

Schedule 3 – Work Plan

For the 2020-2021 financial year the work to be undertaken by the Accreditation Authority is set out in:

1. Schedule 2, and
3. the work plan below, which is based on the domains included in the Quality Framework Report.

The work plan will be reviewed and updated for future years in the Term of the Agreement, in accordance with Clause 6.

Domain 1: Governance

The accreditation authority effectively governs itself and demonstrates competence and professionalism in the performance of its accreditation role.

Activity: 1 July 2020 - 30 June 2021	Start date	Due date
<p>Accreditation Authority’s Board and Governance Committees Accreditation Authority’s Board meet six times per year (including strategic planning day) plus the associated governance committees including:</p> <p>Finance, Audit and Risk (FAR) Committee:</p> <p>The purpose of the Finance, Audit and Risk (FAR) Committee is to assist the AOAC Board by providing high level oversight of financial reporting, risk management, advice on governance and audit The Finance Audit and Risk Committee will meet every two months to monitor monthly, quarterly and annual financial statements. As well as:</p> <ul style="list-style-type: none"> • Liaison with external auditor to produce the audited financial statements and Directors report. • Financial and compliance reporting that informs and meet fiduciary responsibilities of Directors. <p>Accreditation Committee:</p> <p>The Accreditation Committee will meet every two months to promote and protect the health of the community by:</p> <ul style="list-style-type: none"> • Reviewing the outcomes of assessments undertaken by Accreditation Authority’s assessment teams for osteopathy programs of study making recommendations on accreditation of the programs of study to the Accreditation Authority. <p>Qualifications and Skills Assessment Committee (QSAC).</p> <p>The purpose of the Qualifications and Skills Assessment Committee (QSAC) is to oversee the assessment of the knowledge, clinical skills and professional attributes of overseas qualified osteopaths and other individuals referred to AOAC who are seeking registration as osteopaths in Australia:</p>	<p>1 July 2020</p>	<p>30 June 2021</p>

<ul style="list-style-type: none"> • Make determinations on the outcome of the assessment of applicants • Oversee the operation of the AOC overseas assessment process as detailed in the AOAC Procedures Manual – Assessment of Professional Qualification in Osteopathy for Registration and General Skilled Migration and other assessment of competency to practice as an osteopath as referred to AOAC. <p>The Committee will meet four times in the year.</p> <p>Professional Development for Accreditation Authority's Board of Directors</p> <p>Accreditation Authority's Board attendance at cultural safety training</p> <p>Accreditation Authority's Board Charter and policies review and update as required.</p> <p>Production of Accreditation Authority's Annual Reporting requirements:</p> <ul style="list-style-type: none"> • Annual Report • Annual Quality Framework report 2019/20 • Mid-year Quality Framework report April 2021. 		
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Domain 2: Independence

The accreditation authority carries out its accreditation operations independently.

Activity: 1 July 2020 - 30 June 2021	Start date	Due date
<ul style="list-style-type: none"> • The AOAC Board has a strong Governance framework with conflict of interest policies and also has a register of interest. This ensures that members are not participating in decisions regarding Universities that they are employees of. • There is a process for advertising and interviewing for candidates that are required for Board and committee members. • AOAC will need to advertise for a new Board member commencing at the Board meeting following the Annual General Meeting 2020. 	1 July 2020	Nov 2020

Domain 3: Operational management

The accreditation authority effectively manages its resources to support its accreditation function under the National Law.

Activity: 1 July 2020 - 30 June 2021	Start date	Due date
<p>Operational support is provided by the Australian Nursing and Midwifery Accreditation Council including:</p> <ul style="list-style-type: none"> • Secretariat support for the governance functions <ul style="list-style-type: none"> – Board and board committees 	July 2020	June 2021

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

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

Activity: 1 July 2020 - 30 June 2021	Start date	Due date
Accreditation workload: <ul style="list-style-type: none">• Accreditation assessment of 1 new program• 3 Program Monitoring Reports will be assessed• 1 targeted monitoring of an Osteopathic program.	July 2020	June 2021
Investigation of complaints or appeal requests	Jul 2020	30 Jun 2021

Domain 6: Assessing Authorities in other Countries

The accreditation authority has defined its standards and procedures to assess examining and/or accrediting authorities in other countries.

