



Review of implementation of accreditation of OHS professional education in Australia

Final report

June 2015

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S.I.A. Safety Institute
of Australia Ltd



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Review of implementation of accreditation of OHS professional education in Australia

Executive Summary

With accreditation of university-level OHS professional education having been implemented in 2012 the Australian OHS Education Accreditation Board undertook a review of the process in 2014. The review involved interviews of OHS academics and OHS professionals involved in the first seven accreditation assessments and analysis of accreditation reports and associated annual reviews for the 13 accreditation assessments conducted to date. The accreditation process and criteria were also benchmarked to international examples.

In the 3 years that accreditation of OHS professional education has been available 64% of universities offering OHS education have one or more accredited programs with 68% of the available programs accredited. A further 3 accreditations (4 programs) are pending with 2 universities (4 programs) having advised their intention to submit. A further 3 universities are not in a position to submit due to the status of reviews or resourcing issues.

Accreditation outcomes together with comments by interviewees indicates that accreditation is impacting on the quality of OHS professional education in Australia. This impact varies from providing a stimulus for minor review and 'tweaking' to revision of whole courses within programs. Accreditation also created leverage for obtaining resources within the universities and for implementing change. Major areas of change were made to content through mapping to the OHS Body of Knowledge and in tightening assessment processes. For a number of universities, the accreditation process also enabled them to articulate and build on strengths to establish their profile in the Australian OHS education context.

The accreditation process was considered time consuming and resource intensive by most people but this comment should be seen in the context that most universities were simultaneously undertaking reviews to bring programs into line with new AQF and TEQSA requirements and that programs should be undergoing regular review. As the evidence for accreditation is based on current documentation and student learning resources any effort in developing materials for accreditation should have a positive impact on the program.

In comparing the Australian accreditation process and criteria to that of ABET (US) and IOSH considerable similarity was identified in both criteria and process with ABET. The IOSH assessment is based on the input of an academic reader and an external examiner rather than a panel and IOSH relies on another body to assess the level of qualification and education-related aspects of the program. Neither IOSH or ABET define the depth of required knowledge although ABET is currently undertaking a review. As part of benchmarking the criteria, the OHS Body of Knowledge was mapped to the knowledge statements in the INSHPO Global Framework for Practice with the outcome that there is a high level of correlation between the INSHPO knowledge statements and the topics covered by the OHS Body of Knowledge. The identified gaps will inform the development of new chapters for the OHS Body of Knowledge. The Australian OHS capability statements, which are derived from the AQF, were mapped to the INSHPO skills statements which include actions and performance criteria. While there is some high level comparability the differing format makes comparison difficult. As there is a strong AQF basis it is important to retain the Australian capability



statements as part of the criteria. While the INSHPO framework targets currently practicing OHS professionals there is value in making the INSHPO skill framework available to educators to inform their assessment processes.

Accreditation is an important step in giving students confidence in the program and in improving the professionalism of the profession. Interviewees emphasised that it should be objective. Even though each university will maintain a certain style or flavour maintaining this may be difficult in the future and the accreditation criteria and process need to enable each university to create their own niche. The process needs to be equitable and reliable in the sense that it is repeatable.

While the general consensus was that accreditation has had a positive impact on OHS professional education in Australia and that the criteria and process are fair and valid, a number of actions for improvement have been identified. These actions come under 3 headings:

Accreditation criteria

1. Review criteria to eliminate any repetition.
2. Review guideline for criterion related to the OHS Body of Knowledge to clarify requirements while maintaining flexibility.
3. Review the schedule for developing new chapters for the OHS Body of Knowledge giving priority to 'health' related chapters and gaps identified in the mapping of the OHS Body of Knowledge to the INSHPO knowledge statements. (in association with SIA.)

Interviews

4. While interview questions tend to be structured to explore specific queries/issues that have arisen through examination of documents or previous interviews the sample interview questions should be reviewed to better reflect actual questions.

Promotion

5. Promotion strategy linking accreditation and certification targeting potential students, OHS practitioners and professionals and employers to be developed in association with SIA

The Education Advisor to the Accreditation Board provided an independent review of the accreditation criteria and process which is included as an Attachment. The recommendations from this report are listed below and should be read in conjunction with that report.

Accreditation principles

6. The first principle for accreditation should be amended to read: 'The accreditation process acknowledges that 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.'
7. The third principle should be strengthened by adding a second sentence – 'As a corollary, institutions are expected to be open and transparent in providing all appropriate information to the accreditation process on request.'
8. The fourth principle by amending 'aligned with institution quality processes' so it reads 'aligned with institutional and other externally required quality assurance processes.'
9. The sixth principle be omitted.
10. The last three words of principle eight be omitted.

