

**Information for Universities Applying for Accreditation or Re-accreditation of Programs for Education of Generalist OHS Professionals**

**Effective from January 2017**

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# 1 Background

Accreditation of professional education programs for generalist OHS professionals is required to:

* Provide a basis for professional certification by recognising educational programs that address the required knowledge and skills for professional certification
* Ensure that OHS professional education programs adequately prepare graduates to enter the workplace as an entry-level OHS professional, and
* Optimise industry and community recognition and confidence in OHS professionals.

The need for accreditation of professional education programs for generalist OHS professionals was identified as part of the OHS Body of Knowledge Project funded by WorkSafe Victoria. The Australian OHS Education Accreditation Board was established in 2011 with the first programs accredited in 2012. A review of the accreditation criteria and process was conducted in 2014 as part of the Board’s quality approach. The accreditation criteria were aligned with the Higher Education Standards Framework in 2016.

Following the first three re-accreditation processes conducted in 2017, and with the release of the recommendations of the Higher Education Standards Panel into Professional Accreditation (which identified elements of good practice and emerging trends in accreditation as well as opportunities for improvement) a further review of the accreditation process was undertaken.

This revised Information Book includes the updates implemented from the review.

Some definitions are provided here for ease of use.

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| **Accreditation** | Refers to the process whereby suitable education programs are identified and recognised for purposes of professional certification. |
| **Australian Qualifications Framework(AQF)** | **Is the quality assured national framework approved by the Australian government describing qualifications in the school, vocational education and training (VET), and higher education sectors in Australia.** |
| **Course** | Components in a sequence of study. Some people may call this a unit, a topic, a subject or a module. |
| **Certification** | Refers to the process whereby individuals are assessed and recognised as being suitably qualified and meeting the stated requirements to practice in the professional field. |
| **Generalist OHS professional** | One who applies a multidisciplinary Body of Knowledge in a unique way to provide enterprises with advice on the organisational arrangements that will lead to the systemic and systematic management and reduction of fatality, injury, disease and ill-health. |
| **Profession** | A profession is a disciplined group of individuals who adhere to ethical standards and who hold themselves out as, and are accepted by the public as possessing special knowledge and skills in a widely recognised body of learning derived from research, education and training at a high level, and who are prepared to apply this knowledge and exercise these skills in the interest of others. (Professions Australia, 1997) |
| **Program** | A sequence of study leading to a recognised qualification. Some people may call this a ‘course’. |

# 2 The Accrediting authority

The accrediting authority is the Australian OHS Education Accreditation Board (the Accreditation Board) auspiced by the Safety Institute of Australia. The Board has a broad membership with representation by OHS professionals, OHS academics, OHS professional bodies together with industry representation by employers, the ACTU and OHS regulators or policy makers. The Board membership also includes an education academic who provides educational advice relevant to the Board activities.

The Board’s structure as created under the By-Laws of the SIA clearly sets out the independence of the Accreditation Board in setting standards, accreditation processes and in decision-making regarding accreditation and related matters.

# 3 Benefits of program accreditation

Accreditation of OHS professional education is important to the profession and the community in that it:

* Provides guidance for students considering OHS professional education
* Provides guidance for employers and recruiters in selecting OHS professionals and in supporting professional development of personnel
* Contributes to public assurance that graduates meet a certain minimum standard of knowledge and skills
* (May) provide a basis for international comparability and reciprocal recognition, thus promoting mobility of OHS professionals.

Provider institutions will benefit through:

* Enhanced profile, reputation and standing with potential students and employers
* Realised quality improvement in OHS programs by submitting their program to a self and peer assessment process
* Increased recognition of the value of OHS professional education within the university community
* Possibly increased access to research funding
* Display of the Accredited Program logo on program literature and web site in line with conditions of use of the logo
* Accredited programs being listed in the Accreditation Board’s on-line list of accredited courses
* Current students being eligible for membership of the Safety Institute of Australia at Student Member rates
* Graduates of accredited programs being deemed to have met the knowledge requirements for entry to professional certification
* Institutions providing accredited programs being eligible to nominate students for the SIA national OHS education awards and educators for the Accreditation Board teaching and learning awards;

The role of professional accreditation for Higher Education programs is also recognised by the Tertiary Education and Quality Standards Agency (TEQSA) as being part of the Australian Education Quality System.

The report *Professional Accreditation: Mapping the territory* commissioned by the Department of Education and Training released in February 2018 stated “In general, professional accreditation is valued by all stakeholders. Most accreditors and education providers stress the value of accreditation as a stimulus to self and peer review, a benchmarking process and an opportunity for continuing quality assurance and improvement.”

# 4 Principles underpinning accreditation process

The Australian OHS Education Accreditation Board is cognizant of and supports the Joint Statement of Principles for Professional Accreditation agreed in 2016 by Professions Australia and Universities Australia. The agreed principles are embodied in the principles underpinning OHS education accreditation process as detailed below.

1. The accreditation process acknowledges that the academic quality and program standards are the responsibility of institutions through their internal procedures for quality assurance and thus requires evidence of the operation of such mechanisms for validating program outcomes and maintaining quality improvement.
2. The accreditation process recognises that each institution and each program is unique and this is to be valued. Thus the criteria for accreditation are outcome-based allowing institutions the maximum flexibility in achieving the required standards.
3. The accreditation process is intended to be constructive and to respect the expertise and academic autonomy of institutions providing OHS professional education. As a corollary the institutions are expected to be open and transparent in providing all appropriate information to the accreditation process on request.
4. The accreditation process will, as far as is possible, be aligned with institution and other externally required quality assurance processes with minimal complexity in the application process.
5. The accreditation process will be open to external scrutiny; conducted in a consultative and consensus-building collegiate fashion, transparent and fair, and balance academic priorities with those of the OHS profession.
6. The accreditation process is based on self- and peer-assessment for the purpose of publicly and openly assuring adequate standards of education and training of OHS professionals and the constant improvement of quality in OHS professional education.
7. Only full programs are accredited. The accreditation does not apply to individual courses or part programs
8. Completion of an accredited OHS program is deemed as providing satisfactory evidence of having completed the knowledge component of the requirements for entry-level OHS professional certification.

In addition, the Australian OHS Accreditation Board believes that the re-accreditation process for previously accredited University programs should be underpinned by the following principles:

1. The overarching purpose of the re-accreditation process is for the individual university to demonstrate that they continue to meet the criteria for accreditation by the Australian OHS Education Accreditation Board.
2. To recognise continuous improvement and the ongoing commitment of the universities to the development of both OHS knowledge and the OHS profession.
3. To reduce the burden on the universities undertaking re-accreditation, evidence required should focus on program specific information and not duplicate university administrative policies and procedures audited by TEQSA.
4. The criteria applied to the re-accreditation process will be based on the Accreditation criteria 2017-2021.
5. Early engagement is undertaken with stakeholders to ensure the re-accreditation process is well understood, transparent, and seen as credible by the universities.

# 5 Criteria for accreditation

## 5.1 Eligible programs

An OHS professional education program is defined as one that demonstrates the following:

* An accredited sequence of study provided at the AQF Level 7 or above (excluding graduate certificate)
* OHS as defined in the OHS Body of Knowledge constitutes at least 50% of the credit points and a minimum of one year equivalent fulltime study
* Objectives and learning experiences in the program are directed to the achievement of student learning outcomes aligned to the OHS Body of Knowledge[[1]](#footnote-1) and demonstrated through academic assessment processes.
* A process for ongoing consultation with industry-based personnel.

It is desirable that OHS, or similar, is part of the post-nominals for the qualification but this is not necessary provided the requirement of at least 50% of the credit points in OHS is met.

The accreditation is accorded to the education program not to the award title or to the school or faculty. Education programs are accredited or not; there is no ranking or merit grading of the programs.

## 5.2 Criteria

It is the practice of the Australian OHS Education Accreditation Board to structure the criteria for accreditation of OHS professional education to align with the domains of the Higher Education Threshold Standards. The accreditation standards applicable from January 2017 are derived from the outcomes of the accreditation Board review and the content of the new Higher Education Standards effective from the 1st January 2017.[[2]](#footnote-2) The domains under which the criteria are structured are:

1. Student participation and attainment
2. Learning environment
3. Teaching
4. Research and research training
5. (Institutional) quality assurance
6. Governance and accountability
7. Representation, information and information management.

The OHS program **accreditation** criteria and processes do not revisit evidence and processes likely to be addressed in a TEQSA review but rather address the specific case of OHS programs. See Appendix 1 for the accreditation criteria.

The criteria applied to program **re-accreditation** are based on the accreditation criteria. See Appendix 7 for a mapping of the re-accreditation focus against the accreditation criteria.

As the program has previously been accredited a key focus of the re-accreditation process will be on the continuous improvement undertaken within the program since the last accreditation. Specific sub-questions that drill down into program specific information will guide the universities to the evidence required.

A separate application pack has been developed for the re-accreditation process.

# 6 Accreditation process

## 6.1 Application cycle

An initial application may be made at any time for an existing program. Accreditation is awarded for five years. Application for renewal of accreditation may be made at any time to coincide with the institute’s quality processes but must be at least five-yearly. Advice of program changes shall be made as appropriate.

New programs may apply for provisional accreditation with a full application made in the final semester of the first graduating cohort. Accreditation of existing programs subject to major review will require clear definition of the changes and the revised program structure together with learning materials for new and revised courses available in a learning management system consistent with the intended delivery format.

Applications for re-accreditation must be received at least six months prior to the expiry of the current accreditation.

Programs that are nested or are substantially the same that were individually accredited initially may be eligible to be combined in the re-accreditation process. Please contact the registrar to discuss this option if you believe this to be relevant to your program.

## 6.2 Initial application

The accreditation process is also summarised in Appendix 2.

1. All applicants for accreditation are required to attend an accreditation briefing session prior to application. Briefing sessions are conducted for individual providers; these may be face-to-face, by video conference or other appropriate media.
2. On deciding to apply for accreditation provider downloads information and application booklet for initial accreditation from the website.
3. Provider may seek clarification or answers to particular queries by contacting the registrar.
4. Provider then completes the application documentation. The provider is strongly advised to refer to the Evidence Guide and Information Sheets in the Appendices 3 and 5 of the Information Booklet.
5. Application documentation is forwarded in electronic format to the Registrar of the Board ([registrar@ohseducationaccreditation.org.au](mailto:registrar@ohseducationaccreditation.org.au)).

## 6.3 Application for re-accreditation

1. Applications for re-accreditation must be submitted at least 6 months before the current accreditation expires
2. All applicants are encouraged to attend an accreditation briefing session prior to application. Briefing sessions are conducted for individual providers; these may be face-to-face, by video conference or other appropriate media.
3. On deciding to apply for re- accreditation provider downloads information and application booklet for re-accreditation from the website.
4. Provider may seek clarification or answers to particular queries by contacting the registrar.
5. Provider then completes the application documentation by providing evidence that answers the specific sub-questions that have been asked. The provider is strongly advised to refer to the Evidence Guide and Information Sheets in the Appendices 4 and 5 of the Information Booklet.
6. Application documentation is forwarded in electronic format to the Registrar of the Board ([registrar@ohseducationaccreditation.org.au](mailto:registrar@ohseducationaccreditation.org.au)).

