Optometry Council of Australia and New Zealand

Accreditation Procedures Guide

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# Introduction

## 1.1 Purpose of this Guide

The guide describes the processes and procedures that are used by the Optometry Council of Australia and New Zealand (OCANZ) to accredit optometry programs on behalf of the Optometry Board of Australia (OBA) and the Optometrists and Dispensing Opticians Board of New Zealand (ODOB).

It is intended to assist both the education providers who are seeking accreditation or reaccreditation and those involved in assessing programs of study for accreditation purposes.

OCANZ acknowledges that this document cannot detail all situations and some situations will need to be assessed on a case-by-case basis. If in doubt, contact the Accreditation Manager at OCANZ for clarification.

## 1.2 Role of OCANZ

The Optometry Council of Australia and New Zealand (OCANZ) is a not-for-profit company limited by guarantee. It was established in 1996 with the support of and representation from the:

* heads of the optometry education providers in Australia and New Zealand
* professional membership bodies in Australia and New Zealand
* registration boards in Australia and New Zealand.

OCANZ is the national education standards and assessment body for optometry in Australia and New Zealand. It accredits optometry education programs in both countries and also conducts examinations to assess the competence of overseas qualified optometrists who are seeking to practise in Australia and New Zealand.

## 1.3 Purpose of and approach to accreditation

The purpose of accreditation by OCANZ is to:

* protect the public by ensuring that graduates are provided with the knowledge, skills and professional attributes to practise safely as optometrists in Australia and/or New Zealand
* facilitate the provision of high-quality education and training of optometrists in Australia and/or New Zealand, and
* support the development of a flexible, responsive and sustainable optometric health workforce in Australia and New Zealand.

To be eligible to apply to become a registered optometrist in Australia or New Zealand, graduates must have completed a program of study that is accredited by OCANZ and approved by the Optometry Board of Australia and/or prescribed for registration by the Optometrists and Dispensing Opticians Board (New Zealand). OCANZ accreditation provides a system of quality assurance for the OBA and the ODOB to assure both Boards that all those entering the optometry profession are competent to practise to contemporary standards established by the profession and have a sound foundation for life-long learning.

OCANZ carries out its accreditation work in a transparent, accountable, efficient, effective and fair way. While the primary purpose of accreditation is to demonstrate whether or not the OCANZ Accreditation Standards are met, the process of accreditation also involves challenging and improving the future performance of providers over simply a yes/no outcome. Such quality improvement is fostered in large part through the provision of feedback from the peer assessors who bring external experience and expertise to their assessment work with a provider.

## 1.4 Accreditation examined against OCANZ Accreditation Standards

OCANZ accredits optometry programs by reviewing them against the OCANZ Accreditation Standards (the ‘Standards’), which are primarily outcomes focussed and encourage innovation in program delivery. The applicable Standards for programs in optometry delivered in Australia and New Zealand are available on the OCANZ website and are currently:

* The OCANZ Accreditation Standards and Evidence Guide for Entry-level Optometry Programs, effective 1 January 2017, available at <https://www.ocanz.org/assets/Accreditation/10102e093c/PART-2-Accreditation-Standards-and-Evidence-Guide-for-Entry-Level-Optometry-Programs-Effective-1-Jan-2017.pdf>
* The OCANZ Accreditation Standards and Evidence Guide for Ocular Therapeutics Programs, effective 1 January 2018, available at <https://www.ocanz.org/assets/Accreditation/2e7cb8b32b/Ocular-Therapeutics-Accreditation-Standards-and-Evidence-Guide-Final-MARCH-2017.pdf>

These documents contain:

* The OCANZ Accreditation Standards for programs of study, and their associated criteria
* Guidance on the evidence to be presented by providers that are seeking accreditation of a program including:
  + a list of the evidence that a provider is *required* to present to OCANZ with its accreditation submission
  + suggested additional documentary evidence that may be presented or requested to augment a submission, as well as evidence that may be requested and viewed during a site visit
  + additional guidance, as necessary, to assist the development of shared understandings of the OCANZ requirements between accreditation assessment teams and providers.

The OCANZ Accreditation Standards for optometry programs allow each provider the flexibility to develop their own curriculum within the quality assurance mechanisms of its own institution. The Standards also serve as a reference point for international comparisons related to the provision of optometric higher education.

OCANZ periodically benchmarks its Standards and accreditation processes against comparable national and international standards. The National Law in Australia also requires that the Standards are formally reviewed from time to time.

# 2.0 Accreditation decision-makers

## 2.1 Assessment teams

The OCANZ Board appoints an assessment team for each accreditation assessment comprising members with the specific knowledge, skills and expertise required to undertake the assessment. All team members undergo training provided by OCANZ and sign agreements covering the confidentiality and privacy of assessments. Assessors are required to disclose if they have any personal or professional conflicts of interest which would impede their ability to fulfil their duties objectively. OCANZ provides the names and resumes of proposed assessment team members to the education provider to allow comment on any perceived conflicts of interest before each team member is confirmed or an alternative appointment is made.

