

Schedule 3 – Work Plan

In addition to the Accreditation Functions outlined in Schedule 2, the Work Plan for the period 1 July 2020 to 30 June 2021 includes:

- a) five scheduled site visits
- b) reaccreditation of 15 programs provided by five education providers
- c) Stage 2 assessment of one new program
- d) implementation of the 2019 revised accreditation standards and risk management assessment relating to program accreditation
- e) continued systems development to support a risk management approach to program accreditation and assessment of internationally qualified occupational therapists, and
- f) upgrading the assessment processes used for internationally qualified occupational therapists including a focus on cultural training and safety, competencies and supervisor training.

Activities to be undertaken by the Accreditation Authority to support the Implementation of Revised Accreditation Standards Project and Risk management relating to program accreditation project

The Accreditation Authority will undertake the activities specified in the attached project plans for the:

1. Implementation of the Revised Accreditation Standards Project; and
2. Risk Management Relating to Program Accreditation Project.

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

Funding for performance of Accreditation Functions

The Accreditation Authority has confirmed it does not require Ahpra to provide any funding for performance of the Accreditation Functions set out in Schedule 2 in the period 1 July 2020 – 30 June 2021.

Project Funding

Total funding for the *Implementation of the Revised Accreditation Standards Project* and the *Risk Management Relating to Program Accreditation Project* is \$18,500 (excluding GST) (**Project funding**).

The Project funding is payable in two equal instalments and in accordance with clause 5.2 of the Head Agreement. The first instalment is payable on receipt by Ahpra of the Progress report in accordance with the attached Project Plan, the second instalment is payable on receipt by Ahpra of the Final report in accordance with the attached Project Plan.



Project plan

Implementation of the revised OTC Accreditation Standards (December 2018) and risk management relating to program accreditation

June 2020 (brief outline 3 February 2020)

1. Summary

The Occupational Therapy Council is seeking funding of \$18,500 in 2020/21 to implement the revised Accreditation Standards (December 2018) and to undertake two risk management assessments, including relating to the refusal by OTC to accredit a program.

2. Background

The OTC successfully completed the Accreditation Standards review in 2018, with the revised Standards being approved by the OTBA early in 2019. Work is underway to implement the revised Standards, including via direct liaison with programs being accredited in 2020 and participation in joint meetings of the Australian and New Zealand Occupational Therapy Educators (ANZCOTE) and the Australian and New Zealand Occupational Therapy Fieldwork Academics (ANZOTFA).

There are various resources arising from the revised Accreditation Standards that require further development during implementation.

In addition, the OTC has identified two risk management activities requiring attention. The first of these is improving the monitoring and management of changes in staffing and student intake numbers in occupational therapy programs. The second is completing a simulation which tests the processes, procedures and policies currently in place in the event the OTC decides NOT to accredit a program.

3. Project Governance/Responsibilities

The OTC Program Accreditation Committee has governance oversight of the project. The OTC Chief Executive Officer is monitoring the project, the conduct of the project officer and administrative assistant and is ensuring the project's effective financial management.

4. Project aim & intended outcome

This project will:

- (i) Develop and trial documentation and processes required for the implementation of the revised Accreditation Standards (December 2018)
Intended outcome: Program Assessors, the OTC Program Accreditation committee and education programs each have clear procedures to meet the revised Accreditation standards.
- (ii) Develop two strategies to improve the risk based approach to program accreditation
Intended outcomes:
The OTC has an effective process to monitor a key risk factor (staffing).
The OTC has a robust procedure for managing refusal or withdrawal of program accreditation.

