programme which identify expected graduate outcomes and these are congruent with the philosophy and purpose of the programme.	1.9.1 Provide programme documents that outline the aims and objectives. 1.9.2 Indicate how the programme duration and stated learning outcomes reflect the nominated NZQA Framework level 7 requirements.	



Section 2: Curriculum Content and Sequence		
Standard	Evidence Required	Commentary on how programme meets the standard
2.1 The curriculum content and process is clearly articulated, planned, systematically scheduled and managed effectively.	2.1.1 Provide an overview of the curriculum content and sequence for each semester of the programme.	
	2.1.2 Provide individual subject/course outlines as provided to the students, including an abstract, objectives /learning outcomes, content overview, prescribed textbooks, details of assessment, teaching and learning strategies.	
	2.1.3 Provide copies of current timetables, or outlines of teaching activities in each subject, for all years of the programme, in a format that indicates the time and study demands for students.	
2.2 The curriculum content and sequence is congruent with the osteopathy philosophy of the programme.	2.2.1 Demonstrate how the osteopathy philosophy of the programme informs and shapes the curriculum content, the sequence and delivery of the programme.	
2.3 The curriculum is designed, developed and revised by osteopaths with relevant practice education/clinical and educational curriculum design expertise.	 2.3.1 Provide the name, title, qualifications and contact details of person(s) developing, updating or modifying the programme. 2.3.2 Provide evidence that the academic staff members responsible for new curriculum have demonstrated capacity to develop innovative and contemporary osteopathy education programmes. 	
	2.3.3 If there are aspects of the programme that were not designed and developed by osteopaths (e.g. foundation subjects such as anatomy; psychology, sociology) explain how these aspects of the programme are integrated into an osteopathy framework in the curriculum.	
	2.3.4 Indicate how the osteopathy perspective is incorporated into any inter-professional aspects of the programme.	



Standard	Evidence Required	Commentary on how programme meets the standard
2.4 The curriculum is developed through consultation and collaboration. The conceptual framework is grounded in current osteopathy and osteopathic science knowledge that is demonstrated to the Aotearoa New Zealand context.	2.4.1 Provide evidence of the way this consultation has shaped the curriculum.	
2.5 The curriculum content and process addresses all of the knowledge, skills and attitudes in this document to equip graduates with the knowledge, skills and attitudes to work with individuals.	2.5.1 Provide a detailed curriculum map to indicate where and how the units and elements map to the Capabilities for Osteopathic Practice. 2.5.2 Indicate how the knowledge, skills and attitudes embedded within the units of competence and performance indicators are developed for students across all years of the curriculum.	



Standard	Evidence Required	Commentary on how programme meets the standard
2.6 The programme is structured to meet the following guidelines:	2.6.1 Provide evidence of how these approaches are addressed in the curriculum.	
 60 per cent is focused on osteopathy (including clinical practice to integrate knowledge) 		
 10 to 30 per cent is focused on knowledge supporting an understanding of body structure and function and biomedicine (including practice education/clinical to integrate knowledge) 		
10 to 30 per cent is focused on knowledge supporting an understanding of the human and social environment, and social perspectives of health (including practice education/clinical to integrate knowledge).		
2.7 The programme content includes approaches to health and osteoapthy for enablement and wellbeing.	2.7.1 Provide programme documents which demonstrate how the programme prepares graduates in accordance with the expectations of practitioners' key practice areas, as well as new and emerging practice areas.	
	2.7.2 Provide evidence of the curriculum content focussing on the health of Māori and evidence of the contribution of Māori to the development of the curricula.	
	2.7.3 Provide evidence that the programme content is responsive to international, national specific practice standards that have been developed by the profession, and indicate how these inform the curriculum.	



Standard	Evidence Required	Commentary on how programme meets the standard
2.8 The curriculum content reflects current and future emerging practice areas of Aotearoa New Zealand. This includes government strategic goals and policies along with public and private sector initiatives.	2.8.1 Provide evidence that the programme meets the standard (e.g. outline the theories and research used, collaborative relationships with other osteopathy programmes, peer review processes, faculty exchange and involvement of international educators in programme review and development.)	
2.9 Contemporary national and international theories, research findings, osteopathy practice and expectations of professional practice inform the curriculum.	2.9.1 Provide evidence that the programme meets the standard (e.g. outline the theories and research used, collaborative relationships with other osteopathy programmes, peer review processes, faculty exchange and involvement of international educators in programme review and development.)	