The main function of assessment teams is to evaluate the education provider’s program against the OCANZ Accreditation Standards and make a recommendation on whether or not the program should be accredited. Assessment teams are also expected to make quality improvement recommendations and to identify areas that are deemed worthy of a commendation as examples of good practice. In addition to the evaluation of written material, the assessment team’s evaluation will usually include discussions with the representatives of the provider at a site visit, which may be conducted face to face and/or virtually. The assessment team will work with OCANZ staff to provide a report on its assessment of the program against the Standards, on which formal accreditation decisions by the OCANZ Board will be based.

The composition of the assessment team is at OCANZ’s discretion (subject to management of actual or perceived conflicts of interest) and will depend on the nature of the program and the issues for consideration, including the inherent risks apparent in the program. Assessment teams for entry-level programs usually comprise 3-4 members with appropriate expertise in optometry education and practice, clinical education and accreditation processes. The team will include a Chair appointed for their significant expertise in accreditation processes. Team members will typically include a practising optometrist and may include one international academic optometry expert. Assessment teams are usually selected from a location other than the education provider’s main delivery location.

## 2.2 OCANZ Accreditation Committee

OCANZ has a standing Accreditation Committee which receives and reviews the reports from all assessment teams and advises the OCANZ Board on whether or not the Committee believes programs meet the OCANZ Accreditation Standards. The Accreditation Committee includes members with expertise across the optometry profession, academia and the community. The Accreditation Committee also makes recommendations to the OCANZ Board on the membership of assessment teams.

The Committee’s functions include oversight of the annual monitoring of all accredited programs and reviewing the reports submitted by education providers on how they are meeting any conditions associated with their accreditation. The Committee may recommend to the OCANZ Board that an assessment team be formed to examine significant matters raised in an annual report, a report on conditions and/or a request for a material change to a program of study.

## 2.3 OCANZ staff

The OCANZ Accreditation Manager supports delivery of the accreditation functions of OCANZ by providing expert advice and guidance to the Accreditation Committee and assessment teams, together with operational and secretarial support. The Accreditation Manager works closely with assessment teams and is the primary point of contact for education providers. The Accreditation Manager prepares the agendas and minutes of all accreditation meetings and will draft the report of the assessment team findings for collective consideration by the assessment team. The CEO of OCANZ (or nominee) will typically attend site evaluations in addition to the Accreditation Manager and will assist the Accreditation Manager with the preparation of assessment team reports.

## 2.4 OCANZ Board

The OCANZ Board appoints all accreditation assessment teams on the advice of the Accreditation Committee and approves all accreditation reports.

## 2.5 National Boards

The regulator for the optometry profession in Australia is the Optometry Board of Australia (OBA) and in New Zealand is the Optometrists and Dispensing Opticians Board (ODOB). Once OCANZ has accredited a program of study (as approved by the OCANZ Board), accreditation reports are referred to the OBA and ODOB for them to decide if the program of study will be accepted for the purpose of registration in Australia and New Zealand.

## 2.6 Other Regulators

While an OCANZ accreditation has a specific set of purposes, education providers are subject to regulation in additional ways. In particular, in Australia all higher education providers are subject to educational regulation by the Tertiary Education Standards and Quality Agency (TEQSA) under the *TEQSA Act 2011*. TEQSA’s regulation is primarily at the institutional level rather than at the program level, but adverse findings at the institutional level may have adverse effects on an optometry program. As such, OCANZ has regard to TEQSA’s regulatory findings and risk analyses where they are available and relevant to OCANZ’s work. In New Zealand, universities are subject to institutional-level review by the Academic Quality Agency for**New Zealand** Universities**(AQA)**. OCANZ may also have regard to the findings of the AQA where relevant.

In the course of an accreditation assessment, OCANZ could potentially uncover concerns that are beyond its immediate remit but nevertheless could jeopardise the delivery of an optometry program (such as corporate mismanagement, risks to financial solvency). If OCANZ deems such concerns to be serious it may refer the matter to the relevant regulator.

# 3.0 Accreditation procedures

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## 3.1 Fees for accreditation

Fees are payable for the accreditation of programs of study. The fees are published on the OCANZ website at <https://ocanz.org/accreditation/accreditation-fees/>

## 3.2 New programs - initial assessment process

All new programs must successfully complete an initial assessment before they can proceed to the accreditation process described in later sections of this document. The process is as follows:

Education providercontacts OCANZ to clarify application requirements

18 months before program commencement

Education providersubmits initial application; pays the applicable fee

14 months before program commencement

OCANZ staff review the initial application and advise if the application is sufficient to refer for assessment, or more information is needed

13 months before commencement

OCANZ considers a final report and notifies the provider of the outcome of the initial assessment.

7 months before program commencement

A draft report of assessment team findings is developed and sent to the applicant for checking for factual inaccuracies.

8.5 months before program commencement

If referred, OCANZ accreditation assessment team evaluates the initial application

Finalised 10 months before program commencement

## 3.3 New programs - initial assessment content requirements

Education providers proposing new optometry programs should provide a business case and budget to accompany their initial accreditation submission, which must be no more than 50 pages and must address the following:

1. An overview of the proposed course level, length and volume of learning, major course components,

and course sequencing.