## 6.4 Processing of application

### 6.4.1 The process

1. On receiving an application for accreditation the application is checked by the registrar for completeness
2. An assessment panel is convened by the registrar to conduct the assessment. As a minimum, the assessment panel comprises three people with at least one OHS professional, one OHS academic and one member of the Accreditation Board. The composition of the assessment panel is developed taking account of any actual or potential conflict of interest. Members of each assessment panel are required to complete a ‘No conflict of interest’ statement. New members of the accreditation panel are briefed by the registrar.
3. The assessment panel initially meets via teleconference to discuss the application and confirm that the assessment proceeds to a formal meeting of the assessment panel.
4. Further action required by the provider includes the forwarding the names of 5 students/recent graduates who agree to be interviewed.
5. A date for a face-to-face meeting of the assessment panel is scheduled in liaison with the provider. The program leader, selected teaching staff and the Head of School should be available for telephone interview at agreed times on the scheduled assessment day. Selected sessional staff and students should also be available for telephone interview on that day. Interview questions are developed to clarify any queries arising from the review of the documentation, student questionnaire responses and previous interviews. Some examples of the questions likely to be asked in interviews are given in Appendix 6.
6. The assessment panel reviews the documentation and materials in the Learning Management System prior to the face-to-face meeting.
7. At the face-to-face meeting the assessment panel discusses their findings in relation to the documentation and conducts telephone interviews.
8. The assessment panel reserves the right to determine the need for a site visit based on the outcomes of the desk audit and telephone interviews.

### 6.4.2 Outcome

A provisional assessment is made on the basis of the desk audit and interviews. The provisional assessment may be:

* Accreditation awarded
* Accreditation pending further information or a visit
* Accreditation requires significant additional work
* Accreditation refused at this time.

The provisional recommendation will then put to the full Board. The Board may endorse the recommendation of the assessment panel or they may request additional information or a visit.

Upon confirmation of accreditation the Board shall add the program to its on-line register of accredited programs and send the applicant an Accredited Program Logo. Use of the logo is bound by conditions defined by the Board.

### 6.4.3 Appeal processes

In the event that a provider is dissatisfied with the outcome of the accreditation process an application may be made for a review. This application must be made within 28 days of being notified of the decision of the Board. Any additional documentation must be submitted at this time.

The review process will be as follows:

* The Registrar of the Board will reconvene the assessment panel. For the purposes of the appeal the assessment panel will also comprise the education academic on the Accreditation Board and the Registrar.
* The assessment panel will examine the request for review and any additional submissions from the applicant. The review panel may interview the applicant or may visit the applicant.
* A final decision by the Board will be made within 30 days of the request for review plus any time required for provision of additional information. The decision may be to award accreditation, to list the accreditation application as requiring additional work; or to reject the application at this time.

A processing fee is charged for conducting a review for an appeal.

### 6.4.4 Monitoring processes

#### Annual return

Providers of accredited courses will be required to provide an annual return. This statement is in three parts.

**Part 1: Program details**

This includes:

* Number of students enrolled in the previous calendar year
* Number of students active across the program in the previous calendar year
* Number of students completing the program requirements in the previous calendar year
* Student quality survey results (where conducted and where available)
* Changes since last return to staffing, other resources, university reporting arrangements, program details or other relevant details together with an assessment of impact of the changes

**Part 2: Report on improvement plan**

* Status report on actions addressing areas for improvement identified through accreditation assessment.

**Part 3: Report on focus area**

Each year the Accreditation Board identifies a theme, topic or focus area for reporting as part of the annual return for the following year. These themes may relate to particular accreditation criterion, content topics are other areas identified through feedback from various sources.

A report card will be developed from the information provided by the universities for discussion by the Accreditation Board.

A copy of the report card related to their programs will be returned to the relevant university for their records following review by the Board.

#### Possible visit

The Board reserves the right to visit a provider of an accredited program at an agreed time by giving 30 days’ notice and the agreed time being within 14 days either side of that notice. Notice of a visit does not imply concern for the program but rather part of the quality processes of the Board.

### 6.4.5 Protections and deliberations

#### No conflict of interest statements

On receiving an application for accreditation the registrar circulates a ‘No Conflict of Interest’ statement requiring accreditation assessment panel members to register any actual or potential conflict of interest they may have in relation to the specific application for accreditation.

A conflict of interest is deemed to exist where the Board member works(ed) for that provider in an employment or sessional role, has played a role in the development of the program or has some other significant relationship with that provider.

A conflict of interest is not deemed to exist where there is only a competitive relationship, the Board member had been a visiting/guest lecturer, or there is a relationship where there is/was no/little impact on the program which is the subject of the application for accreditation.

#### Confidentiality of documentation and other information that is part of an application for accreditation

While some documents forming the application for accreditation will be in the public domain, the documentation forming the submission and the related reports generated as part of the assessment will be treated as confidential.

Circulation of documents forming the application for accreditation will be limited to the registrar and the assessment panel.

Only the registrar will distribute application-related documentation and a circulation register shall be kept recording recipients and dates. No Board member or member of an assessment panel will forward application-related documentation; all requests for documents are through the registrar.

Board members involved in OHS education will ensure that confidential information obtained through their role as Board member is not used to their competitive advantage.

#### Deliberations on applications for accreditation

Members of the Board and others who may form the pool of assessors for the purpose of accrediting OHS professional education programs receive appropriate training.

Board members with a conflict of interest are required to exempt themselves from accreditation deliberations relating to their institution.

With the exception of the registrar, each member of the Board has one (1) vote for the purpose of deliberations on assessment for accreditation. The registrar does not have a vote in accreditation deliberations.

A vote of two-thirds of the Board members present is required for an accreditation to be awarded. A quorum of the Board for the purposes of making a decision on accreditation is two-thirds of the Board members eligible[[3]](#footnote-3) to vote on the particular application.

# Appendices

***A1: Criteria for Accreditation of university level OHS professional education programs***

***A2: Flow chart of accreditation process***

***A3: Evidence guide to accompany criteria for accreditation of university level OHS professional education programs***

***A4: Evidence guide to accompany criteria for re-accreditation of university level OHS professional education programs***

***A5: Information sheets***

***A6: Evidence for Accreditation: Sample interview questions***

***A7: Mapping of re-accreditation focus against the Australian OHS Education Accreditation Board’s accreditation criteria***

# A 1: Criteria for accreditation of university level OHS professional education programs

***1 Eligible programs***

An OHS professional education program is defined as one that demonstrates the following:

* An accredited sequence of study provided at the AQF Level 7 or above (excluding graduate certificate)
* OHS as defined in the OHS Body of Knowledge constitutes at least 50% of the credit points and a minimum of one year equivalent fulltime study
* Objectives and learning experiences in the program are directed to the achievement of student learning outcomes derived from the OHS Body of Knowledge[[4]](#footnote-4) and demonstrated through academic assessment processes.
* A process for ongoing consultation with industry-based personnel.

Double degrees may be accredited where the requirements for a single degree are met and it is demonstrated that the further study enhances the graduates’ knowledge and skills in prevention of workplace fatality, injury, disease and ill-health and/or the promotion of health and well-being in the workplace.

It is desirable that OHS, or similar, is part of the post-nominals for the qualification but this is not necessary provided the requirement of major study in OHS is met.

The accreditation is accorded to the education program not to the award title or to the school or faculty. Education programs will be either accredited or not; there will be no ranking or merit grading of the programs.

***2 Accreditation standards***

The OHS accreditation standards reflect and extend the Higher Education Standards Framework (Threshold Standards) 2015 set by the Australian Government.[[5]](#footnote-5) These criteria should be read in conjunction with those standards. (A comparison of the accreditation criteria effective from January 2017 to those in place for 2012-16 can be downloaded from <http://www.ohseducationaccreditation.org.au/providers/> )

All criteria must be met.