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Eligible programs

11. The wording of the second element of the definition of an OHS professional education program be amended to read 'at least 50% of the credit points' rather than '50% of the credit points'.
12. The OHS Education Accreditation Board should establish a small working group to bring forward a paper for consideration on a shared understanding of 'assessment performance to agreed standards'.

Accreditation criteria

13. The Board maintain the present link between OHS accreditation and TEQSA accreditation standards.
14. The Board significantly strengthen the requirement for genuine involvement of the OHS profession in program development.
15. The Registrar establish a small group to redevelop the performance measure for Criterion 1.7.
16. The performance measure of Criterion 1.8 be expanded to include the research base of teaching practice.
17. The performance measure for Criterion 5.6 should be amended to read: Assessment together with timely and comprehensive feedback to students on their performance is demonstrably an integral part of the learning process.
18. The performance measure for Criterion 6.3 be amended to read: OHS Programs should have a consultative committee with a majority of industry-based professionals, who see documentation relating to review and program development at such time as allows them to have input to proposals before they go to school or university approval committees or other decision-making bodies.

Acknowledgement

The qualitative component of this review was conducted by Eamon Brown as part of his Master of Public Health in the unit titled *PUBH5101 Special Project*. Eamon conducted semi-structured interviews and analysed the outcomes of the recorded interviews to provide a report on the response to accreditation by the universities and the academic and OHS professional members of the accreditation assessment panels. Eamon's contribution has been essential to the integrity of the review process by bringing an independent perspective to the data collection and analysis.



1 Background

Australian universities are self-accrediting bodies and provide programs that have been developed and approved through their own internal quality processes. Most professional education programs are also subject to accreditation conducted by the relevant professional body. This is linked to recognition of the graduates by the professional body and may be a requirement for professional practice.

The Australian OHS Education Accreditation Board was convened in 2011 under the auspices of the Safety Institute of Australia. The first OHS qualification was accredited in 2012. A review of the accreditation process was an action item at the June 2014 Board meeting with the draft process further discussed at the October Board 2014 meeting. This report reviews the process and presents a summary of the findings.

2 Process and methodology

The review process was overseen by a temporary Board sub-committee comprising Bruce King (Education advisor to the Board), Tim Driscoll (UniSyd), Margaret Cook (UQ) and Pam Pryor (Registrar). The role of the sub-committee was to:

- Approve methodology including final version of questionnaires
- Review feedback obtained through the process
- Identify actions required as an outcome
- Report to the Board.

2.1 Research questions

The objective of accreditation of university level OHS professional education is to ensure that it adequately prepares graduates to enter the workforce as effective entry level OHS professionals having the capability to impact positively on workplace health and safety in Australia. However at this stage of implementation of accreditation it is not possible to evaluate the graduate output or impact on OHS in Australia.

The three key research questions for this study were:

- What has been the impact of the OHS Accreditation process on programs offered by Australian universities?
- What has been the experience and response by universities to the OHS accreditation process?
- What, if any, changes should be made to the criteria, process or other features as the accreditation process matures?



2.2 Sources of information

There were four sources of information

- Semi structured interviews which were recorded and analysed
 - Program leaders from 7 accreditation assessments (7 out of 7 eligible)
 - OHS professional and OHS academics on 7 accreditation assessment panels (7 out of a potential 8 OHS academics and 5 of a potential 7 OHS professionals were interviewed)
- Review of accreditation reports and annual reports for a total of 13 accreditation assessments.¹
- Comparison with the INSHPO Global Framework for OHS Practice
- A report completed by the Education Advisor to the Board included as Appendix 1.

A detailed report on the qualitative aspects of the review is being prepared as a separate paper. The review of accreditation reports and annual reports has resulted in a peer reviewed paper: *Accredited OHS Professional education: A step change for OHS capability* (Safety Science, in press, 2015)

2.3 Process

Interviews were conducted by Eamon Brown (an MPH student at University of Sydney as part of an assessable special project unit) supervised by Tim Driscoll. This qualitative component of the review was covered by ethics approval from the University of Sydney Human Research Ethics Committee. The accreditation reports and annual review reports were analysed by the Registrar, Pam Pryor. A separate commentary is provided by the Board Education, Advisor Bruce King.

3 Outcomes

As at December 2014, thirteen accreditation assessments have resulted in 9 universities having a total of 15 programs accredited. From two assessments (4 qualifications) accreditation is pending further action by the universities and one qualification is currently being assessed. One university has indicated their intention to submit in May 2015 with another university indicating they will submit three qualifications for assessment in mid-2015. A further 2 universities are not in a position to apply for accreditation due to the status of current program reviews.