1. In particular, an outline of how the clinical training in the program will be delivered. This should include evidence that there will be available appropriate training facilities for the proposed program of study, including proposed use/construction of facilities by the education provider and evidence of external agreements with public health authorities and/or private bodies to provide clinical training places as required to support the program’s proposed methods of clinical training delivery.
2. An overview of the resources (financial, physical, staff) available to support all years of the course. This should include a timeline and budget for staffing appointments and other required resources.
3. A candid analysis of potential risks to be addressed in establishing the program of study and the strategies that will be used to manage/mitigate these risks.
4. A summary of the provider’s standing and history with TEQSA or AQA, including current regulatory risk analyses of the provider (if available).

## 3.4 New programs - initial assessment outcomes

OCANZ will aim to assess an initial submission within 3-6 months. The possible outcomes of assessment are that:

* the education provider is invited to make a full submission for assessment against the OCANZ Accreditation Standards (see following sections), or
* further development is required, and the provider is invited to submit a revised submission which addresses the issues raised by OCANZ within a specified timeframe, or
* the program is not suitable for further assessment, in which case OCANZ may at its discretion refund part of the assessment fee and may specify a period of time to elapse before a new submission will be considered. Full accreditation fees are payable for a new submission.

## 3.5 Accreditation/reaccreditation - process

This diagram shows the key stages in the assessment of programs for accreditation and reaccreditation:

OCANZ assessment team assesses the application, conducting a site visit if the application has sufficient merit. The assessment team documents their findings

3 months prior to expiry of/requirement for accreditation

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Education provider makes a submission to OCANZ addressing the OCANZ Standards

At least 6 months prior to expiry of/requirement for accreditation

OCANZ staff and education provider negotiate the timetable and format for assessment

10-12 months prior to expiry of/requirement for accreditation

Draft report of assessment team findings is developed and sent to the education provider for checking for factual inaccuracies

2.5 months prior to expiry of/requirement for accreditation

The OCANZ Board decides (on the advice of the Accreditation Committee) and notifies the provider of the outcome

Prior to expiry of/requirement for accreditation

If the outcome is accreditation/

reaccreditation, OCANZ advises the OBA and ODOB and requests that they approve the program of study for the purposes of registration and update their registers of approved education providers.

## 3.6 Accreditation/reaccreditation - content requirements

An accreditation submission is the education provider’s self-assessment demonstrating how the program seeking accreditation/reaccreditation meets each of the OCANZ Accreditation Standards. Education providers are encouraged to make a short statement addressing each Standard in a holistic and integrated manner, separately addressing every criterion associated with the Standard at their discretion.

An application template is available for providers to guide the application process at <https://ocanz.org/accreditation>. Its use is optional.

A list of ‘core evidence’ requirements which define the minimum documentation that is expected to be included with every submission for accreditation or reaccreditation of a program can be found in the OCANZ Accreditation Standards (reproduced at Appendix 2). Providers are at liberty to include any further evidence and information that they wish to offer to support their submission.

Electronic submissions are required – and providers may include hyperlinks to key documents in their application, rather than attaching large documents as part of a submission. Hard copies of information should not be provided unless specifically requested by OCANZ. OCANZ expects providers to submit documentation in its original format and not to spend time unnecessarily reformatting documentation for OCANZ’s purposes.

## 3.7 Accreditation/reaccreditation - site visits

As part of the accreditation process (including for currently accredited programs seeking reaccreditation), a site visit or visits will take place. Site visits will usually be face to face. However, if circumstances prevent a face-to-face visit from taking place, OCANZ will decide if a ‘virtual’ site visit is required using technology such as videoconferencing. Decisions will be made on a case-by-case basis. Face-to-face site visits are typically held over 2-3 days.

The format for and number of site visits will vary depending on the nature of the program and the provider. The visit format may be modified to focus on particular standards or criteria as required by the assessment team. For new programs, the visit content will be adapted to the circumstances of the provider and the program. This will typically include at least one visit to assess the provider’s submission and another visit when the first cohort of students graduate.

The final program for an accreditation visit, whether conducted electronically and/or face to face, will be decided by the assessment team in consultation with OCANZ staff and the education provider. OCANZ will consult with staff nominated by the education provider to arrange the site visit schedule. A final schedule will be available before the site visit commences and will include the names of participants in each interview session, and the start and finish times for each session. Education providers are required to organises site visit interviews and logistics in accordance with the agreed site visit plan.

The visit will usually begin and conclude with a meeting with the Head of Optometry and any other senior staff nominated by the provider. The visit will typically include separate meetings with the following parties:

* senior management concerned with the program
* program academic leaders
* governance committee/s for the program
* teaching and clinical staff
* examiners
* students (from all stages in the program)
* recent graduates
* recent employers.

All interview sessions are confidential, and each interviewee’s individual comments are not identified or attributed in OCANZ reports.

The assessment team may ask to tour the education provider’s facilities (teaching spaces, pre-clinical spaces, research laboratories) and visit on or off-site clinical facilities. Adequate time will also be scheduled during the course of the visit for confidential team discussions, review and reflection. Providers should note that findings arising during a visit may lead to some reorientation of the schedule as the visit progresses. This will only occur where it is essential to an effective assessment and will be managed with as little inconvenience to the provider as practicable.