| **Higher Education Standard Domain** | | **Accreditation criteria 2017-2021** | |
| --- | --- | --- | --- |
| **1 Student participation and attainment** | | | |
| 1.1 | Admission | 1.1 | Admission criteria are clearly stated. |
|  |  | 1.2 | Admission criteria are designed to ensure that students have the capacity to achieve the program learning outcomes. |
| 1.2 | Credit and recognition of prior learning | 1.3 | Credit through recognition of prior learning is granted only if the integrity of the course and qualification are maintained. Where credit recognition is granted the student completes a set of courses that comprise an eligible program ie: at least half of the credit points and one-year equivalent full time are OHS units at AQF 7 level or above. |
| 1.3 | Orientation and progression | 1.4 | Students are supported in transitioning to study through a clear statement of the requirements of the program and expected academic standards. Where appropriate, there is assessment of student readiness. |
|  | 1.5 | Assessment together with timely and comprehensive feedback to students on their performance is treated as an integral part of the learning process. |
|  |  | 1.6 | Processes for identifying students at risk of unsatisfactory progress are documented with evidence of their application. |
|  |  | 1.7 | Student progression through the program is monitored so that trends in rates of retention, progression and completion are monitored as a basis for review and improvement. |
| 1.4 | Learning outcomes and assessment | 1.8 | Specified learning outcomes for each course include OHS specific knowledge, skills and application as well as generic skills for effective OHS practice. |
|  | 1.9 | The program includes integrated tasks and structured learning experiences that address the conceptual structure of the OHS Body of Knowledge as defined in the current version of the Accreditation Information Pack. |
|  |  | 1.10 | There is evidence of integration of learning with workplace/ professional practice. |
|  |  | 1.11 | A range of assessment methodologies provide evidence that key knowledge, skills and understanding have been achieved, together with demonstrable application in practice at a level appropriate to the award. |
|  |  | 1.12 | Assessment principles, methodology, criteria and expectations are clearly enunciated and communicated to students prior to the commencement of teaching. |
| 1.5 | Qualifications and certification | 1.13 | The program structure, content and learning activities are appropriate to the level of the award taking account of the criteria in the Australian Qualification Framework. |
| **2 Learning environment** | | | |
| 2.1 | Facilities and infrastructure | 2.1 | Where practical activities are undertaken as part of the program, facilities and equipment are sufficient in number and reasonably representative of current OHS practice. |
|  |  | 2.2 | IT communication and library facilities are reliable and accessible by all students. |
|  |  | 2.3 | The learning environment, whether physical, virtual or blended, and associated learning activities support academic interactions among students outside of formal teaching. |
| 2.2 | Diversity and equity |  |  |
| 2.3 | Wellbeing and safety | 2.4 | There are adequate facilities for student support and counselling regarding academic progress readily accessible by all students in forms that reflect their mode of learning and physical access to the campus. |
| 2.4 | Student grievances and complaints | 2.5 | There is demonstrable adherence to institutional processes for recognising and responding to student grievances and complaints and there is a proactive, equitable response to student concerns such that, where appropriate they may be resolved at a program or course level. |
| **3 Teaching** | | | |
| 3.1 | Course design | 3.1 | Program information, including individual course descriptions includes content summary, expected learning outcomes (with course outcomes mapped to program outcomes) methods of assessment and compulsory requirements for completion. |
|  |  | 3.2 | The approach to teaching, learning and assessment is clearly enunciated, informed by current educational theory and practice, and evident both in teaching and assessment arrangements and support provision. |
|  |  | 3.3 | The teaching program demonstrates current and leading-edge thinking and research in OHS knowledge and practice. |
|  |  | 3.4 | Sequence of courses studied and teaching and learning activities are designed to foster cumulative achievement of learning outcomes as the student progresses toward achievement of professional level knowledge and skills in OHS practice. |
|  |  | 3.5 | There is adequate opportunity and facilities for student: staff and student peer-interaction to enable the development of skills, knowledge and understanding required of an effective entry-level OHS professional, irrespective of the mode of delivery and location of student. |
|  |  |
| 3.2 | Staffing | 3.6 | Academic staffing profile provides the underpinning knowledge, level of academic oversight and teaching capacity to lead students in the intellectual enquiry expected of the learning outcomes for the program and for each course. |
|  |  | 3.7 | Staff receive induction and professional development to enable them to be an integral part of the education process |
|  |  | 3.8 | Where sessional staff are employed for a series of lectures or for a unit there is suitable supervision and support to enable them to contribute as an integral part of the educational process. |
|  |  | 3.9 | There are arrangements for input to the teaching program by practicing OHS professionals. |
|  |  | 3.10 | Teaching staff have experience in the OHS field and/or are supported in obtaining/maintaining industry contact and experience. |
|  |  | 3.11 | Teaching staff are encouraged and supported in undertaking professional development both in their OHS-related academic field and in teaching and learning. |
|  |  | 3.12 | Support staff in sufficient number and capability to ensure the quality and viability of the program. |
| 3.3 | Learning resources and education support | 3.13 | Library and other study resources are current, available and suitable for the content, modes of learning and numbers of students. |
|  | 3.14 | IT facilities and staff IT skills are suitable for the modes of delivery and learning models. |
| **4 Research and research and research training** | | | |
| 4.1 | Research | 4.1 | Teaching staff are encouraged and supported in undertaking research and are expected to maintain scholarship in their OHS-related field. |
| 4.2 | Research training | 4.2 | Teaching program and learning outcomes address research principles and methodology appropriate to OHS in the workplace and the AQF level of the qualification. |
| **5 Institutional quality assurance** | | | |
| 5.1 | Course approval and accreditation |  |  |
| 5.2 | Academic and research integrity | 5.1 | Validity and reliability of assessment modes can be demonstrated. |
|  | 5.2 | Integrity of assessment can be demonstrated taking account of the mode of delivery of learning and assessment. |
| 5.3 | Monitoring, review and improvement | 5.3 | Programs are subject to periodic comprehensive review which includes the program overall as well as individual courses. The review addresses learning outcomes, methods of assessment as well as staffing. |
|  |  | 5.4 | Review is informed by developments in OHS and education, identified risks to the program, student achievement data, student and staff feedback, changing needs of students, developments in OHS and in education. |
|  |  | 5.5 | Review process includes input by past and present students. |
|  |  | 5.6 | Regular course review includes evidence of response to student feedback and lecturer reflection on the delivery of the individual courses. |
|  |  | 5.7 | Formal processes and structures are in place for regular oversight and input by OHS professionals and industry. Such arrangements should be designed so that the industry and professional advisors have some familiarity with the program and their input is timed to inform university approval processes. |
| 5.4 | Delivery with other parties | 5.8 | Where work placements are part of the program documented policies and procedures ensure student safety, quality of student experience and contribution to student learning outcomes. |
| **6 Governance and accountability** | | | |
| 6.1 | Corporate governance |  |  |
| 6.2 | Corporate monitoring and accountability |  |  |
| 6.3 | Academic governance | 6.1 | The program sits within a defined faculty/school and there is a statement of commitment to the program by the head of the faculty/school that includes budgetary and infrastructure provision. |
|  |  | 6.2 | There is a clearly identified leader of the academic team for the program who has a background in an OHS-related discipline. |
| **7 Representation, information and information management** | | | |
| 7.1 | Representation |  |  |
| 7.2 | Information for prospective and current students | 7.1 | Publicly available program information clearly defines the nature and level of the qualification, expectations/requirements of students including indicative workload, the learning outcomes, any content emphasis, any resource requirements including IT/internet access and any requirements for access to a workplace together with all forms of student support arrangements as a basis for informed decision-making pre-enrolment. . |
| 7.3 | Information management |  |  |

# A 2: Outline of accreditation process

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|  |  | Time line |
|  | Applicant downloads Information and Application booklets from the web site |  |
|  | Applicant formally or informally registers expression of interest |  |
|  | Briefing session conducted by registrar |  |
|  | Applicant completes and submits application to registrar | Week 1 |
|  | Receipt of application acknowledged with further actions advised |
|  | Registrar reviews application | Week 2 |
|  | Registrar convenes Assessment Panel |
|  | Application for IT access for LMS |  |
|  | Application forwarded to Assessment Panel with dates set for preliminary teleconference and tentative date for assessment | Week 3 |
|  | Initial review of application by assessment panel | Week 4-5 |
|  | Preliminary teleconference and LMS guided tour e | Week 6 |
|  | Assessment date set in consultation with applicant and Assessment Panel |  |
|  | In-depth review of documentation and learning management system by assessment panel |  |
|  | Interview schedule developed and interviewees contacted by registrar |  |
|  | Assessment conducted including interviews by teleconference | Week 8 |
|  | Assessment Panel makes recommendation to Accreditation Board | Week 10 |
|  | Report provided to applicant | Week 12 |

|  |  |  |  |
| --- | --- | --- | --- |
| **Outcome** | | | |
| Accreditation awarded | Accreditation pending further information or a visit | Accreditation requires significant extra work | Accreditation refused at this time |
| Report includes areas for improvement/ongoing monitoring | Meeting with applicant to discuss areas further information required and/or areas for further development | | |
| Statement of conditions and benefits of accreditation provided together with Accredited Program logo and Conditions of Use |

# A 3: Evidence guide to accompany criteria for initial accreditation of university level OHS professional education programs

**1 Definitions**

|  |  |
| --- | --- |
| **Australian Qualifications Framework(AQF)** | **Is the quality assured national framework approved by the Australian government describing qualifications in the school, vocational education and training (VET), and higher education sectors in Australia.** |
| **Course** | Components in a sequence of study. Some people may call this a unit, module or a topic. |
| **Program** | A sequence of study leading to a recognised qualification. Some people may call this a “course”. |
| **Student surveys** | Includes all surveys carried out at the national level and also by the university, the school or the specific program. |

**2 Criteria, explanation and evidence**

The following table has been developed to assist providers in completing the application for accreditation. The explanation column provides further detail on the intent of the criterion. As the intent of the accreditation process is to work, as far as is practical, within the provider’s existing documentation and assurance processes the column listing examples of evidence indicates the type of evidence that may already exist within the university and program documentation. This column does not imply that the documentation listed must be provided, as compliance with the criterion may be demonstrated in a number of ways.