5. Project deliverables, activities & timelines

Project deliverables	Explanation/Outline of activity	Timeline
Implementation of revised Standards		
1. Revised accreditation report template.	<p>A draft report template for use with the revised accreditation standards has been prepared. Further refinement is required to ensure the report includes detail relevant to each stakeholder group.</p> <p>The report will be used for the first time by Assessors in late July - August 2020, and feedback from each stakeholder group (including OTA, OTBA) will be used to refine the report.</p>	<p>Complete template July 2020</p> <p>Review September 2020 subsequent to first use.</p>
2. Assessor program report guidelines and templates	<p>Guidelines and templates are required to improve the efficiency of assessor reporting - currently identified as a key impediment to timely completion of accreditation reports. These include an assessor preliminary and on-site report template and an assessor version of the program accreditation report including instructions and prompts.</p>	<p>Draft: June 2020 Final: July 2020</p> <p>Review August 2020 subsequent to first use by Assessors.</p>
3. An assessor training plan.	<p>An assessor training plan is being documented, with training aimed at ensuring consistent interpretation of the revised accreditation standards and evidence examples, particularly those related to Aboriginal and Torres Strait Islander People's Health and consumer input to programs.</p> <p>The plan builds on recommendations made by program assessors via established training, and will include expected orientation for new assessors as well as initial and ongoing cultural safety training for program assessors which aligns with OTC training generally.</p>	<p>Final: November 2020.</p>
4. A document mapping the OTC Accreditation Standards (December 2018) to the TEQSA standards	<p>The interface of TEQSA standards, specifically the HESF 2015, and the revised Accreditation Standards was considered during the revision process. Some comparison was documented. Full mapping will provide a guidance document to assist assessors and OTC Directors to differentiate program and institutional-level responsibilities, assist in consistent interpretation of these especially in site visits and support OTC reporting of KPI's to the OTBA.</p>	<p>Draft: July 2020</p> <p>Final: August 2020.</p>
5. An assessor manual detailing key processes, procedures and responsibilities	<p>The assessor manual provides detailed guidelines for assessors as to the procedures to be followed when accrediting programs using the revised standards. This promotes rigour and uniformity in the program accreditation process.</p> <p>The manual is being updated with particular attention to increasing the consistency of the processes used by the OTC with other NRAS accreditation authorities.</p> <p>The manual will be trialled during the 2020 program accreditations and revised based on assessor feedback.</p>	<p>Draft: June 2020</p> <p>Final draft August 2020 post the first site visit in 2020.</p> <p>Final: December 2020</p>
6. Template and guidelines for programs to address the	<p>A template and guidelines for Education Providers and occupational therapy programs to ensure there are clear guiding principles for programs to address OTC</p>	<p>Draft 1 April 2020.</p> <p>Final draft November</p>

expectations in the revised Accreditation Standards relevant to Aboriginal and Torres Strait Islander Peoples health.	expectations in the Accreditation Standards relevant to Aboriginal and Torres Strait Islander Peoples health.	2020.
7. A documented strategy to develop specific guidelines around how occupation based curricula sits alongside the Aboriginal and Torres Strait Islander Health Curriculum Framework.	These guidelines currently exist for some other professions including Optometry and Nursing & Midwifery. Psychology and Speech Pathology have developed documents partly based on the Framework. Consideration of need for these guidelines; level and type of consultation needed is required.	Draft: August Complete plan October 2020.
Risk management		
1. A documented procedure to track changes in staffing in each accredited program.	Staff changes have been identified as a key risk for programs, especially in relation to security of staff appointments and staff-student ratio. The OTC and some other accrediting authorities have identified these aspects as potential key risks for non-compliance with the Accreditation Standards. The OTC's monitoring and response need development to ensure it is taking appropriate action.	Complete procedures early June 2020 for inclusion in 2020 monitoring report. Review and revise September 2020 subsequent to receipt of monitoring reports.
2. Revised OTC policies, procedures and processes for refusal or withdrawal of accreditation.	The OTC has yet to refuse to re-accredit a program. A simulation of this will be undertaken to ensure current policies, procedures and processes are robust and appropriate to accommodate appeals and challenges to the decision.	Plan end of July. Complete by February 2021.

6. Project reports

- Progress report to OTBA October 2020
- Final report to OTBA March 2021

7. Project Budget

The following are the anticipated costs to undertake this project.

Expense	Cost
Project officer cost	\$15,000.00
Administration and Overheads (including input by CEO, EO)	\$3,500.00
Total costs:	\$18,500.00