At the closing session of the site visit, the assessment team Chair will present some preliminary findings of the assessment team. This will not encompass the full content of the subsequent more detailed assessment team report. The closing session is not an interactive session and education provider staff are not able to provide additional information in the session.

## 3.8 Risk-based and proportional decision making

OCANZ’s approach to accreditation is not only standards-based (i.e., the OCANZ Accreditation Standards), it is also risk-based and proportionate in accordance with the nature of the risks identified. As such, risk analyses are central inherent elements of program accreditation. Risk analyses inform accreditation processes and decision making in three broad ways as follows:

1. modulation and tailoring of the nature, scope, breadth or depth of assessment processes (i.e., analyses of submissions and/or site visits) in response to identified risks, such as needing to place additional emphasis on aspects of a particular OCANZ Accreditation Standard[[1]](#footnote-1)
2. varying accreditation outcomes according to assessment findings (such as varying the duration of accreditation and/or imposing conditions on an accreditation)[[2]](#footnote-2)
3. varying interim monitoring requirements in the light of changing circumstances and/or emerging risks (e.g., emerging issues identified by the provider or OCANZ, adverse intelligence from the sector, institutional issues identified by TEQSA/AQA or concerns raised by another regulator).

In making risk-based decisions, OCANZ will take into account various factors that are associated with risks to the delivery and outcomes of optometry programs such as:

* regulatory history and standing - a provider’s previous experience in delivering an accredited optometry program, its history of compliance with OCANZ accreditation requirements, any current conditions on a program or the provider more generally as imposed by OCANZ or another regulatory body and any substantiated complaints against a program
* the most recent annual report submitted by the provider, if available, in particular if there are any changes of substance in the following data:
  + student to staff ratios
  + student attrition, progression and completion rates
  + academic staffing profile, including any changes in senior positions and/or the number or employment status of staff
  + any changes in quantity, quality and diversity of clinical teaching arrangements
* Other significant changes to the program in areas such as:
  + student outcomes (including student feedback, employment outcomes and views of employers/graduates)
  + diversifying range of modes of delivery and/or delivery sites
  + significant changes to the provider’s standing and/or risk analysis that are likely to be of significance to the program (particularly with TEQSA in Australia)
* Any submissions received from external stakeholders or other regulators (e.g., TEQSA/AQA) in relation to the program of study. During each accreditation assessment, OCANZ places advertisements calling for comments from the professions and professional optometric organisations regarding the program being assessed. Submissions may address how the program is meeting or not meeting any or all of the OCANZ Accreditation Standards.

Providers should note that consideration of risk factors will not lead to a disregard for particular Accreditation Standards. All Standards are always considered, but risk factors may modulate the relative emphasis that may be given across the Standards.

Providers in Australia should also note that input from TEQSA may receive variable emphasis. For example, for various operational reasons TEQSA does not necessarily conduct risk analyses for all providers in any year. Because of differences in timing of regulatory assessments, TEQSA’s findings may not be sufficiently current for OCANZ’s purposes.

Consideration of these or other risk factors not only offers an opportunity to tailor assessments efficiently and proportionately according to the circumstances of a provider, it also allows OCANZ to arrive at an overall risk profile for the program and its provider to guide accreditation and monitoring decisions.[[3]](#footnote-3) The typical outcomes of this evaluation are shown in **Table 1**.

Any identified risks that are the province of other regulators and are likely to have an adverse effect on the optometry program (whether of an episodic or enduring nature), are taken into account on a case-by-case basis in formulation of a provider’s final overarching risk analysis.

**Table 1 below** shows OCANZ’s typical risk-rating framework for assessing the overall risk rating of providers and programs and the impact of risk analyses on the accreditation outcomes and monitoring requirements. The framework is informed by regulatory input from TEQSA/AQA (where available, sufficiently current and relevant for OCANZ’s purposes).

|  |  |  |  |
| --- | --- | --- | --- |
| **Table 1 OCANZ RISK RATING FRAMEWORK** | | | |
| **Referencing OCANZ Accreditation Standards** | | | |
| **Standards are Met** | **Standards are Met**  **(with limited risk**  **of non-compliance)** | **Standards are Substantially Met** | **Standards are not Met** |
| No conditions  OR  Very limited conditions/monitoring indicating low risk to meeting Standards | Limited conditions/monitoring indicating medium risk to meeting Standards | High volume of conditions/individual conditions which represent significant risks to meeting Standards | Optometry program not accredited |
| Stable program and provider history | Stable program and provider history (possibly with impending material changes) | No prior history of optometry provision; recent history of program or provider instability | Optometry program not accredited |
| Accreditation for full 8 years; limited periodic monitoring if there are conditions. | Accreditation for less than 8 years; periodic monitoring of conditions | Accreditation for limited period; conditions subject to ongoing reporting with set deadlines; detailed OCANZ oversight usually involving an assessment team. | Optometry program not Accredited |
| **Referencing TEQSA Institutional Factors for higher education providers in Australia**[[4]](#footnote-4) | | | |
| Low risk TEQSA institutional risk analysis (ideally over time) | Moderate risk TEQSA institutional risk analysis with sound mitigation | High risk TEQSA institutional risk analysis and/or inadequate mitigation | Highest quartile of TEQSA high-risk risk analyses and/or worsening institutional risks |
| No regulatory or registration issues with TEQSA | Low-impact institutional regulatory or registration  issues that are unlikely  to affect the optometry program | Institutional regulatory or registration issues that are likely to affect the optometry program adversely | Institutional registration vulnerable |
| **Referencing AQA factors for higher education providers in New Zealand**[[5]](#footnote-5) | | | |
| Highly Confident (in external evaluation and review) | Confident (in external evaluation and review) | Not Yet Confident (in external evaluation and review) | Not Confident (in external evaluation and review) |
| **LOW RISK** | **MEDIUM RISK** | **HIGH RISK** | **EXTREME RISK** |