| **Higher Education Standard Domain** | | **Accreditation criteria 2017-2021** | | **Explanation** | **Examples of evidence** |
| --- | --- | --- | --- | --- | --- |
| **1 Student participation and attainment** | | | |  |  |
| 1.1 | Admission | 1.1 | Admission criteria are clearly stated. | Potential students and others such as employers should be able to readily access information on entry requirements. | * Web link |
|  |  | 1.2 | Admission criteria are designed to ensure that students have the capacity to achieve the program learning outcomes. | While providing for flexibility, entry requirements, including any special entry arrangements, should take account of AQF learning outcome descriptors and stated program learning outcomes. | * Admission policy, including documented special entry arrangements * Evidence of application of admission policy * Program reviews |
| 1.2 | Credit and recognition of prior learning | 1.3 | Credit through recognition of prior learning is granted only if the integrity of the course and qualification are maintained. Where credit recognition is granted the student completes a set of courses that comprise an eligible program ie: at least half of the credit points and one-year equivalent full time are OHS units at AQF 7 level or above. | While student progress through the different levels of awards is recognised as desirable this objective must be supported by clear policies that protect the integrity of the program while appropriately recognising relevant prior learning. This is vital in addressing the risk factors to the credibility of the program posed by RPL and ensuring acquisition of skills and knowledge at the appropriate level | * Information to potential students * RPL policy * Study plans for individual students that have been awarded RPL * Summary reports recording courses for which RPL is granted and the basis for awarding such RPL * Examples of modified study plans for any student transitioning from one award to another where this involves RPL |
| 1.3 | Orientation and progression | 1.4 | Students are supported in transitioning to study through a clear statement of the requirements of the program and expected academic standards. Where appropriate, there is assessment of student readiness. | Students considering OHS professional studies come from a range of educational and work backgrounds. Potential students should be provided with information on the expected learning and academic standards as well as expected time and engagement commitments to support self -assessment and informed decision-making about enrolment as by potential students.  Support processes for transition to tertiary study may be provided at the university or program level. | * Web-based Information for potential students * Information on transition support is available to potential and current students via web or other sources * Course details on any resources supporting transition |
|  | 1.5 | Assessment together with timely and comprehensive feedback to students on their performance is treated as an integral part of the learning process. | Assessment should assist students in understanding where they need to improve and give them opportunities to improve. Thus both the timing of assessment and the nature of the feedback are important in the learning process. | * Assessment policy * Assessment schedule * Examples of assessment feedback including marking rubrics |
|  |  | 1.6 | Processes for identifying students at risk of unsatisfactory progress are documented with evidence of their application. | Processes for identifying and supporting students at risk take account of part time and distance modes | * Information to students * Policy document on students at risk * Evidence of monitoring processes for students at risk * Student progress committee records * Mentoring arrangements (either general or examples for specific students) * Arrangements for special consideration |
|  |  | 1.7 | Student progression through the program is monitored so that trends in rates of retention, progression and completion are monitored as a basis for review and improvement. | Student progress is monitored at both an individual and program level using processes and measures relevant to part time and flexible modes of delivery. (i.e. measures record and report on individuals not EFSTLs). | * Student progress records * Collated student progression and completion reports |
| 1.4 | Learning outcomes and assessment | 1.8 | Specified learning outcomes for each course include OHS specific knowledge, skills and application as well as generic skills for effective OHS practice. | While course outlines generally address OHS specific outcomes the course outcomes should also address generic skills that may be important in the application of the OHS-specific knowledge addressed in the particular course. | * Program documentation including and course outlines. |
|  | 1.9 | The program includes integrated tasks and structured learning experiences that address the conceptual structure of the OHS Body of Knowledge as defined in the current version of the Accreditation Information Pack. | The OHS Body of Knowledge defines the knowledge with which the generalist OHS professional is expected to ‘engage’. In this case ‘engage’ can be defined as participating in informed discussion – it does not necessarily mean knowing all in depth. However, it is expected that while there will be breadth to the new graduates’ knowledge there will also be depth in some areas. The areas of depth will reflect the stated content focus of the program and expertise of staff.  *Refer to Information Note: Criterion 1.9.* | * Course guides * Assessment matrix * Assessment activities and marking guides for specific assessments |
|  |  | 1.10 | There is evidence of integration of learning with workplace/ professional practice. | Integration may occur through input of practicing professionals and/or exposure of students to the workplace environment.  Where workplace-based activity is assessed engagement should be validated by supervisor | * Course guides * Assessment activities * Third party validation * Information on support for people who may not have a workplace |
|  |  | 1.11 | A range of assessment methodologies provide evidence that key knowledge and skills have been achieved. | This criterion requires demonstration of a clear relationship between assessment activities and learning outcomes. This correlation should be reflected in the assessment activities and the marking guides.  Where group activities comprise a significant component of the assessment strategy, the assessment methods should ensure that individual students demonstrate acquisition of the required knowledge and skills.  Compulsory requirements for completion should ensure demonstrated acquisition of key knowledge and skills. | * Course guides * Assessment policy * Assessment activities and marking rubrics * Mapping of assessment activities to course and program learning outcomes |
|  |  | 1.12 | Assessment principles, methodology, criteria and expectations are clearly enunciated and communicated to students prior to the commencement of teaching. | While general information on assessment principles and expectations may be provided to students at the beginning of the program, the information for each course and each assessment activity should include detailed information. This information should include the criteria for assessment (ie: what the assessor is looking for) which is usually communicated via a marking rubric. | * Assessment policy * Program documentation * Course outlines * Information to students at commencement of program and commencement of individual courses * Assessment schedule and any flexibility arrangements * Student surveys |
| 1.5 | Qualifications and certification | 1.13 | The program structure, content and learning activities are appropriate to the level of the award taking account of the criteria in the Australian Qualification Framework. | While program documentation gives evidence of intention, this criterion is assessed as evidenced by the assessment activities. Thus the evidence sought is about whether requirements expressed in the AQF learning outcomes are reflected in the assessment. The marking guides are one way of demonstrating this.  The OHS Professional Capability Statements[[6]](#footnote-6) developed to reflect the AQF outcomes at each qualification level indicate what the new and developing graduate is expected to be able to do in the workplace. They do not have to be included in program documentation but should inform program development and assessment. | * Program documentation * Course guides * Assessment activities and marking guides for specific assessments * A matrix indicating how AQF learning outcomes are addressed in various courses can be useful. |
| **2 Learning environment** | | | |  |  |
| 2.1 | Facilities and infrastructure | 2.1 | Where practical activities are undertaken as part of the program, facilities and equipment are sufficient in number and reasonably representative of current OHS practice. | Not all programs will necessarily have practical activities but where the educational philosophy and approach to learning and teaching require practical activities appropriate equipment should be available. | * Equipment inventory or register, asset register * Calibration records and safety check records * A statement on the required standard of equipment where equipment outside the control of the university is used for assessment activities |
|  |  | 2.2 | IT communication and library facilities are reliable and accessible by all students. | Reliable IT and access to online learning resources and libraries are essential for all modes of delivery of OHS professional education particularly those learning remotely. Reliability issues may relate to the provider IT arrangements, the LMS platform or the internet access arrangements of the learner. This criterion refers to the IT matters over which the provider has control, this includes structuring format of online learning resources to facilitate remote access taking account of factors such as bandwidth. | * Information to students on Help Desk availability * Student surveys * Minutes of staff/student consultative committee * IT Department reports on availability/reliability * Examples or statements of special arrangements that may have been made/could be made where students have access issues |
|  |  | 2.3 | The learning environment, whether physical, virtual or blended, and associated learning activities support academic interactions among students outside of formal teaching. | Peer engagement is an important aspect of learning and in developing communication and engagement skills essential for the effective OHS professional. Student learning activities should be structured to support such engagement, even where there may be student resistance. Assessment activities should reflect the level of such engagement and the development of associated skills. | * Student information on the program overall * Course outlines * Assessment rubrics |
| 2.2 | Diversity and equity |  |  |  |  |
| 2.3 | Wellbeing and safety | 2.4 | There are adequate facilities for student support and counselling regarding academic progress readily accessible by all students in forms that reflect their mode of learning and physical access to the campus. | This criterion specifically refers to counselling on academic progress.  Support should be structured so that it is equally available to part time and remote students as well as full time, on-campus students. | * Information to students * Assessment schedule (including and flexibility arrangements) * Policy document for students at risk * Monitoring processes for students at risk * Student progress committee records * Mentoring arrangements (either general or examples for specific students) * Arrangements for special consideration |
| 2.4 | Student grievances and complaints | 2.5 | There is demonstrable adherence to institutional processes for recognising and responding to student grievances and complaints and there is a proactive, equitable response to student concerns such that, where appropriate they may be resolved at a program or course level. | Based on the assumption that institutional processes for reporting and managing student grievances are in place, this criterion is about creating an open approach to raising and responding to student issues. | * Emails or other documentation relating to individual students lodging a grievance. * Student feedback and lecturer response to any themes in collated student feedback |
| **3 Teaching** | | | |  |  |
| 3.1 | Course design | 3.1 | Program information, including individual course descriptions includes content summary, expected learning outcomes, methods of assessment and compulsory requirements for completion. | Program and course information clearly demonstrates the links between program learning outcomes, course learning outcomes and assessment activities as an integral part of the program design and development.  Compulsory requirements for completion clearly stated. | * Program documentation * Course outlines * Assessment activities * Mapping matrices demonstrating correlation. |
|  |  | 3.2 | The approach to teaching, learning and assessment is clearly enunciated, informed by current educational theory and practice, and evident both in teaching and assessment arrangements and support provision. | The approach may be defined as a provider level and/or program level.  The approach to teaching and learning may principally reflect a theoretical position, or the combination of a number of factors, including for example (1) the orientation and approach to knowledge of the school in which the program is located (e.g. science, business, health), (2) the attitude of the institution to - and opportunities for - work-based experiences, (3) the distinctive emphasis within the broad field of OHS (e.g. research and testing, psychology, health and welfare), and (4) the reflection in teaching methodology of the learning contexts of students (e.g. full-time, part-time, distance, or online). | * Statement of the philosophy/approach underpinning teaching and learning * Information on how this may be used to induct sessional staff * Examples of practice that demonstrate the application of the particular approach to teaching, learning and assessment. |
|  |  | 3.3 | The teaching program demonstrates current and leading-edge thinking and research in OHS knowledge and practice. | While OHS-related research undertaken by the provider is important, this criterion is more about the strategies for ensuring that the program and content is informed by and reflects leading edge thinking in OHS in the broader sense.  This criterion does not require that teaching staff necessarily engage in research but that they are engaged in scholarship and so the program content is routinely updated and informed by current research. | * PD records for staff including any conferences attended, consultancy activities or membership of advisory committees * Publishing lists for staff * Reading/reference lists * Networks within university, other universities and research bodies * Contributions to program by specialists |
|  |  | 3.4 | Sequence of courses studied and teaching and learning activities are designed to foster cumulative achievement of learning outcomes as the student progresses toward achievement of professional level knowledge and skills in OHS practice. | The sequence of course studies should clearly describe a ‘learning journey’ for the student which both teaching staff and students should be able to enunciate. | * Program documentation * Information to potential students * Student feedback |
|  |  | 3.5 | There is adequate opportunity and facilities for student: staff and student peer-interaction to enable the development of skills, knowledge and understanding required of an effective entry-level OHS professional, irrespective of the mode of delivery and location of student. | Interaction is critical for exploring and constructing understanding as part of effective learning. Post-graduate students learn from interaction with peers as well as with academic staff.  The nature of professional practice requires collaborative work and it is expected that this requirement will be reflected in the teaching and learning environment. | * Course guides * Schedule of lecture/practical/tutorials/chat sessions * Assessment activities * Student surveys * Examples of on-line and face to face interactions (e.g. ‘lectopia’ recordings recorded chat/tutorial sessions) |
| 3.2 | Staffing | 3.6 | Academic staffing profile provides the underpinning knowledge, level of academic oversight and teaching capacity to lead students in the intellectual enquiry expected of the learning outcomes for the program and for each course. | A number of strategies may be applied to ensure required breadth and depth of OHS and other knowledge and skills of academic staff.  Where project work is a requirement of the program, the number of academic staff and their range of skills and experience should be sufficient to ensure adequate student supervision and assessment.  Where the OHS teaching group is small, documented contingency strategies are required describing arrangements for ongoing availability of required academic staff to ensure viability of program. | * Staffing policy * CVs of teaching staff including academic and sessional * Workplans |
|  |  | 3.7 | Staff receive induction and professional development to enable them to be an integral part of the education process. | This criterion is specifically about the induction of staff to the approach to teaching and learning for the school and the program including principles and details of assessment. (While the standard university-wide induction program and PD program is important it is not the subject of this criterion.) | * Induction modules * Induction records * Refresher/update staff training modules * Minutes of teaching and learning committee minutes * Staff/team meetings * Student surveys |
|  |  | 3.8 | Where sessional staff are employed for a series of lectures or for a unit there is suitable supervision and support to enable them to contribute as an integral part of the educational process. | This criterion differentiates between sessional staff and visiting or guest lecturers. Session staff are defined as those who have a major role in the delivery of a course or significant part of a course. | * Induction checklist for session staff * Nominated person as mentor for sessional staff * Records of meetings with sessional staff * Feedback from/reviews of sessional staff |
|  |  | 3.9 | There are arrangements for input to the teaching program by practicing OHS professionals. | ‘Input’ as required under this criterion refers to the design as well as the delivery of the program. | * List and schedule of visiting/guest lecturers, units and topics. * Member list of Program Advisory Committee and sample minutes with attendees included * Minutes of course development meetings |
|  |  | 3.10 | Teaching staff have experience in the OHS field and/or are supported in obtaining/maintaining industry contact and experience. | It is important to the credibility and outcomes of the program that the teaching staff are able to give a practical context to their teaching. This is especially important in PG programs where the students will have considerable work and possibly OHS experience.  Staff may gain this experience through a range of activities including working in an OHS role, involvement in industry projects, consulting activities. | * CVs for teaching staff * Resume of consulting/ advisory activities/work plans of teaching staff * Student surveys |
|  |  | 3.11 | Teaching staff are encouraged and supported in undertaking professional development both in their OHS-related academic field and in teaching and learning. | This criterion is about more than conference attendance. There is a wide range of activities that may be considered professional development. PD activities should also be considered over an extended period, say 2-3 years. | * Policy document * Budget statement for PD * Professional Development records /work plan of staff * CPD records for Certified OHS professionals |
|  |  | 3.12 | Support staff in sufficient number and capability to ensure the quality and viability of the program. | Support staff are vital to the delivery of quality education experience. Support staff may be dedicated to the program or may be school-based. Where support staff are school-based there should be a clarity in their roles and scope of support. | * Roles and responsibilities of non-academic staff * Workplans |
| 3.3 | Learning resources and education support | 3.13 | Library and other study resources are current, available and suitable for the content, modes of learning and numbers of students. |  | * Information to students * AOHSEAB temporary access to on-line resources * Statement of library services and support including Help Desk hours * Student surveys * Minutes of staff/student consultative committee |
|  | 3.14 | IT facilities and staff IT skills are suitable for the modes of delivery and learning models. | This criterion addresses both the IT platform and its suitability for the teaching and learning approach and the skills of the staff, including sessional staff, in using to platform to achieve the stated outcomes. | * Information to students * Statement on how IT approaches are linked to the purposes and educational approach of the program * Statement on IT support services including IT Help Desk hours * Student surveys * Minutes of staff/student consultative committee * Training programs available and training records for staff * AOHSEAB temporary access to on-line resources |
| **4 Research and research and research training** | | | |  |  |
| 4.1 | Research | 4.1 | Teaching staff are encouraged and supported in undertaking research and are expected to maintain scholarship in their OHS-related field. | In this context consulting activities may be considered as research especially where there has been a contribution to ‘scholarship’ through publication or conference presentation.  Support in undertaking research is important such that pressure to research does not negatively impact on teaching activities. | * Policy document * Work plans for staff * Published papers * Conference presentations |
| 4.2 | Research training | 4.2 | Teaching program and learning outcomes address research principles and methodology appropriate to OHS in the workplace and the AQF level of the qualification. | OHS professionals should gain skills in undertaking workplace-based research. These skills are generally gained through research-based project work during their education. The training in research skills should reflect the breadth of research skills and issues related to insider research required for effective workplace-based research. | * Course outlines * Assessment activities |
| **5 Institutional quality assurance** | | | |  |  |
| 5.1 | Course approval and accreditation |  |  |  |  |
| 5.2 | Academic and research integrity | 5.1 | Validity and reliability of assessment modes can be demonstrated. | Validity of assessment is about whether the assessment activity reasonably assesses achievement against the learning outcomes.  Reliability is about how consistency between different assessors is achieved. This may be within a course or perhaps across different courses and assessors. | * Policy statement on inter-rater reliability and moderation * Evidence of moderation in assessment * Marking rubrics * Mapping matrices |
|  | 5.2 | Integrity of assessment can be demonstrated taking account of the mode of delivery of learning and assessment. | The key issue here is whether there is a validation process to confirm who has actually completed the assessment activity. This is especially important where there is no/little on-campus component. | * Assessment policy * Course outlines * Examination arrangements |
| 5.3 | Monitoring, review and improvement | 5.3 | Programs are subject to periodic comprehensive review which includes the program overall as well as individual courses. The review addresses learning outcomes, methods of assessment as well as staffing. | While requirements for regular review are likely to be addressed in institutional assurance policies there must be evidence that reviews have actually occurred and outcomes actioned. | * Policy document * Program documentation * Records of reviews |
|  |  | 5.4 | Review is informed by developments in OHS and education, identified risks to the program, student achievement data, student and staff feedback, changing needs of students, developments in OHS and in education. | Effective reviews should be informed by information from a broad range of sources both inside and outside the university. | * Review documentation * Member list of Program Advisory Committee and sample minutes with attendees included * Student surveys |
|  |  | 5.5 | Review process includes input by past and present students. |
|  |  | 5.6 | Regular course review includes evidence of response to student feedback and lecturer reflection on the delivery of the individual courses. |  | * Collated student surveys/feedback sheets |
|  |  | 5.7 | Formal processes and structures are in place for regular oversight and input by OHS professionals and industry. Such arrangements should be designed so that the industry and professional advisors have some familiarity with the program and their input is timed to inform university approval processes. | Formal arrangements will usually include a course advisory committee which should include external industry and professional representatives. | * Review documentation * Member list of Program Advisory Committee and sample minutes with attendees included * CVs of OHS professional and industry representatives on course advisory committee |
| 5.4 | Delivery with other parties | 5.8 | Where work placements are part of the program documented policies and procedures ensure student safety, quality of student experience and contribution to student learning outcomes. | Where work-placements occur they should be formally structured with clear learning outcomes and specific activities reflecting the learning outcomes and defined supervision arrangements. | * Course outlines * Work-placement policy * Work-placement/third party agreement * Feedback forms from student and workplace supervisors |
| **6 Governance and accountability** | | | |  |  |
| 6.1 | Corporate governance |  |  |  |  |
| 6.2 | Corporate monitoring and accountability |  |  |  |  |
| 6.3 | Academic governance | 6.1 | The program sits within a defined faculty/school and there is a statement of commitment to the program by the head of the faculty/school that includes budgetary and infrastructure provision. |  | * Information to students * Program documentation * Statement/letter Head of School |
|  |  | 6.2 | There is a clearly identified leader of the academic team for the program. |  | * Nominated program leader * CV of program leader |
| **7 Representation, information and information management** | | | |  |  |
| 7.1 | Representation |  |  |  |  |
| 7.2 | Information for prospective and current students | 7.1 | Publicly available program information clearly defines the nature and level of the qualification, expectations/requirements of students including indicative workload, the learning outcomes, any content emphasis, any resource requirements including IT/internet access and any requirements for access to a workplace together with all forms of student support arrangements as a basis for informed decision-making pre-enrolment. . | Program information includes:   * Mode of learning and delivery * Method of delivery of learning materials * Content emphasis and focus.   Expectations /requirements of students include:   * Time commitment * Assessment requirements * Requirements for a workplace * Requirements for on-campus attendance * IT and internet requirements * Requirements for collaboration.   Student support arrangements may include:   * Library resources and support including hours * General university student support * Student support specific to the program * Whether student support is available to P/T students and out of hours * IT support. | * Information to students * Website link * Any hard copy information to students |
| 7.3 | Information management |  |  |  |  |