Section 3: Educational Methods		
Standard	Evidence required	Commentary on how programme meets the standard
3.1 A contemporary educational philosophy underpins teaching and learning in the programme.	3.1.1 Outline the rationale for this educational philosophy and include key references.	
3.2 National and international educational theories and research inform the educational methods used within the programme.	3.2.1 Show examples of academic research informing delivery of the programme as required for degree approval from NZQA.	
3.3 The range of educational methods used supports the development of graduate knowledge, reasoning, practice skills and attitudes including the OCNZ Capabilities for Osteopathic Practice.	3.3.1 & 3.4.1 Describe the range of educational/teaching and learning strategies used within the programme including the underlying premise for their inclusion (refer to individual subject outlines to illustrate this). Outline the evidence which supports the	
3.4 The educational methods used support the development of life-long learning behaviour including the OCNZ Capabilities for Osteopathic Practice.	choice of teaching and learning approaches used, including key references.	
3.5 The educational methods support the development of graduates to work as effective members of inter- professional teams.	3.5.1 Outline the activities used to support development of knowledge of the role and contribution of the other professionals involved in delivering client services, and to develop cooperative and collaborative working relationships with other members of a team.	



Standard	Evidence required	Commentary on how programme meets the standard
3.6 Assessment methods are contemporary and congruent with the educational approach of the programme.	3.6.1 Describe the range of assessment strategies used and indicate how assessment items ensure students meet the subject and the programme learning objectives.	
3.7 The range of assessment methods used support the development of graduate knowledge, reasoning, practise skills and attitudes developed by the programme.	 3.7.1 Outline the research evidence for the assessment processes used including key references. 3.7.2 Indicate the strategies used to assure the quality of the assessment process (e.g. committee review of exam questions, documentation of expected answers, and moderation between markers). 3.7.3 Outline strategies used to manage poorly performing and failing students. 3.7.4 Describe the processes and methods used to evaluate a student's performance in clinical practice (e.g. learning agreements, reflective assignments.) 	
3.8 The assessment strategies used are appropriate for developing graduates who are safe and competent to practise against the OCNZ Capabilities for Osteopathic Practice and Code of Ethics. Where a student is granted dispensation(s) or exemption(s) from demonstrating one or more competencies (for example on the basis of an impairment), or any skill or knowledge of the area contributing to a competency there are processes to record the decision and report to the OCNZ these exemption(s) and/or dispensation(s) on the completion of the programme by the student.	3.8.1 Comment on the cumulative assessment process or specific items of assessment used for this purpose. 3.8.2 Provide programme documents that indicate how and where ethical and professional conduct is assessed throughout the programme and how and where graduates are made aware of their responsibilities as outlined in the OCNZ Capabilities for Osteopathic Practice and Code of Ethics. 3.8.3 Comment specifically on strategies used to ensure core osteopathy practice skills as identified by key stakeholders. 3.8.4 Provide evidence of record keeping and reporting of dispensation(s) or exemption(s).	



Section 4: Clinical Practice		
Standard	Evidence required	Commentary on how programme meets the standard
 4.1. Clinical practice experiences will encompass all of the following parameters: a range of personal factors such as: gender ethnicity that is reflective of the 	4.1.1 Provide detail of the range of clinical practice opportunities available for students (clinical practice is the time where students implement an osteopathy process, or an aspect of this process, with or for a living person and may include up to 20 per cent of well-designed simulation experience).	
population that will be recipients of osteopathy; individual, community, group and population approaches • health conditions that affect different	4.1.2 Provide programme documents that identify the systems used and the administrative processes in place to manage, monitor and report on student clinical practice.	
aspects of body structure and function that cause different kinds of activity limitations social care	4.1.3 Comment on areas of strength/difficulty in obtaining adequate range of clinical placements and/or supervision, and the strategies used to obtain the required number of clinical placements.	
different delivery systems such as:hospital and community	4.1.4 Provide evidence that demonstrates all students have the range of clinical practice experiences required.	
 public, private, and non government organisations health and educational urban and rural, local and international clinical practice. 	4.1.5 Outline the systems and processes in place to ensure students are exposed to a range of clinical and non- clinical practice education experiences including role-emerging and more traditional practice.	
Note: Clinical practice that takes place outside of Aotearoa New Zealand must meet OCNZ Capabilities for Osteopathic Practice and Code of	4.1.6 Provide evidence that the practice education experiences support the development of students' understanding of the role of osteopathy and the contributions of other professions.	
Ethics. It must not compromise the student's ability to show competence in this context.	4.1.7 Evidence from clinical placement assessors.	