## 3.9 Accreditation reports

The assessment team report will record:

* the overall findings and conclusions concerning the strengths and weaknesses of the program of study,
* whether the team concludes that the program meets each OCANZ Accreditation Standard,
* recommendations regarding accreditation and any conditions on accreditation.

The report may also include recommendations on an action or a course of actions that should be considered by the provider to improve the delivery and/or outcomes of the program. In the event that there are any minority assessment team views, they will be recorded in the report.

## 3.10 Education provider’s opportunity to comment on reports

The education provider will be given an opportunity to review and comment on the accreditation team’s draft report before it is finalised for consideration by the OCANZ Accreditation Committee and the OCANZ Board. The purpose of sending the draft report to the education provider is solely to give an opportunity to comment on the factual accuracy of the report. This may include bringing to the accreditation team’s attention any evidence, which was available at the time of the review, that the education provider considers may have been overlooked. Education providers should submit such evidence alongside any comments on the draft report. Newly created evidence in support of a changed assessment outcome cannot be submitted.

A minimum of 10 working days will be provided from receipt of the draft report for the education provider to comment or provide further evidence. Any comments or further evidence will be considered by the Accreditation Committee in finalising the report for consideration by the OCANZ Board. One further opportunity to comment on the factual accuracy of any changed text will be provided if the report is substantially changed by OCANZ after receipt of the education’s provider’s comments.

## 3.11 Decision on and duration of accreditation

The maximum period for the accreditation of an optometry program is eight years. After considering the report of the assessment team and any advice from the OCANZ Accreditation Committee, the OCANZ Board will decide:

* to accredit an optometry program for a period of eight years or a lesser period, or
* to accredit an optometry program with conditions for a period of up to eight years or a lesser period, or
* not to accredit an optometry program.

## 3.12 Notification of accreditation outcomes

Final notification of an accreditation outcomes is always provided to the education provider. OCANZ reports its accreditation decisions to the OBA and ODOB for their consideration in relation to the registration of graduates of OCANZ accredited programs of study. An executive summary of the accreditation report is published on the OCANZ website. OCANZ provides the education provider with an opportunity to comment on the executive summary prior to its publication.

## 3.13 Arrangements for current students if accreditation is not granted

If OCANZ advises an education provider that a program is not accredited, it will require the provider to advise how it proposes to manage and protect the interests of any students who are enrolled in the program and expect to be registered with the OBA and/or ODOB after graduation. The provider must undertake one of the following processes for currently enrolled students:

* make arrangements to transfer the students into one or more other accredited programs to enable them to graduate from those providers and apply for registration with the OBA and/or ODOB, or
* allocate resources, engage contract staff, or do whatever else is necessary to meet the OCANZ Accreditation Standards and enable a ‘teach out’ of the program within a short-term accreditation period agreed with OCANZ.

The education provider must also advise OCANZ of any other steps it will take as necessary to protect the interests of affected students.

In Australia, these requirements are echoed in the HES Framework and the *TEQSA Act* and TEQSA will also have a regulatory concern for the protection of the interests of the students.

# 4.0 Monitoring programs of study

## 4.1 Overview

OCANZ monitors all accredited programs of study to ensure the program and education provider continue to meet the OCANZ Accreditation Standards. OCANZ may impose conditions or revoke accreditation of a program if it finds that the program or provider is no longer meeting the Standards.

Monitoring provides an opportunity for early intervention by OCANZ if concerns are raised about an approved program. It also maximises the likelihood that students who are undertaking study in that program can complete their studies and graduate with a qualification that will be recognised by the OBA and ODOB for the purposes of registration as an optometrist.

OCANZ uses routine, targeted and random monitoring methods including:

* evaluation of a provider’s annual program of study report to OCANZ
* review of a provider’s responses to conditions of accreditation and/or monitoring
* periodic desktop audit of provider’s website/publications/social media
* examination of publicly available data sets (for example, graduate and employer survey results)
* investigation of complaints about a provider, including any matters referred from other accreditation or higher education regulators, the ODOB/OBA, the public or consumer health bodies.

## 4.2 Annual report

All providers of accredited programs of study are required to complete an annual report to OCANZ which includes key statistical data. The report is due at the end of each calendar year. The exception is that an annual report is not required in the year in which accreditation/reaccreditation occurs. OCANZ will supply the required template for annual reporting to education providers in the second half of each calendar year.

## 4.3 Monitoring conditions of accreditation

The National Law in Australia provides that conditions may be imposed on the accreditation of a program of study if an Accreditation Standard is substantially met and the conditions imposed on the approval will ensure the program meets the Standard within a reasonable time.