# A4: Evidence guide to accompany criteria for re-accreditation of university level OHS professional education programs

**1 Definitions**

|  |  |
| --- | --- |
| **Australian Qualifications Framework(AQF)** | **Is the quality assured national framework approved by the Australian government describing qualifications in the school, vocational education and training (VET), and higher education sectors in Australia.** |
| **Course** | Components in a sequence of study. Some people may call this a unit, module or a topic. |
| **Program** | A sequence of study leading to a recognised qualification. Some people may call this a “course”. |
| **Student surveys** | Includes all surveys carried out at the national level and also by the university, the school or the specific program. |

**2 Criteria, explanation and evidence**

The following table has been developed to assist providers in completing the application for re-accreditation. The intent of the re-accreditation process is to work, as far as is practical, within the provider’s existing documentation and assurance processes the column listing examples of evidence indicates the type of evidence that may already exist within the university and program documentation. This column does not imply that the documentation listed must be provided, as compliance with the criterion may be demonstrated in a number of ways.

For the purposes of re-accreditation assessment, it is assumed that the university level processes already observed in the initial accreditation process have been maintained and are the subject of audit by TEQSA. Therefore you are requested to provide evidence against a sub-set of the accreditation criteria. Please refer to Appendix 7 in the Accreditation Information Package for a mapping of the re-accreditation focus to the full set of criteria for initial accreditation.

**Section 1: Program information**

| **Area of focus** | **Accreditation Criteria** | **Specific evidence and questions to address** | **Evidence may include** |
| --- | --- | --- | --- |
| Admission criteria | 1.1, 1.2 | Have your admission criteria changed since your program received initial accreditation?  If YES, please provide us with the new criteria and the rationale for the change. | * Admissions policy document * Analysis of student success data and recommendations for change * Overview of change rationale and implementation of change |
| RPL | 1.3 | Outline the process used within your School/Faculty to accept/decline applications for RPL. This may include;   * Who is responsible for undertaking the assessment and making the decision * Whether students are provided with guidance and advice prior to submission * The factors considered when assessing applications * The numbers of formal application received in the last two years * The numbers approved and declined in the last two years | * RPL data for the relevant program * RPL application form and criteria * An overview of your process * De-identified assessments that show the process and decision-making |
| Alignment with AQF level | 1.13 | Outline the processes you use at faculty/school level to ensure that the content and learning activities within your program are aligned to the appropriate AQF level.  Please provide a copy of your AQF mapping document. | * An overview document * AQF mapping document |
| Program information for current and prospective students | 3.1 | Program information, including individual course descriptions includes content summary, expected learning outcomes (with course outcomes mapped to program outcomes), methods of assessment and compulsory requirements for completion.  Provide us with copies of your course/unit/subject outlines. | * course/unit/subject outlines |
| 7.2 | Provide us with a link to your program information on the university web-site. | * Relevant links |
| Program leadership | 6.1 | You have previously provided information about the defined faculty/school.  Please advise if there are any changes to faculty/school in which the program managed  Provide a statement of commitment to the program by the head of the faculty/school that includes budgetary and infrastructure provision as part of your application. | * Information provided in your application * Program documentation * Information provided to students * Statement/Letter from Head of School |
| 6.2 | You have previously identified the leader of your academic team with a background in an OHS related discipline as part of your application.  Please advise if there are any changes in program leadership.  Do you have a succession plan for your program leadership? If YES, provide an overview. | * Information provided in your application * A summary of changes to program leadership * A copy of your leadership succession plan * Future strategy documents |

**Section 2: Teaching and learning**

| **Area of focus** | **Accreditation Criteria** | **Specific evidence and questions to address** | **Evidence may include** |
| --- | --- | --- | --- |
| Teaching Philosophy | 3.2 | What is the teaching philosophy of your program? How do you engage with that philosophy in the ongoing review of your course learning outcomes, content and assessments?  How do you communicate your philosophy to your students either formally or informally? | * Teaching philosophy * Overview document * Internal mapping documents * Relevant website links * Any hard copy/electronic information provided to students that addresses the teaching philosophy |
| Provision of feedback | 1.5 | What is the expected turn-around time on assessments within your program? What happens if teaching staff don’t meet your turn-around time?  How is the quality of feedback provided by the teaching staff in your program reviewed for consistency? For example, is it part of your moderation process? | * An overview of how you monitor feedback provided to students * Your program’s internal quality assurance process (as opposed to the university level one) |
| OHS Body of Knowledge (BoK) | 1.9 | How do you ensure that the OHS Body of Knowledge is conceptually addressed within your program? Eg. Is it discussed at staff meetings? Is it something you work on as a faculty on your planning days? How do you involve your industry advisory group in the process?  How do you assess learning and assessment tasks within your program to ensure that student are able to integrate (not duplicate) their understanding of the BoK?  *Note: It is not intended that the OHS Body of Knowledge should dictate the content of your program; the Body of Knowledge articulates important concepts and theories to underpin it. It is expected that new and emerging modes of practice not yet captured in the Body of Knowledge should be included as relevant in your program.* | * Descriptive overview * Mapping documents * Outcomes of a review of assessment tasks/methodologies * Planning documents * Meeting minutes |
| Assessment methodologies | 1.11 | What process do you use to ensure that a range of assessment methodologies is used across your program?  How do you ensure that the assessment tasks set within your units/courses are actually assessing whether the Unit and Program Learning Outcomes have been demonstrated? Provide a copy of your mapping document that shows the alignment of your unit and program learning outcomes and assessment tasks.  What **changes** have been made to your assessment methodologies since the last accreditation review? Provide a summary of the changes made; this can be in the form of the documents submitted for subject alteration approval, a mapping document or a description depending on the scale of the changes that have been made.  How do you ensure that the program assessment as a whole includes a range of tasks that relate to practice and application and not just knowledge retention? | * An overview of how you apply your University’s Assessment policy * Mapping documents * Desk-top audit outcomes * Documents submitted for subject alteration * Meeting minutes * Description of changes and rationale |
| Integration of learning and professional practice | 3.4, 1.10 | How do you sequence units/topics/courses so that students build on and integrate their learning as they progress through the program? Give us an example of how you scaffold learning throughout your program.  How do you demonstrate the integration of formal learning with workplace/ professional practice in your program e.g. capstone project within a Master’s program.  How do you define the concept of ‘OHS practice’? How do you use that concept to assure that your program is developing professional level knowledge and skills in your graduates that is aligned with industry expectations and needs? | * Overview document that outlines what professional practice means in the context of your program and how it is achieved * Mapping of subjects/units/courses where integration occurs * Copies of relevant tasks (may or may not be assessed) |
| Student interaction and engagement | 3.5, 2.3 | What formal and informal teaching and learning strategies do you use within your program to drive student learning and engagement as an entry level OHS professional? | * Overview document * Student evaluation/survey data |
| Teaching capability | 3.6, 3.10, 3.11 | What do you see as the capability strengths of your teaching staff? Are there any gaps in capability? If SO, what is your plan to build it in that area?  How do you work with your academic staff to continuously improve their teaching skills when utilising technology based modes of delivery?  How do you support your teaching staff to maintain their currency as OHS professionals?  Please provide current CVs for your teaching staff. | * Overview document * Relevant strategy or planning documents * Staff CVs * Teaching strategy * Professional development offerings * Performance conversations (process) * An overview of the faculty’s approach to working together/ learning from each other |
| Sessional staff | 3.8 | Are new sessional staff provided with mentors or peer-coaches? If NO, what other forms of support do you provide to them?  Are sessional staff expected to develop the content for the courses they teach? How do you ensure that there is no overlap and that such units integrate seamlessly into your program? | * Overview document * Links to website * Links to resources provided * Planning documents * Meeting minutes |
| OHS professional practice | 3.9 | Describe how and when you involve practicing OHS professionals in in the delivery of your program. | * Description * Relevant planning documents * Course schedules |
| Research principles and methodology | 4.2 | In which courses are students provided with the research principles and methodology appropriate to OHS in the workplace and the AQF level of the qualification addressed? Are both qualitative and quantitative methods addressed?  Are students equipped to be a ‘consumer’ of research as well as to undertake basic research in the workplace? | * Reference to the courses/units/topics (outlines have already been provided) * An overview document |