Standard	Evidence required	Commentary on how programme meets the standard
4.2 Clinical practice education experiences are of sufficient duration to allow integration of theory to practise with a minimum of 1000 hours normally required. All clinical activity must be recorded in a log book held by the student and signed off by the clinic lecturer.	 4.2.1 Provide detail of all activities contributing to student clinical practice experiences. 4.2.2 Outline the nature and extent of consultation with local osteopathy practitioners and others in relation to gaining and sustaining placements. 	
4.3 There are sufficient numbers of clinical placements available for students that support every student's learning abilities and activities.	 4.3.1 Provide documentation which outlines the strategies used to ensure a minimum of 1000 hours of clinical practice which will be completed by students in the programme. Also indicate where students may experience extended clinical practice placement that support the integration of theory and practice. 4.3.2 Provide evidence of agreements that ensure students have access to an appropriate range of clinical placements. 	
4.4 There are sufficent osteopathic supervsiors in clinical practice to provide oversight and support for students.	4.4.1 Outline the process to ensure: all supervisors of clinical practice are osteopathic practitioners with at least two (2) year's experience, or an experienced osteopathic educator; supervision requirements match the student's learning level (e.g. close direct supervision progressing to more independent practice); an osteopathic educator provides effective supervision where the supervisor is not on site and/or where a person other than an osteopath has a supervisory role (e.g. in a project placement).	



Standard	Evidence required	Commentary on how programme meets the standard
4.5 Administrative arrangements for fieldwork meet legal statutory obligations.	4.5.1 Outline the legal agreements in place, and include examples of contracts, memoranda of understanding.	
	4.5.2 Provide evidence that indicates affiliation and/or placement agreements are in place for all clinical placement locations.	
	 4.5.3 Provide evidence that agreements indicate arrangements for public and student protection (e.g. Working with Children checks, police checks, immunisation, safe food handling, first aid, public liability insurance/indemnity for practice education/fieldwork experiences, work health and safety legislation).^{3.} 4.5.4 Provide evidence of process for managing students raising concerns about clinical placements. 4.5.5 Identify the process for managing concerns raised by students about another health practitioner. 	
4.6 Clinical placement is normally distributed throughout every year of the curriculum.	4.6.1 Describe the distribution of hours of clinical practice through the curriculum, and provide a rationale for this distribution. Include the documentation used to log the required hours of experience.	
4.7 Learning agreements are used to guide and facilitate learning during clinical practice.	4.7.1 Include, as an attachment, examples of student learning agreements.	

³ Vulnerable Children's Act 2014



Standard	Evidence required	Commentary on how programme meets the standard
4.8 Clinical practice areas are prepared for student placements, and there is ongoing support and development of supervisors. Supervisors know and practise the process in place of	4.8.1 Indicate how the quality of supervision is promoted, and comment on: strategies used to respond to student feedback about their supervision; strategies used to ensure all supervisors of clinical practice are adequately trained, supported and mentored.	
reporting concerns of a student's fitness to the institute. Identify the process which supervisors use to raise concerns about a student's fitness to practise.	 4.8.2 Provide documentation which details the support provided to supervisors in distant, rural and regional locations. 4.8.3 Outline guidelines or policy to promote a situation in which the number of students placed at a clinical placement will be in 	
4.9 The programme adequately prepares students for their clinical placements so that they are fit to practise. Should there be concerns of a student's fitness to practise or health issues, a process is in place to record and report this concern.	4.9.1 Provide documentation on the strategies used to ensure the roles and responsibilities of students on clinical placement, including expected professional behaviours and attitude standards including the OCNZ Capabilities for Osteopathic Practiceand Code of Ethics are made known to them, made clear, explicit and relevant to the particular context. This should include the compabilities and information on fitness to practise and requirements for registration.	
	 4.9.2 Provide detail about how the prerequisite knowledge assumed by the clinical placement agency is obtained and made known to students. 4.9.3 Provide documented evidence on how the roles and responsibilities of clinical practice supervisors and educators are made known to students, and made clear, explicit and relevant to the particular context. 	
	4.9.4 Provide evidence of process to record and report fitness to practise concerns.	