If OCANZ imposes conditions on a program of study, the conditions will specify the content and timing of any reporting required to OCANZ. Reporting on conditions is frequently requested by OCANZ at the same time as theannual program of study report.

## 4.4 Other monitoring

OCANZ may, from time to time, request information and/or impose monitoring to ensure that OCANZ continues to be satisfied that the OCANZ Accreditation Standards are being met by the program and education provider. OCANZ may determine at any time that a full assessment against the Standards is required to enable it to decide whether the Standards continue to be met.

## 4.5 Monitoring process and outcomes

The monitoring activities described above are overseen by the OCANZ Accreditation Committee. If the Accreditation Committee wishes to raise a monitoring issue, it will inform the education provider of its concerns and the grounds on which they are based. The Committee may also request additional information in a written response and/or require review and possibly a site visit by an assessment team to examine the specific issues of concern.

If a monitoring site visit is required, the Accreditation Committee will recommend and the OCANZ Board will appoint an assessment team to conduct the site visit. The assessment team will typically comprise a nominee of the Accreditation Committee, one member of the assessment team that conducted the most recent accreditation/reaccreditation of the program of study and the Chief Executive Officer of OCANZ or nominee. Additional members with specific expertise may be appointed at the discretion of the OCANZ Board.

The assessment team reports to the OCANZ Board via the Accreditation Committee either:

* that the issues of concern will not significantly affect the delivery of the program of study and/ or that the conditions set on the accreditation are being met or are likely to be met within a reasonable time. OCANZ may ask the provider to monitor identified risks and/or put in place appropriate controls or improvement strategies (Note: A recommendation arising from a monitoring assessment does not constitute a formal condition on accreditation registration), or
* that the issues of concern will significantly affect the delivery of the program and/ or the conditions set on accreditation are not being met and are unlikely to be met within a reasonable time, requiring regulatory action, or
* that the education provider and its program no longer meet the requirements for accreditation.

Whether or not a site visit occurs, the OCANZ Board will either affirm the ongoing accreditation of the program, or may:

* specify actions to be taken or issues to be addressed by the provider by placing new or additional conditions on the accreditation status granted; and/or restrict the period of accreditation, or
* revoke accreditation for the program, if it considers that the provider is unable to deliver the program in accordance with the OCANZ Accreditation Standards.

The OCANZ Board will advise the OBA and ODOB if the accreditation standing of the program is changed.

# 5.0 Making material changes to accredited programs

## 5.1 Definition of a material change

Any change that significantly affects the ability for the program of study or the education provider that provides the program to meet one or more of the OCANZ Accreditation Standards is a material change requiring OCANZ approval. The gradual evolution of a program of study in response to initiatives to meet the expansion of optometry practice and ongoing review is not considered a material change. However, OCANZ may regard a number of minor changes in the areas listed below as collectively constituting a material change.

## 5.2 Examples of a material change

As a guide to education providers, OCANZ may regard a change in an optometry program to have a material bearing on their accreditation standing if it involves:

* substantial change in the institutional setting
* substantial change in governance arrangements including those for monitoring program quality and graduate outcomes
* proposed change to the qualification level of the accredited program
* significant change in objectives of the program of study, or a substantial change in educational philosophy or emphasis
* significant changes to the methods of delivery such as a significant increase in on-line learning
* major changes in program entry or progression requirements that are likely to change the consequent type and level of learning experiences that flow from the change
* significant change in the course duration/volume of learning, especially a substantial reduction in the course duration/volume of learning
* significant change in curriculum content and/or structure
* significant change in the clinical training arrangements
* significant changes in teaching and/or assessment methods
* the establishment of the whole program or a major component of it at a new/additional geographical locations
* significant change in the expected learning outcomes for graduates
* significant changes in the staffing profile
* material reduction in resources and/or a change of student numbers relative to resources leading to an inability to achieve the objectives of the accredited program
* conditions imposed by another education regulator, government department or accreditation body that bring into question the provider’s ability to meet applicable legislation or one or more of the OCANZ Accreditation Standards
* another regulator (e.g., TEQSA, AQA or other) has identified a material change at institutional level that is likely to have flow-on material impacts on the optometry program.

If a provider is in doubt about whether or not proposed changes fall into the category of a material change, it should confer with OCANZ. The OCANZ Accreditation Committee will make the final decision as to whether one or more proposed changes are regarded by OCANZ as material changes requiring assessment.

A change that is so substantial that it constitutes a proposal for a new program should be made via an application for accreditation.

## 5.3 Notification of material change(s) by provider

Education providers planning material changes to an accredited program of study are required to submit to OCANZ a written outline of the proposed changes as soon as possible prior to any changes being introduced, either via their annual report or in a separate document.

Twelve months’ notice should be provided to OCANZ for planned material changes, with unplanned changes to be notified to OCANZ as soon as possible. The education provider must provide OCANZ with an assessment of the impact of the changes in relation to the OCANZ Accreditation Standards, outline the process for assuring the introduction of the changes and keep OCANZ informed if significant milestones in the change process are not achieved.

Failure to notify material changes to OCANZ is likely to have a negative impact on the accreditation of the program of study.