**Section 3: Continuous improvement**

| **Area of focus** | **Accreditation Criteria** | **Specific questions to address** | **Evidence may include** |
| --- | --- | --- | --- |
| Student progression | 1.7 | Explain how you continue to grow your program and improve the quality of the OHS professionals that you graduate.  Provide an example of how you have used retention, progression and completion data from your student base to inform continuous improvement within your program. | * Application to Course Review Committee to initiate a change to a subject/unit/course * Minutes from Program Advisory Committee meeting where the data was discussed * Action plans |
| Learning outcomes | 1.8 | How often do you review your program/course learning outcomes? Who is involved in the review process? What are your key considerations in designing your program/course learning outcomes?  What changes have been made at program level or to individual subjects/units since the last accreditation review?  Provide a summary of the changes made; this can be in the form of the documents submitted for subject alteration approval, a document that maps the changes made or a description depending on the scale of the changes that have been made. | * Course/Subject/Unit outlines (already provided) * Review documentation * Internal policy and course design principles * List of changes made to program/subjects with rationale * Documents submitted to the university for change approval |
| Student grievance process | 2.5 | Have you had any formal grievances or complaints lodged by students in the accredited program in the last 2 years?  If YES, please provide us with an overview of the concerns raised, the processes used to unpack the concerns and any actions taken as a result.  *Please note that we are interested in how this feeds into your continuous improvement process and not in the details of the grievance or complaint.* | * Overview document * Action plans |
| Comprehensive program review | 5.3, 5.4, 5.5, 5.6 | When and why was the last comprehensive review of you program undertaken? Who conducted the review? Briefly describe their background and the role expected of them.  Were Terms of Reference developed for the review; for example to maintain focus on specific areas such as:   * developments in OHS and education * identified risks to the program * student achievement data * feedback from students (past and present) * self-review by staff and changing needs of students * learning outcomes * assessment methods * staffing   Provide a summary of the areas of concern and/or identified areas for improvement arising from the review and the agreed actions implemented as a result. What is the status of the actions?  Provide an example of a change that has resulted in a course in response to student feedback.  How are students informed of the changes made in response to their feedback?  Provide a link to your university policy and process in relation to program review. | * Policy document * Overview document * Terms of Reference * Action plan(s) * Meeting minutes * Student evaluation/survey data * Change documentation * Any hard copy or electronic information to students on this topic * Student evaluation/survey data * Website link |
| OHS professional inputs | 5.7 | What is your approach to engaging with and involving OHS professionals and industry representatives in the continuous improvement of your program? For example, are they actively engaged in developing new directions, principles, outcomes and assessments or is their role in validation only? | * Overview document |

**Section 4: Current research and leading edge thinking**

|  |  |  |  |
| --- | --- | --- | --- |
| **Area of focus** | **Accreditation Criteria** | **Specific evidence and questions to address** | **Evidence may include** |
| Current research and leading edge thinking in OHS | 3.3 | How do you as a school/faculty integrate leading edge thinking and current research in OHS (outside your own research interests) into your program?  Give an example of where this has been done in the last 2 years explaining what was included, how it was integrated and the rationale for inclusion. | * Overview document * Subject change request documentation * Examples |
| 4.1 | What research is currently being undertaken by the academic and teaching staff delivering your program?  How is the knowledge generated in that research translated into teaching and learning materials? | * List of current research topics and timelines * Reference to published papers or conference presentations * Examples of how research is translated into subject/unit/course content |

# A 5: Information sheet on breadth and depth of the OHS Body of Knowledge

### Criterion 1.9

***The Academic program: Program content***

*The program includes integrated tasks and structured learning experiences that address the conceptual structure of the OHS Body of Knowledge as defined in the current version of the Accreditation Information Booklet.*

### Background

**Conceptual structure of the Core Body of Knowledge for the Generalist OHS Professional**

The OHS Body of Knowledge is the collective knowledge that should be shared by Australian generalist OHS professionals to provide a sound basis for understanding the aetiology and control of work-related fatality, injury, disease and ill-health (FIDI). This knowledge can be described in terms of its key concepts and language, its core theories and related empirical evidence, and the application of these to facilitate a safe and healthy workplace.

The OHS Body of Knowledge defines the knowledge with which the generalist OHS professional is expected to ‘engage’. In this case ‘engage’ can be defined as participating in informed discussion – it does not necessarily mean know all the concepts and sub-concepts in depth.

In defining the Body of Knowledge it is recognised that knowledge is not static. Rather it is subject to continual reinterpretation and evolution as people engage with it, apply it and extend it by conducting research. As experience is an important contributor to knowledge and its application, it should not be assumed that any educational program can address the whole of the core Body of Knowledge for the generalist OHS professional.

For the purposes of accreditation, the scope of the Body of Knowledge is limited to that with which a new graduate would be expected to engage and so is somewhat limited. It is expected that while there will be breadth to the new graduates’ knowledge there will also be depth in some areas.

For the purposes of program accreditation, all concepts must be addressed in some way in the program (i.e. left hand column, bold type). It is then up to the university to demonstrate that they address the OHS Body of Knowledge from an advanced theoretical and technical perspective, with both breadth and depth in some areas. For example, learners may be required to address one or two physical hazards in depth with a broad understanding of a number of others; while other programs may address a broader range of hazards in less depth. Irrespective of the approach, program content and assessment activities should reflect the AQF level of the qualification.

The diagram describing the conceptual approach to the OHS Body of Knowledge provides a mental model that should underpin the students’ developmental ‘journey’.

While not prescribing the content of individual programs it is recommended that some consideration be given to the hazards causing the priority work related diseases and disorders listed in the National Work Health and Safety Strategy 2012-2022. Addressing the conceptual framework of the core Body of Knowledge for OHS professionals does not mean that there should be specific units with titles reflecting the conceptual framework, in fact it is preferred that there is an integrated approach. Each concept is not necessarily equal in time committed or assessment focus. Some aspects such as the foundation science and perhaps the Human as a Biological System may be addressed through selection criteria.

The list of concepts and sub-concept in the OHS Body of Knowledge is given below. The full text of the Body of Knowledge is available at [www.ohsbok.org.au](http://www.ohsbok.org.au). The OHS Body of Knowledge continues to evolve with additional topics being identified and new chapters developed. The additional topics identified where new chapters may not yet have been written are indicated in red on the following conceptual structure for the OHS Body of Knowledge.

Specific learning outcomes have been developed for the chapters of the OHS Body of Knowledge. While these learning outcomes should inform the development of learning and assessment activities the learning outcomes are not about assessment activities but rather what will be expected of graduates when they enter the workforce. The learning outcomes do not have to be specifically included in program documentation but should program development and assessment.

In designing the program and the assessment activities the university should consider that the most reliable way for the Accreditation Board to assess the breadth and depth of student learning is to review the assessment activities.

**Conceptual structure of the Core Body of Knowledge for the Generalist OHS Professional**

Note: Chapters in red are proposed for development

|  |  |  |
| --- | --- | --- |
| ***Foundation science*** | *7* | *for understanding hazards, mechanism of action and so control* |
| **Socio-political context** | 8.1 | OHS law and regulation in Australia |
| 8.2 | Principles of OHS law |
| 9 | Industrial, technological and business imperatives |
| **The organisation** | 10 | The Organisation |
| 10.2 | Organisational culture |
|  | *Complexity and adaptive capacity* |
|  | OHS performance evaluation |
| **Systems** | 11 | Systems |
| 11.3 | Managing process safety |
|  | Rules procedures and documentation |
| **Human (individual)** | 12 | As a biological system |
| 13 | Basic psychological principles |
| 14 | Basic principles of social interaction |
| **Hazards and their mechanisms of action and related controls** | 15 | Hazard as a concept |
| 16 | Biomechanical |
| 17 | Chemical |
| 17.3 | Process hazards - Chemical |
| 18 | Biological |
| 19 | Psycho-social hazards and occupational stress |
| 20 | Psychosocial: Fatigue |
| 21 | Psychosocial: Bullying, aggression and violence |
| 22 | Physical: Noise and vibration |
| 23 | Physical: Electricity |
| 24 | Physical: Ionising radiation |
| 25 | Physical: Non-ionising radiation |
| 26 | Physical: Thermal (hot/cold environments, processes and objects) |
| 27 | Physical: Gravitational (people and things falling from heights), slips and trips |
| 28 | Physical: Mechanical plant |
| 29 | Physical: Mobile plant |
| 30 | Physical: Vehicles and occupational road use |
|  |  |
| **Risk** | 31 | Risk |
| 31.2 | OHS Risk and decision-making |
|  |  | People, risk and psychology |
| **Causation** | 32 | Models of occurrence causation (safety) |
| 33 | Models of causation (health determinants) |
| **Control** | 34 | Control: Prevention and intervention |
| 34.1 | User-centred safe design approach to control |
|  | Engineered safe design |
|  | Design of good work |
|  | Occupational health |
|  | Fitness for duty |
| 35 | Mitigation: Health impacts |
| 36 | Mitigation: Emergency planning |
| **Practice** | 38 | Model of OHS practice |
|  | Leadership and the OHS Professional |
|  | Working in organisations |
| 39 | The OHS Professional as critical consumer of research |
|  | The OHS Professional as a workplace researcher |
|  | Ethical and professional practice |

### Completing your application

**Program content and the OHS Body of Knowledge**

Section 3.3 of the Accreditation Application Pack requires a summary of courses and the extent to which the various concepts and sub concepts are covered across the program. While individual course or unit titles and number designations may be listed here a verbal description **is also required**. An example of this is given below. In providing this example it is not suggested that this is a ‘model’ example or the only way of demonstrating how the OHS Body of Knowledge is addressed through the program.

|  |  |  |
| --- | --- | --- |
| *Concepts* | *Sub Concepts* | *Program name* |
| **Socio-political context** | OHS law as regulation in Australia | XXX - covers the application of the legal system to OHS and RTW. Specifically, it also examines details of WHS Act. Specific Regulations and Codes covered under individual hazards. |
| Technological and industrial relations climate and business imperative | XXX - covers a number of aspects of organisation including economics and employee relations. |
| **Systems** | Systems and systems thinking, management systems, systems of work | Overall approach throughout course covers systems approaches to OHS, emphasising conceptual frameworks, models and an integrated approach.  XXX - introduces system thinking and analysis. XXX - introduces SMSs as part of risk control. XXX - covers specific issues of OHS management systems and their effectiveness, including audit. |
| **The organisation** | Culture, leadership, organisational change, governance, management, organisational strategy | XXX – discusses culture and leadership. Organisational change is introduced in the theoretical and practical sense within XXX. This course also covers specific meta-skills necessary for organisational change. |

Such an overall summary may also be supported by similar summary at the course or unit level.