Activity: 1 July 2020 - 30 June 2021	Start date	Due date
AOAC's Qualifications and Skills Assessment Committee undertakes assessments as part of the Accreditation Functions set out in Schedule 2.	July 2020	June 2021

Domain 7: Assessment of internationally qualified practitioners

Assess and/or oversee the assessment of the knowledge, clinical skills and professional attributes of internationally qualified practitioners seeking registration in the profession under the National Law

Activity: 1 July 2020 - 30 June 2021	Start date	Due date
AOAC's Qualifications and Skills Assessment Committee undertakes assessments as part of the Accreditation Functions set out in Schedule 2	1 Jul 2020	30 Jun 2021

Domain 8: Stakeholder collaboration

The accreditation authority works to build stakeholder support and collaborates with other national and international accreditation authorities including other health profession accreditation authorities.

Activity: 1 July 2020 - 30 June 2021	Start date	Due date
<ul style="list-style-type: none"> • Improve engagement with stakeholder through bimonthly newsletter • Improve transparency with stakeholders through the circulation of Accreditation Authority’s Board Communique following Accreditation Authority’s Board Meetings. 	1 Jun 2019	30 Jul 2020
Engage stakeholders in the development of accreditation standards (costed as part of standards project)		
Implement and action activities in the ‘Innovate RAP’.	1 Jul 2020	30 Dec 2020
Engage with the Health Professionals Collaborative Forum (HPACF) to progress the work they are undertaking.	1 Jul 2020	30 Jun 2021
Attendance at HPACF meetings held every two months.	1 Jul 2020	30 Jun 2021

Schedule 4 – Funding arrangements

Item 1 – Funding Principles

These Funding Principles are to be applied by accreditation authorities, National Boards and Ahpra when they are considering and agreeing on the funding to be provided to the accreditation authority by the National Board/Ahpra for performance of the accreditation functions.

The principles aim to promote consistency, transparency and accountability for use of registrant fees to fund the accreditation function.

Ahpra, in consultation with the National Board, will provide funding through registrant fees to enable the accreditation authority to manage its business and risks by covering some of the indirect costs of activities related to program accreditation including monitoring.

The following principles will apply, in addition to the guiding principles and objectives of the National Law, and the Quality Framework for the Accreditation Functions, when an accreditation authority is requesting funding from a National Board/Ahpra (funding request) and when a National Board/Ahpra decide to provide funding to an accreditation authority (funding decision):

1. Requests for funding should be reasonable and proportionate to the activities being funded.
2. The funding provided by the National Board/Ahpra should cover a proportion of the governance costs related to the accreditation functions.
3. The funding provided by the National Board/Ahpra for the development and review of accreditation standards should be requested and considered separately to the funding of other accreditation functions.
4. Requests for increases in funding from the previous year should not usually exceed the indexation range applicable to National Board fee increases (up to 3% per annum).
5. Where an accreditation authority considers an increase in funding above the indexation range is required, it should put the funding request and a business case supporting the increase above the indexation range to AHPRA and the National Board for their consideration.
6. Such a request and business case should be forwarded to Ahpra and the National Board by mid-February or earlier each year to enable them to have sufficient time to properly consider the funding request.
7. Ahpra and the National Board may agree to the requested increase in funding or propose to agree to a lesser amount. Such a proposal and reasons for that proposal should be forwarded to the accreditation authority to enable it to have sufficient time to properly consider the proposed funding amount and reasons.
8. Ahpra and the National Board should agree to provide sufficient funding to enable the accreditation authority to effectively deliver the accreditation functions through a combination of funding provided by the National Board/Ahpra and funding from other sources that is provided as a direct result of the Accreditation Authority being assigned and exercising statutory functions under the National Law.

Item 2 – Funds

Total funding for 2020/2021 financial year is: \$189,266 (ex GST).

The funding is payable in four instalments on the following dates and in accordance with clause 5.2 of the Head Agreement.

Date	GST exclusive
1 July 2020	\$47,317
1 October 2020	\$47,317
1 January 2021	\$47,316
1 April 2021	\$47,316