## 5.4 Material change - assessment process and outcome

Depending on the risk inherent in the change and the provider’s proposed and/or actual management of the change, OCANZ will advise whether or not the proposed change complies with the OCANZ Accreditation Standards and whether or not the material change needs to undergo further assessment.

The assessment of material change is overseen by the OCANZ Accreditation Committee. The Committee may itself assess the material change based on the written information provided or request the formation of an assessment team to support a more detailed assessment. If the Accreditation Committee considers that an assessment team is required to assess the material change and/or the education provider’s capacity to manage the introduction of the proposed change, the Accreditation Committee will recommend and the OCANZ Board will appoint an assessment team.

For the assessment of a material change that is limited in scope/impact, the assessment team will typically comprise a nominee of the Accreditation Committee, one member of the assessment team that conducted the most recent accreditation/reaccreditation of the program of study and the Chief Executive Officer of OCANZ or nominee. Additional members with specific expertise may be appointed at the discretion of the OCANZ Board. The assessment team may complete its report with or without a site visit.

For the assessment of a material change that has comprehensive impact, a full assessment team will typically be appointed by the OCANZ Board and a site visit conducted.

A report is prepared for the OCANZ Board via the Accreditation Committee advising either:

* that the material change continues to meet the OCANZ Accreditation Standards, will not significantly affect the delivery of the program of study and should be approved unconditionally within the current period of accreditation, or
* that the material change should be approved with conditions, which may include a shortened period of accreditation, or
* that the material change does not meet the requirements of the OCANZ Accreditation Standards, or
* that there is insufficient evidence to show that the material change will continue to meet the OCANZ Accreditation Standards.

The OCANZ Board may then:

* affirm the accreditation of the modified program for the remainder of the current period of accreditation, with or without conditions, or
* accredit the modified program for a shorter period, with or without conditions, or
* reject accreditation of the modified program.

The OCANZ Board will advise the OBA and ODOB of the outcome of a material change application.

# 6.0 Advertising optometry programs

All promotional and program materials, including written and website materials, relating to the accredited status of program of study must be accurate and not misleading.

Education providers must not give false or misleading information or advice in relation to their programs of study and registration outcomes, or make claims relating to an application for accreditation and the possible outcomes of the accreditation process or registration.

Education providers issuing media or publishing material regarding proposed new program of study, whether in hard copy or electronically, should seek approval from OCANZ for any statements regarding OCANZ and the accreditation process.

Education providers must be aware of their obligations under law. In Australia, this is the Australian Consumer Law (ACL) as this policy aligns to ACL section 18(1) which provides that: ‘A person must not, in trade or commerce, engage in conduct that is misleading or deceptive or is likely to mislead or deceive.’ In addition to applying to persons generally, this section applies as a Commonwealth law to the conduct of corporations (s131, CCA). In New Zealand, this is the Fair Trading Act 1986 (s13) which provides that: ‘No person shall...(s13e) make a false or misleading representation that goods or services have any sponsorship, approval, endorsement, performance characteristics, accessories, uses, or benefits.’

The Australian Competition and Consumer Commission’s (ACCC) current enforcement priorities highlight the need for companies to take a proactive approach to monitoring promotional activities. False and misleading advertising are encompassed within the ACL and where marketing and advertising are found to contravene the, OCANZ may refer matters to the relevant regulatory body.

In Australia, the HES Framework (Part A Section 7) also sets out a series of requirements for all providers in relation to how the provider represents itself, together with obligations concerning the nature and extent of material about programs that must be available in the public domain. The HES Framework requirements include proscription of claiming that a program is accredited by OCANZ before such accreditation is obtained.

If OCANZ has concerns about the accuracy of statements about accreditation in promotional or program materials, it will advise providers of the issue in writing and require that the promotional material be deleted or amended to meet OCANZ requirements. OCANZ may suspend the processing of an accreditation application until the promotional material is amended.

# 7.0 Complaints and appeals

In most instances concerns arising out of accreditation processes may be resolved by discussing the matter with the OCANZ Chief Executive Officer. This is the most convenient, efficient, cost neutral method of conflict resolution.

If you would like to make a formal appeal against an accreditation decision of OCANZ, or a make complaint about an accredited program or provider’s compliance with the OCANZ Accreditation Standards, our policy and processes can be found at <https://ocanz.org/concerns-and-complaints/>.