Section 3.3 also requires mapping of the OHS Body of Knowledge learning outcomes that are addressed in the qualification. Addressing the learning outcome requires more than just the topic being covered in the teaching material. While it is not expected that the content in the OHS Body of Knowledge would be ‘taught’ it is expected that the course developer and the lecturer/tutor will be familiar with the chapter content and be able to discuss the chapter content in the context of their approach to the topic. The assessment panel will seek confirmation that the learning outcomes are covered by reviewing the content available via the learning management system.

# A 6: Evidence for Accreditation: Suggested interview questions

Interview questions are designed to explore and clarify queries that may have arisen in the review of the documentation and information on the learning management system and previous interviews; thus each interview will be subtly different. The following interview questions listed against the relevant accreditation criterion are examples only.

***1 Head of School***

|  |  |  |
| --- | --- | --- |
| Qu No | Crit No |  |
|  | 6.1 | What is the priority and importance of the OHS program in the school plan? Budget commitment? |
|  | 6.1 | What is your impression of the Teaching and Learning quality of the OHS program? |
|  | 6.1 | Do you have any concerns regarding the program? |
|  | 5.3 | What measures are used to judge the quality of the OHS program? |
|  | 3.10 | What value do you place on academics having industry experience? |
|  | 3.11 | In what ways are staff encouraged and supported in undertaking professional development? |
|  | 4.1 | In what ways are staff encouraged and supported in maintaining scholarship and undertaking research in their field? |
|  | 1.12 | What processes do you have in place for succession planning? |

***2 Program leaders***

|  |  |  |
| --- | --- | --- |
|  |  | What do you see as the strengths of the program?  *There are many courses offering Masters/Grad Dip qualifications in OHS. What do you think differentiates your program from the others?* |
|  | 3.2 | Describe the theoretical underpinnings to the approach to teaching and learning and these are reflected in the teaching and learning and assessment arrangements. |
|  |  | Is the program facing by current issues or challenges? |
|  | 1.3 | How are applications for RPL or credit transfer managed? |
|  | 4.11 | What is the process for identifying and responding to students at risk? |
|  | 1.4 | Do you monitor whether students access transition to study support programs? What is the frequency of access and what is the nature of the feedback on the programs? |
|  | 3.6 | Is any part of the program at risk because of numbers or capability of academic staff? |
|  | 3.6 | Is your personal workload or that of your team challenging? In what ways? |
|  | 3.6 | What parts of the program are undertaken by sessional staff and reason for using those? |
|  | 3.6 | Is any part of the program at risk because of inadequate support? |
|  | 3.8 | What processes are in place to ensure quality of sessional staff? |
|  | 3.9 | How is OHS professional input incorporated in the design of the program? |
|  | 5.1 | Where more than one person assesses specific assessment activities, how do you manage marker reliability and consistency? |
|  | 5.2 | How do you insure the integrity of the assessment submissions? |
|  | 5.3-5.7 | Outline a recent modification to the program? What initiated the review? What were the inputs? What changes were made as a result of the review? |
|  | 5.8 | What are your reflections on the program and your role as program leader? |
|  |  | Does the program include practical placements? If so, how are these organised and assessed? |
|  |  | What frustrations, if any, do you experience? What improvements would you suggest? |

***3 Teaching staff***

|  |  |  |
| --- | --- | --- |
|  |  | What is the nature of your contribution to the program? |
|  |  | To what extent did you influence the design of the course(s) you teach? |
|  |  | What do you consider is being done well? |
|  | 2.1 | Do you, or should you, include practical work requiring equipment in your teaching? Are there barriers to inclusion of practical work when it is required by the nature of the topic? Is the equipment available reasonably representative of that used in current OHS practice? |
|  | 3.13 | Do you consider that the library and other study resources are suitable for the content, modes of learning and delivery and numbers of students? |
|  | 3.14 | Do you consider that you have adequate skills to use the IT teaching and learning platform to its fullest extent? What support have you had in developing your skills in this area? |
|  | 3.5 | What strategies do you use to promote student / student engagement? |
|  | 3.6 | Is any part of the program at risk because of the academic staff numbers or capability of academic staff? |
|  | 3.7 | Can you describe the university approach to teaching and learning? |
|  | 3.10 | What industry experience have you had? What opportunities have you had to maintain industry experience? Were you supported to take up this opportunity? |
|  | 3.11 | What professional development activities have you undertaken in the last 12 months? Where you supported by the university in these activities? |
|  | 3.11/4.1 | Would you consider that the university expect and encourages you to maintain scholarship in your area? In what ways has this been demonstrated? |
|  | 4.1 | Would you consider that the university expect and encourages you to undertake research in your area? In what ways has this been demonstrated? |
|  | 3.5 | How do you manage your response to student queries? |
|  | 1.6/2.4 | What is your process of identifying students at risk and what is your process for responding once identified? |
|  | 1.11 | Can you describe the university’s approach to assessment? How does the assessment for your courses demonstrate this approach? |
|  | 3.2 | Can you describe the educational philosophy or theoretical underpinning of the program and how your course contributes to that. |
|  | 3.6 | Do you consider your workload is manageable/challenging? In what ways? |
|  |  | What are your reflections on your teaching experience (standards, student engagement, other)? |
|  |  | What frustrations, if any, do you experience? What improvements would you suggest? |

***4 Sessional staff***

|  |  |  |
| --- | --- | --- |
|  |  | What is the nature of your contribution to the program? |
|  |  | What do you consider works well? |
|  |  | To what extent did you influence the design of the course(s) you teach? |
|  | 3.8 | Do you feel that you are an integral part of the education process? |
|  | 3.8 | What level of support/access to resources do you receive from the university (e.g. access to online library, course development time, training in use of LMS)? |
|  | 3.7 | In what ways did the School or the program staff make you feel an integral part of the education process? |
|  | 3.2 | Can you describe the educational philosophy or theoretical underpinning of the program and how your course contributes to that. |
|  | 3.8 | Can you describe the university approach to assessment and how you course demonstrates this? |
|  | 2.3 | What strategies do you use to encourage student engagement? Are they successful? |
|  |  | What are your reflections on your teaching experience (standards, student engagement, other)? |
|  |  | What frustrations, if any, do you experience? What improvements would you suggest? |

***5 Students/graduates***

|  |  |  |
| --- | --- | --- |
|  |  | What was your background before you entered the OHS program? |
|  | 7.1 | Did the information available before you enrolled give a realistic indication of the program and the study requirements? |
|  | 1.3 | Did the program deliver what you expected it to? If not, what were the gaps? |
|  | 3.5 | Have you found the library (incl electronic library) and other study resources adequate, helpful and up to date? Can you give some examples? |
|  | 2.2/3.14 | What has been your experience of the IT system? |
|  | 2.2 | Can you get IT assistance at the time you need it? |
|  | 2.5 | Do you feel adequately supported by the teaching staff? What are the features that make you feel this way? |
|  | 3.8 | Do you consider that the sessional staff are up to speed on university processes? |
|  | 3.10 | Do you consider that the teaching staff have real world experience and are able to incorporate practical examples in their teaching? |
|  | 3.11/4.1 | Do you get the impression that teaching staff are current and up to date in their knowledge? |
|  | 2.3/3.5 | Are there opportunities for engagement with other students to help develop your understanding? |
|  | 2.4/3.5 | What opportunities do you have to discuss your queries with staff? |
|  | 1.6/2.4 | Have you needed to access support regarding your academic progress? What support was available to you? |
|  | 5.1 | Do the assessment criteria ad information on assessment enable you to give a clear account of your learning? |
|  | 1.11 | Are the requirements for assessment explained to you at the commencement of each course? |
|  | 1.12 | Does the assessment schedule allow you to manage your study workload? |
|  | 1.5 | What sort of turnaround time have you found on assignments? |
|  | 1.5 | Are you provided with constructive feedback that enables you to improve your performance? |
|  | 1.5 | Did the timeliness and nature of the feedback assist you in your learning? |
|  | 3.9 | Did you have access to a workplace as during your study period? Were work placements a structured part of the program? What was your experience of the work placement? |
|  | 5.5 | Are you aware of any students being on the student consultative committee or involved in any program review? |
|  |  | Would you recommend the program to others? |
|  |  | What do you consider were the strengths (and weaknesses) of the program? |
|  |  | What two things would you recommend to improve the program? |