Standard	Evidence required	Commentary on how programme meets the standard
4.10 Clinical practice draws on the literature and relevant research to support the programme's approach to the establishment, implementation and evaluation of placements.	 4.10.1 Indicate how the evidence based on clinical practice education inform and is applied to the development, implementation and evaluation of the clinical practice (e.g. supervisory strategies, supervisor education, teaching learning strategies, types of clinical placements offered). Include key references. 4.10.2 Identify and describe simulation activity provided within the curriculum. 	
4.11 There are clear policies on the use of any paid clinical placements ensuring that any employment issues that may reflect fitness to practise concerns are known to the institution and recorded.	4.11.1 Provide policy.	



Section 5: Local Context of Professional Practice		
Standard	Evidence required	Commentary on how programme meets the standard
5.1 The curriculum content is relevant to Aotearoa New Zealand national and local region health, wellbeing and osteopathy needs.	5.1.1 Provide documented evidence of strategies used to ensure the curriculum content is relevant to the needs of the health, welfare, and disability systems including ACC; and legislative environment in which the programme is being delivered.	
	5.1.2 Outline the strategies used to enable students to learn how to adapt their approach to take account of the local context of their practice e.g. clinical placements in role-emerging locations as well as hospital based acute care; learning tasks that address a diverse range of social, economic and cultural factors.	
5.2 The programme prepares graduates to engage in culturally safe practice, in particular practices relevant to the health and well-being of Māori peoples.	5.2.1 Identify how the curriculum incorporates the principles/standards of culturally safe practice.5.2.2 Provide specific description of content with particular relevance for the health and well-being of Māori people.	
5.3 The programme incorporates content in response to major national and local health priorities and practice standards of Aotearoa New Zealand.	5.3.1 Provide specific detail of how the curriculum incorporates and updates current health priority policy directions set by the government, consumer bodies and advocacy organisations.	
	5.3.2 Indicate how knowledge gained directly from the osteopathy practice field informs the delivery of the curriculum.	



5.4 Academic staff have up-to-date knowledge of the local contexts of practice.	5.4.1 Provide documented evidence on the strategies undertaken to ensure academics maintain up-to-date knowledge of the local contexts of practice.	
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Section 6: Educators		
Standard	Evidence required	Commentary on how programme meets the standard
6.1 The academic leadership of the programme is provided by an osteopath. The academic leader will: have experience in leadership in the osteopathy practice field and/or higher education sector; have a post-graduate qualification, normally at masters level, and research experience in osteopathy; have demonstrated capacity to develop innovative and contemporary osteopathy education at undergraduate and postgraduate level, and has demonstrated leadership capacity in complex and changing environments across multiple sectors (e.g. education, health, disability, community, higher	6.1.1 Provide the name, title, qualifications, CV and contact details of the academic leader of the programme. 6.1.2 Provide the name, title, qualification, CV and contact details for the people who lead specific elements of the programmes. E.g. clinical placement coordinator. 6.1.3 Provide evidence of registration and current practising certificate with the OCNZ.	Commentary on now programme meets the standard
education); have the capacity to manage complex university processes to ensure the academic approval of the programme.		



Standard	Evidence required	Commentary on how programme meets the standard
6.2 There are a sufficient number of appropriately qualified osteopathic academics to ensure effective development and delivery of the programme.	6.2.1 Provide evidence that the number of academics is sufficient for the size of the intake and demands of the curriculum to be implemented.	
	6.2.2 Indicate how the balance of full-time, part-time, sessional, contract and tenure ensures effective programme development and delivery.	
	6.2.3 Where there are aspects of the programme not fully supported by the academic staff, indicate strategies used to address this.	
	6.2.4 Provide evidence of registration and current practising certificate with the OCNZ.	