# Appendix 1 - Glossary

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| --- | --- | --- |
| Term | Acronym | Meaning |
| Academic Quality Agency of New Zealand | AQA (NZ) | The body that conducts periodic institutional-level audits of New Zealand universities. |
| Accredited |  | The program of study, and the education provider that provides the program of study, meet the approved Accreditation Standards. |
| Accredited with conditions |  | The program of study, and the education provider that provides the program of study, substantially meet the approved Accreditation Standards and can fully meet the Standards if the conditions of accreditation are met within a reasonable time. |
| Accreditation Committee | AC | A committee appointed by OCANZ and responsible for administering the accreditation of programs of study in optometry in accordance with OCANZ procedures and Standards. |
| Accreditation report |  | The final Accreditation Report produced by the OCANZ Board. An executive summary of this report is made public. |
| Accreditation Standard |  | Used to assess whether a program of study, and the education provider that provides the program of study, provide persons who complete the program with the knowledge, skills and professional attributes necessary to practise the profession in Australia. OCANZ as the accreditation authority for the optometry profession in Australia and New Zealand develops and uses the OCANZ Accreditation Standards to assess education programs and their providers for accreditation purposes. |
| Accreditation submission |  | Evidence by the education provider to show how the program of study, and the education provider that provides the program of study, meets the required Standards. |
| Assessment team |  | A team appointed by the OCANZ Board whose primary function is the analysis and evaluation of the optometry program against the OCANZ Accreditation Standards. |
| Competency Standards |  | A list of the skills, knowledge and attributes that a person needs to be able to practice optometry. Also commonly known as professional standards. |
| Education Provider |  | A tertiary education institution, specialist college or other provider of optometric education and training that delivers an OCANZ accredited program of study or is seeking OCANZ accreditation of a program of study. |
| Higher Education Standards Framework | HES Framework | The Australian Higher Education Standards Framework (2015) against which TEQSA regulates all higher education provided in or from Australia under the *TEQSA Act* *2011*, as amended from time to time. |
| Monitoring |  | Activities by the OCANZ Accreditation Committee so that it continues to be satisfied a program and its provider meet the approved OCANZ Accreditation Standards. |
| National Law |  | The national legislative scheme for the regulation of 15 health professions in Australia including optometry |
| Not accredited |  | The program of study, and the education provider that provides the program of study, do not meet the approved OCANZ Accreditation Standards and is not accredited. |
| Optometry Board of Australia | OBA | The National Board which regulates the optometry profession in Australia in accordance with the responsibilities set down in the National Law. |
| Optometry Council of Australia and New Zealand | OCANZ | The Accreditation Authority for the optometry profession in Australian and New Zealand. |
| Optometrists and Dispensing Opticians Board | ODOB | The National Board which regulates the optometry profession in New Zealand in accordance with the responsibilities set down in the *Health Practitioners Competence Assurance Act 2003*. |
| Program of Study |  | The complete program of study provided by an education provider. Note: The term “course” is used in many universities. |
| Tertiary Education Quality and Standards Agency (Australia) | TEQSA | An independent statutory authority that regulates and assures the quality of the Australian higher education sector, including registering providers of higher education. |

# Appendix 2 – List of core evidence required for accreditation submissions

OCANZ requires a short statement addressing each Accreditation Standard plus the following evidence with each application for accreditation/reaccreditation, although the format in which the evidence is provided is at the discretion of the education provider:

1. A statement of the overall educational philosophy/design for the program.
2. Evidence the education provider has registration with TEQSA (Australia) or audit by AQA (NZ).
3. An overview of the formal academic governance arrangements for the program including program quality assurance, review and improvement.
4. A curriculum map, assessment matrix or other consolidated and comprehensive program design documentation that specifies the program learning outcomes and demonstrates alignment of the education provider’s assessment approach with the learning outcomes and OCANZ endorsed professional competencies.
5. Sample student timetables for each year of the program, indicating allocation of key learning activities.
6. Student admission and progression policies and procedures for the program.
7. Information provided to prospective and enrolled students about the program.
8. The staffing profile for the program including numbers, professional qualifications, areas of expertise, teaching and supervision responsibilities and, if applicable, registration status (includes part-time and sessional staff).
9. A statement about the clinical training delivered in the program (to include in Standard 4 the expected number of patients to be observed, partially and independently managed by students under supervision; the variety of settings in which training will occur; the expected diversity of patient presentations including as outlined in the Table on page 17 and the corresponding evidence for same).
10. At least one sample of student clinical log books/portfolios (either in hard copy or electronic form).
11. The register of formal (and informal) agreements between the education provider and external supervisors, placement clinics, practices and services for the program.
12. A register of external supervisors’ qualifications, registration status and supervision responsibilities.
13. Policies and procedures on clinical and workplace safety, including screening and reporting and control of infectious diseases.
14. A description of the physical and financial resources for teaching and learning or otherwise used in the program.

1. In practice, this may lead to (for example) requests for additional information from providers before or during a site visit, interviews with particular staff or students, detailed investigation of the requirements of particular Standards and/or inspection of particular facilities or delivery methods. [↑](#footnote-ref-1)
2. OCANZ will accredit a program of study for up to 8 years before reaccreditation is required (subject to satisfactory monitoring). A program may be accredited for a shorter period of time and/or be subject to conditions and additional monitoring requirements. [↑](#footnote-ref-2)
3. OCANZ notes that TEQSA also conducts periodic risk assessments of providers at the institutional level, which may inform OCANZ of institutional factors that could have adverse effects on the optometry program. [↑](#footnote-ref-3)
4. TEQSA’s primary focus is at the institutional rather than program level. OCANZ’s risk analyses have regard to risks identified by TEQSA at the institutional level that may have an adverse impact on an existing or proposed optometry program delivered by a sub-unit of the institution, e.g., a department, faculty or school. [↑](#footnote-ref-4)
5. AQA’s focus is similarly at the institutional level. OCANZ’s risk analyses have regard to risks identified by AQA at the institutional level that may have an adverse impact on an existing or proposed optometry program delivered by a sub-unit of the institution, e.g., a department, faculty or school. [↑](#footnote-ref-5)