# A7: Mapping of re-accreditation focus against the Australian OHS Education Accreditation Board’s accreditation criteria

| Higher Education Standard Domain | | Accreditation criteria 2017-2021 | | **Re-accreditation focus** |
| --- | --- | --- | --- | --- |
| **1 Student participation and attainment** | | | |  |
| 1.1 | Admission | 1.1 | Admission criteria are clearly stated. | Evidence is only required to be submitted if there has been a CHANGE since the program was first accredited. |
|  |  | 1.2 | Admission criteria are designed to ensure that students have the capacity to achieve the program learning outcomes. |
| 1.2 | Credit and recognition of prior learning | 1.3 | Credit through recognition of prior learning is granted only if the integrity of the course and qualification are maintained. Where credit recognition is granted the student completes a set of courses that comprise an eligible program ie: at least half of the credit points and one-year equivalent full time are OHS units at AQF 7 level or above. | The re-accreditation focus of this criterion is your school/faculty processes for processing RPL applications.  The university level policy and process were assessed at the initial accreditation and are monitored by TEQSA. |
| 1.3 | Orientation and progression | 1.4 | Students are supported in transitioning to study through a clear statement of the requirements of the program and expected academic standards. Where appropriate, there is assessment of student readiness. | This is a university level issue to be monitored by TEQSA and is therefore not a focus for re-accreditation purposes. |
| 1.5 | Assessment together with timely and comprehensive feedback to students on their performance is treated as an integral part of the learning process. | This criterion relates to your program level processes for provision of feedback and moderation.  The university’s assessment policy was interrogated in your initial assessment for accreditation and will be reviewed by TEQSA. |
| 1.6 | Processes for identifying students at risk of unsatisfactory progress are documented with evidence of their application. | This is a university level issue monitored by TEQSA and is therefore not a focus for re-accreditation purposes. |
| 1.7 | Student progression through the program is monitored so that trends in rates of retention, progression and completion are monitored as a basis for review and improvement. | We are interested in how you use the data you gather about your students to both grow your program and contribute to the OHS profession. |
| 1.4 | Learning outcomes and assessment | 1.8 | Specified learning outcomes for each course include OHS specific knowledge, skills and application as well as generic skills for effective OHS practice. | The focus is on how you ensure that your learning outcomes and content are aligned and are pitched at the right level. |
| 1.9 | The program includes integrated tasks and structured learning experiences that address the conceptual structure of the OHS Body of Knowledge as defined in the current version of the Accreditation Information Pack. | The OHS Body of Knowledge is the collective knowledge that should be shared by Australian generalist OHS professionals to provide a sound basis for understanding the causation and control of work related fatality, injury, disease and ill health (FIDI). It is therefore a core criterion for re-accreditation. |
|  | 1.10 | There is evidence of integration of learning with workplace/ professional practice. | This criterion has been combined with criterion 3.4 for the purposes of re-accreditation as a single response can address both criteria. |
| 1.11 | A range of assessment methodologies provide evidence that key knowledge and skills have been achieved. | The focus is to ensure that assessments relate to practice and application rather than pure knowledge retention. |
| 1.12 | Assessment principles, methodology, criteria and expectations are clearly enunciated and communicated to students prior to the commencement of teaching. | It is expected that these are detailed in the subject/unit/course outlines; therefore no further evidence is required. |
| 1.5 | Qualifications and certification | 1.13 | The program structure, content and learning activities are appropriate to the level of the award taking account of the criteria in the Australian Qualification Framework. | This criterion is focussed on the processes and discussions that you as a program, faculty or school to ensure that the content and learning activities are aligned to the appropriate AQF level. |
| **2 Learning environment** | | | |  |
| 2.1 | Facilities and infrastructure | 2.1 | Where practical activities are undertaken as part of the program, facilities and equipment are sufficient in number and reasonably representative of current OHS practice. | This criterion can be interrogated via subject/unit/course outlines and interview responses. |
| 2.2 | IT communication and library facilities are reliable and accessible by all students. | This is a university level issue to be monitored by TEQSA and is therefore not a focus for re-accreditation purposes. |
| 2.3 | The learning environment, whether physical, virtual or blended, and associated learning activities support academic interactions among students outside of formal teaching. | This criterion has been combined with criterion 3.5 for the purposes of reaccreditation as a single response can address both criteria. |
| 2.2 | Diversity and equity |  |  |  |
| 2.3 | Wellbeing and safety | 2.4 | There are adequate facilities for student support and counselling regarding academic progress readily accessible by all students in forms that reflect their mode of learning and physical access to the campus. | This is a university level issue to be monitored by TEQSA and is therefore not a focus for re-accreditation purposes. |
| 2.4 | Student grievances and complaints | 2.5 | There is demonstrable adherence to institutional processes for recognising and responding to student grievances and complaints and there is proactive and equitable response to students concerns such that, where appropriate they may be resolved at a program or course level. | The focus for re-accreditation is on continuous improvement. How is the information gathered from the investigation of grievances and complaints used to improve the program/unit/subject/course? |
| **3 Teaching** | | | |  |
| 3.1 | Course design | 3.1 | Program information, including individual course descriptions includes content summary, expected learning outcomes (with course outcomes mapped to program outcomes) methods of assessment and compulsory requirements for completion. | Evidence for this criterion is provided by supplying copies of your course/subject/unit outlines. |
| 3.2 |  | 3.2 | The approach to teaching, learning and assessment is clearly enunciated, informed by current educational theory and practice, and evident both in teaching and assessment arrangements and support provision. | Your teaching philosophy should underpin your program delivery and provide a benchmark for review of content and assessment tasks. |
| 3.3 | The teaching program demonstrates current and leading-edge thinking and research in OHS knowledge and practice. | The focus of this criterion is on integrating leading edge thinking and current research in OHS (other than research conducted by your own staff) into your program. |
| 3.4 | Sequence of courses studied and teaching and learning activities are designed to foster cumulative achievement of learning outcomes as the student progresses toward achievement of professional level knowledge and skills in OHS practice. | This criterion has been combined with criterion 1.10 for the purposes of reaccreditation as a single response can address both criteria. |
| 3.5 | There is adequate opportunity and facilities for student: staff and student peer-interaction to enable the development of skills, knowledge and understanding required of an effective entry-level OHS professional, irrespective of the mode of delivery and location of student. | This criterion has been combined with criterion 2.3 for the purposes of reaccreditation as a single response can address both criteria. |
| Staffing | 3.6 | Academic staffing profile provides the underpinning knowledge, level of academic oversight and teaching capacity to lead students in the intellectual enquiry expected of the learning outcomes for the program and for each course. | This criterion has been combined with criteria 3.10 and 3.11 for the purposes of re-accreditation as a single response can address all criteria. |
|  | 3.7 | Staff receive induction and professional development to enable them to be an integral part of the education process | There is an overlap with criterion 3.11 regarding professional development. Evidence of induction can be gained via staff interviews. |
|  | 3.8 | Where sessional staff are employed for a series of lectures or for a unit there is suitable supervision and support to enable them to contribute as an integral part of the educational process. | This criterion is important in ensuring an integrated approach across the program. |
|  | 3.9 | There are arrangements for input to the teaching program by practicing OHS professionals. | Exposure to practicing OHS professionals is essential to ensure programs have relevancy, meet the needs of industry and expose students to a range of expertise outside that provided by the academic teaching staff. |
|  |  | 3.10 | Teaching staff have experience in the OHS field and/or are supported in obtaining/maintaining industry contact and experience. | This criterion has been combined with criteria 3.6 and 3.11 for the purposes of re-accreditation as a single response can address all criteria. |
|  |  | 3.11 | Teaching staff are encouraged and supported in undertaking professional development both in their academic field and in teaching and learning. | This criterion has been combined with criteria 3.6 and 3.10 for the purposes of re-accreditation as a single response can address all criteria. |
|  |  | 3.12 | Support staff in sufficient number and capability to ensure the quality and viability of the program. | This is managed at school/faculty level and addressed in the statement of support from the Head of School under criterion 6.1. |
| 3.3 | Learning resources and education support | 3.13 | Library and other study resources are current, available and suitable for the content, modes of learning and numbers of students. | This criterion is monitored at university level and does not need to be revisited for re-accreditation purposes. |
|  | 3.14 | IT facilities and staff IT skills are suitable for the modes of delivery and learning models. | This criterion is monitored at university level and does not need to be revisited for re-accreditation purposes. |
| **4 Research and research and research training** | | | |  |
| 4.1 | Research | 4.1 | Teaching staff are encouraged and supported in undertaking research and are expected to maintain scholarship in the field. | We are interested in the research being undertaken by your academic staff and how that translates into content for the program. |
| 4.2 | Research training | 4.2 | Teaching program and learning outcomes address research principles and methodology appropriate to OHS in the workplace and the AQF level of the qualification. | OHS professionals need to be critical users of research at a minimum. A solid understanding of research principles and methodologies will underpin this. |
| **5 Institutional quality assurance** | | | | |
| 5.1 | Course approval and accreditation |  |  |  |
| 5.2 | Academic and research integrity | 5.1 | Validity and reliability of assessment modes can be demonstrated. | This criterion is monitored by TEQSA and does not need to be revisited for the purposes of re-accreditation. |
|  | 5.2 | Integrity of assessment can be demonstrated taking account of the mode of delivery of learning and assessment. | This criterion is monitored by TEQSA and does not need to be revisited for the purposes of re-accreditation. |
| 5.3 | Monitoring, review and improvement | 5.3 | Programs are subject to periodic comprehensive review which includes the program overall as well as individual courses. The review addresses learning outcomes, methods of assessment as well staffing. | This criterion has been combined with criteria 5.4, 5.5 and 5.6 as a single response can address all criteria. |
|  |  | 5.4 | Review is informed by developments in OHS and education, identified risks to the program, student achievement data, student and staff feedback, changing needs of students, developments in OHS and in education. | This criterion has been combined with criteria 5.3, 5.5 and 5.6 as a single response can address all criteria. |
| 5.5 | Review process includes input by past and present students. | This criterion has been combined with criteria 5.3, 5.4 and 5.6 as a single response can address all criteria. |
| 5.6 | Regular course review includes evidence of response to student feedback and lecturer reflection on the delivery of the individual courses. | This criterion has been combined with criteria 5.3, 5.4 and 5.5 as a single response can address all criteria. |
| 5.7 | Formal processes and structures are in place (ie: course advisory committee) for regular oversight and input by OHS professionals and industry. Such arrangements should be designed so that the industry and professional advisors have some familiarity with the program and their input is timed to inform university approval processes. | The external advisory function by practicing OHS professionals is seen as vitally important for both insight and validation. |
| 5.4 | Delivery with other parties | 5.8 | Where work placements are part of the program documented policies and procedures ensure student safety, quality of student experience and contribution to student learning outcomes. | This criterion relates to a university level responsibility, and does not need to be revisited for re-accreditation purposes. |
| **6 Governance and accountability** | | | | |
| 6.1 | Corporate governance |  |  |  |
| 6.2 | Corporate monitoring and accountability |  |  |  |
| 6.3 | Academic governance | 6.1 | The program sits within a defined faculty/school and there is a statement of commitment to the program by the head of the faculty/school that includes budgetary and infrastructure provision. | Evidence for this criterion is provided within your application documentation.  Please alert us to any changes to the faculty/school in which the program managed.  A statement of commitment to the program by the head of the faculty/school is required as was the case with your initial application for accreditation. |
|  |  | 6.2 | There is a clearly identified leader of the academic team for the program who has a background in an OHS-related discipline. | Evidence for this criterion is provided as part of your application documentation.  We are interested your program leadership succession planning to maintain viability and continuity. |
| **7 Representation, information and information management** | | | | |
| 7.1 | Representation |  |  |  |
| 7.2 | Information for prospective and current students | 7.1 | Publicly available program information clearly defines the nature and level of the qualification, expectations/requirements of students including indicative workload, the learning outcomes, any content emphasis, any resource requirements including IT/internet access and any requirements for access to a workplace together with all forms of student support arrangements as a basis for informed decision-making pre-enrolment. . | Access to this information is best provided by a link to the relevant pages on your web-site. |
| 7.3 | Information management |  |  |  |

1. See <http://www.ohsbok.org.au/resources/learning-outcomes/> for learning outcomes. [↑](#footnote-ref-1)
2. (See <https://www.legislation.gov.au/Details/F2015L01639/text> for legislative instrument.) [↑](#footnote-ref-2)
3. See conflict of interest [↑](#footnote-ref-3)
4. See <http://www.ohsbok.org.au/resources/learning-outcomes/> for learning outcomes. [↑](#footnote-ref-4)
5. See <https://www.legislation.gov.au/Details/F2015L01639> [↑](#footnote-ref-5)
6. See <http://www.ohseducationaccreditation.org.au> for download the OHS Professional Capability Statements. [↑](#footnote-ref-6)