Standard	Evidence required	Commentary on how programme meets the standard
6.3 The combined qualifications and experience of the academic staff supports the curriculum content and education methods used in the programme.	6.3.1 & 6.4.1 Detail staff expertise that prepares them to deliver the programme; include comment on how the mix of professional backgrounds, qualifications and experience of the educators enables the delivery of the programme that is	
6.4 Academics have a relevant qualification that is higher than the qualification received by graduates of the programme and/or can demonstrate excellence in their area of teaching.	consistent with its stated philosophy and purpose. Attach CVs for those in leadership positions. 6.3.2 & 6.4.2 Provide an outline of the expertise of osteopathy educators (permanent and regular sessional teaching staff)	
their drea of teaching.	responsible for the delivery of the programme, including names, qualifications, fraction of appointment, key relevant expertise, role and research interests.	
	6.3.3 & 6.4.3 Provide evidence of registration and current practising certificate with the OCNZ.	
	6.3.4 & 6.4.4 Provide detail of the teaching and learning qualifications and achievements of the staff, as well as strategies used to support their ongoing development as educators. Describe the management strategies implemented to support, supervise and mentor sessional and less experienced osteopathy academic staff.	



Standard	Evidence required	Commentary on how programme meets the standard
6.5 Academic staff are up-to-date with knowledge, skills and attitudes relevant to their teaching. They maintain their currency with the national and international osteopathy and educational thinking and practice, and they are competent to teach in their allocated areas.	6.5.1 Indicate the methods used by osteopathy educators to remain up-to-date (e.g. engagement with the professional community, accessing international literature, gaining further formal qualifications, attending professional development programmes and conferences, international collaboration with recognised experts, engaging in research, practising as an osteopath, supervision of practising osteopaths, learning from visiting experts, student feedback, critical appraisal of teaching practice by consumers, knowledge of teaching/learning research findings, and skills in effective teaching.) 6.5.2Describe and provide documents of the performance appraisal system based within the institution.	
6.6 The programme supports osteopathy academic staff to actively engage in research and scholarship relevant to their teaching.	6.6.1 Outline how the post-graduate and research activity undertaken by staff is supported, and how this contributes to the overall quality of the education of osteopathy students. 6.6.2 Provide documented evidence on how the institution's policies support and value the teaching and professional activity of academic staff.	
6.7 There are policies and practices that address the balance of teaching, research, community or institute service and administrative functions for academic staff.	6.7.1 Provide documentation on the policies and procedures in place to address the balance between teaching, research, administrative and community service functions of staff. Include any published policy documents as attachments.	



Standard	Evidence required	Commentary on how programme meets the standard
6.8 Adequate numbers of administrative staff are providing support for the academic activities of the osteopathy educators.	6.8.1 Outline the administrative systems and number of administrative staff, their fractional appointment, and key roles.	
6.9 Osteopathy lecturers are registered with the OCNZ and hold a current practising certificate.	6.9 Provide proof of registration and practising status for all lecturers.	



Section 7: Resources		
Standard	Evidence required	Commentary on how programme meets the standard
7.1 The programme is adequately resourced in terms of physical facilities to effectively deliver on its intent.	7.1.1 Provide evidence that demonstrates the programme currently, and will continue to be,adequately resourced to deliver its intent (e.g. a business case or three to five-year budget for new programmes or documentation) demonstrating there is:	
	 adequate and accessible teaching space 	
	 library and information technology resources that are accessible, up-to-date 	
	These resources should include:	
	 information on osteopathy 	
	 osteopathic theory and practice information on disciplines such as: anatomy and physiology, human development and supported by effective internet and off campus access, as well as offices for educators and support staff, venues for specialist learning activities 	
	 equipment that is relevant to osteopathy services, storage space to adequately deliver the programme in simulation laboratories. 	
	Comment on any strategies used to manage limitations.	



Standard	Evidence required	Commentary on how programme meets the standard
7.2 The educational facilities and resources available to the programme are consistent with the programme's philosophy and purpose.	7.2.1 Outline how the educational facilities and resources are consistent with the programme's philosophy and purpose (e.g. a programme that includes a focus on developing economically viable employment options).	
	7.2.2 Describe any interprofessional learning opportunities with other health and social care professions.	
	7.2.3 Provide programme budgets and business plans.	
7.3 Plans are in place for the continual improvement of facilities and resources to support curriculum development where needed.	 7.3.1 Outline the strategies to ensure facilities and resources will remain up-to-date and support curriculum development. 7.3.2 Outline the strategies used to ensure students have access to emerging technologies that will enable their transition into the workplace. 7.3.3 Provide evidence from the institution's strategic plan. 	
7.4 Adequate and effective administrative services are provided to the osteopathy programme to support its effective delivery.	7.4.1 Outline the administrative arrangements in place. Where aspects of the programme are not fully supported, indicate the strategies being used to address this.	
7.5 There is sufficient information technology(I.T.) both hardware and software to deliver the programme.	7.5.1 Please provide student to technology ratios and discuss all clouded and/or web based applications used by the programme.	



Standard	Evidence required	Commentary on how programme meets the standard
7.6 Students have adequate access to I.T.	7.6.1 Please provide student to technology ratios and discuss all clouded and/or web based applications used by the programme.	
	7.6.2 If there is an IT lab for students please tell us how they access this and what hours it is open to them.	
7.7 There are adequate classroomsand lecture theatres to deliver the programme.	7.7.1 Please give us a list of the classrooms and lecture theatres to be used and their capacity.	



Section 8: Continuing Quality Improvement		
Standard	Evidence required	Commentary on how programme meets the standard
8.1 Conditions and recommendations made in previous accreditation reports have been addressed. NOTE: Only for reaccreditation	8.1.1 None if accrediting. For re-accrediting provide evidence of how the conditions/recommendations were addressed.	
8.2 The programme philosophy and purpose, curriculum, content/sequence and educational methods (including clinical practice) are reviewed in an ongoing manner and revised in response to local changes and development of international knowledge. Current literature/evidence is used to inform programme improvement.	8.2.1 Provide documented evidence of the quality improvement/ assurance processes that are used to review and revise the programme. Include comment on the strategies used to ensure that current evidence is used to inform programme improvement. Provide documented evidence of a whole-of-staff review of the entire programme. 8.2.2 Identify at what point the OCNZ will be advised of changes to curriculum. 8.2.3 Describe the threshold that requires the institution to report programme changes. 8.2.4 Provide an overview of the university's teaching and learning policies and procedures of direct relevance to the development, implementation and review of the osteopathy programme.	



Standard	Evidence required	Commentary on how programme meets the standard
8.3 Key stakeholders are engaged in the provision of feedback relevant to the osteopathy programme and the feedback informs the development of the curriculum and delivery of the programme.	8.3.1 Provide evidence of adequate and appropriate consultation with key stakeholders on programme design and delivery, including curriculum content and the clinical practice arrangements.	
	8.3.2 Provide detailed evidence that the programme receives and is responsive to feedback from:	
	 experienced osteopathic practitioners in a range of practice areas 	
	 funders representing a range of government, private, and Non Government Organisations servicing a range of human service activities across the lifespan, the professional association, recent graduates, students (including their perspective on all aspects of the teaching and learning experience) 	
	 representatives, such as allied health advisors, from government departments (health, education, disability),Māori health professionals,organisations.and/or local communities, consumers and consumer organisations. 	
8.4 A steering committee or advisory board including key osteopathy stakeholders provides advice to the	8.4.1 Provide names and titles of members of the advisory board or steering committee.	
programme.	8.4.2 Provide evidence that the advisory body meets regularly and is used effectively to inform the ongoing development of the programme.	



Standard	Evidence required	Commentary on how programme meets the standard
8.5 There is support for the programme from key stakeholders including local employers, practitioners and the professional association.	8.5.1 Provide documented evidence that there is support for the programme, and where there are areas of concern, indicate the processes being used to address these.	
8.6 The perspective of consumers/service users/clients (i.e people with a health and/or health issue/people who are recipients of osteopathic services) are valued and integrated within the design, delivery and evaluation of the programme.	8.6.1 Provide details and examples of the manner in which consumer feedback and perspectives are obtained and incorporated into the design, delivery and evaluation of the programme. 8.6.2 Indicate how consumers are providing input into the programme in roles beyond that of providing their perspective as service recipients.	
8.7 There are processes in place to evaluate and monitor the effectiveness of the programme's graduates as ethical and competent osteopaths.	8.7.1 Provide evidence of stakeholder feedback and review mechanisms used to determine the preparedness of graduates to practise safely and competently in initial employment and in the early years of their practice. 8.7.2 Indicate how feedback about graduate performance (e.g. from graduate destination survey, survey of employers and graduates, advisory group feedback) is incorporated into and informs the ongoing development of the programme. 8.7.3 Provide evidence of continuing demand for the programme (e.g. enrolment statistics and completion rates, attrition rates, graduate employment data.)	



Standard	Evidence required	Commentary on how programme meets the standard
8.8 The programme draws on current research from new/recent graduates to shape the curriculum and the teaching and learning methods used (including practice education/fieldwork), and to promote successful integration of students into the workplace and workforce following graduation.	8.8.1 Provide evidence of how current research on the experiences of new/recent graduates informs the curriculum and facilitates their integration into the workforce.	
8.9 Strategies/admission policies are in place to target groups under-represented in the programme to ensure student profile is reflective of the community profile.	8.9.1 Provide details of admission policy documents. Outline Māori and Pacific Islanders specific initiatives, and strategies to support the recruitment and retention of students within the programme.	
8.10 Processes/accommodations including the assessment and management of at risk/special needs students are used across all aspects of the programme, including practice education/ fieldwork.	8.10.1 Provide policy documents relevant to. Māori, international and culturally and linguistically diverse students, students with disabilities, and students with academic performance issues.	
8.11 Monitoring by internal and external parties.	8.11.1 Provide monitoring reports from internal and external monitors. 8.11.2 Describe the internal quality assurance mechanism and how these support and develop the programme.	

APPENDIX 5 ACCREDITATION STANDARDS REVIEW SUGGESTED DOCUMENT LIST

Below is a list of suggested documents to accompany your Accreditation Standards Review Form. This is only a suggested list and we encourage you to include additional documentation if you feel it evidences how the programme meets the standards.

- Programme Information
 - o Programme prospectus
 - Research programmes planned and/or already merited along with their findings programme planning for next 3 years
 - List of all clinical programmes and their staff
 - Programme documents
 - Programme review Reports
 - o Programme outcomes and assessments
 - o Programme structure (mapping) documents
 - Completion rates for the programme (APER Summary)
 - Publicity material/information about the programmes
- Staff Information
 - Staff list
 - Suggested staffing numbers for accreditation
 - Staff performance plans (appraisal programme)
- Course and Student Information
 - Student guides and instructions (may include assessment outlines)
 - Course schedule
 - o Topic schedules for courses
 - Study pathways
- Other
 - o Policies both student and staff related
 - All procedure and process documents
 - Staff and student handbooks
 - Budget guidelines
 - o Templates of certificates, diplomas and/or degrees
 - Monitoring reports
 - Documents in regards to internal or external monitoring groups (terms of reference, guides, minutes, etc.)
 - Clinical placement documents including assessments, guidelines, agreements
 - o Information to Supervisors such as handbooks, assessments forms
 - o Framework documents for programmes, courses, process such as cultural strategy, research
 - o Lists of resources including books, equipment, etc. held by the institute for students and staff
 - Organisational chart
 - Legal agreements
 - Clinical placement logs
 - Organisation's annual report

REFERENCES

- Ministry of Social Development. (2014) Vunerable Children's Act http://www.legislation.govt.nz/act/public/2014/0040/latest/DLM5501618.html
- New Zealand Qualifications Authority (2013) Programme Approval and Accreditation Rules version 2. http://www.nzqa.govt.nz/about-us/our-role/legislation/nzqa-rules/nzqf-related-rules/programme-approval-and-accreditation/1/