Table 1 shows the current status of universities with accredited qualifications. In 2014 there were approximately 650 students participating in accredited programs.²

¹ The pool of assessments from which the data is drawn totalled 7 for the interviews while the review of assessment reports and annual returns was updated to include later assessments with the pool totalling 13.

² Accurate student numbers are difficult to obtain.



Table 1: Impact of accreditation of OHS professional education – Universities and qualifications

	Assessed in 2012	Assessed in 2013	Assessed in 2014	Total as at Dec 2014
No. of assessments undertaken	2	5	6	13
Universities with accredited qualifications (max 14)	2	5	2	9 (64% of possible universities)
No. of qualifications represented in assessments undertaken	3	8	8	19
Qualifications accredited (max 28)	3	8	4	15 (68% of possible qualifications)

3.1 Impact of the OHS Accreditation process

3.1.1 Analysis of reports

Information to date indicates that the accreditation process is impacting on both the content and educational quality of OHS qualifications. In 6 of the 13 assessments, the Board withheld accreditation pending further information/action. This was recognised by the institutions as creating an urgent need for change and an indication that their internal quality assurances processes should take account of the Board’s determination. (Table 2).

Table 2: Accreditation decisions

Decision at first assessment	No of applications n=13
Accreditation awarded	7
Accreditation pending further information/action	2
Accreditation not awarded at this time (action required)	4
Accreditation refused	0

Areas for improvement were identified for all universities with their ongoing accreditation conditional on satisfactory action as noted in their self-reported annual review.³ Appendix 2 indicates the number of accreditation assessments where improvement was required for specific criteria together with the outcome of the action to date. Of a total of 129 actions required, 62 are not yet due for reporting. Of the 67 actions that have been reported on 19 (28%) are in progress, 28 (42%) are for monitoring and 20 (30%) have been signed off.

3.1.2 Interview responses

The interviews were based on the first 7 assessments carried out from 2012 to the end of the 2013.

³ The Accreditation Board reserves the right to visit any university during the accreditation period.



There appeared to be a general consensus that accredited programs had a clear advantage over non-accredited programs. While there were some comments that perhaps it was too early to assess the impact of accreditation and that accreditation may not result in major changes or identify strengths/weaknesses that were not already known, accreditation did provide a prompt to consider weaknesses more actively and a mechanism to better argue within the university for resources to meet accreditation/improvement.

Most respondents reported that the process was a good way of improving the quality of education offered through their courses and this will lead to their graduates' success in their career. The comments below provide further insight into the actual impact of accreditation.

From your experience completing the accreditation process, has your course changed in any way?

- We can say confidently say that our graduates meet the [knowledge] requirements for certification and students find that reassuring.
- The accreditation process occurred at the same time as the Australian Qualification Framework (AQF) review, it assisted with the AQF review.
- Yes, changes were made to the structure to ensure better mapping to the Body of Knowledge.
- It provided an opportunity for e-Materials (i.e. Blackboard materials) to be updated
- Not specifically to meet the requirements of accreditation, more so to meet the requirements of the AQF. Largely the accreditation process was integrated with the AQF [review process].
- Power was given by the accreditation process to make changes, or even make the time to make changes or resolve issues that some of the courses were already identified as having.

Graduate attributes

- The graduate attributes generally did not change, as they are tied to the level of the course that the student is completing.
- Graduate attributes may have been added to convert a course to correspond more directly to the AQF requirements.
- Accreditation did not really address this in their process, but is more of an AQF related topic. Although, the Body of Knowledge did aid in the fine-tuning of the graduate attributes.

Student learning experience

- The accreditation process does not directly impact on the students learning experience. That is a teacher to student relationship, however, because of mapping to the Body of Knowledge it can be reassured that the student is learning the correct information.
- Yes, because we are making things up to date and our learning materials are being scrutinised.
- The accreditation process structures the course, it structures the whole program. Yes, it had an effect in the sense that it tightened up the assessment processes.

Changes to the program

- It did make us articulate what we saw as the point of difference or strength and who we were targeting to join the program.
- The accreditation process gave us an extra drive to make particular changes to the program.
- The initial mapping process that we did with the Body of knowledge, it allowed us to review the courses and ensure that we were not doing the same thing in multiple places.
- It allowed us to review and see what needed to be covered and what we should be covering, and enabled us to implement that into our courses. The mapping exercise was very valuable.
- Yes it did, the main technical issues, where some of the content was beefed up. There was some issues with identifying our particular strength but now we can articulate what our strength is.
- We reviewed the course material in the context of the OHS Body of Knowledge.
- Certainly on the assessment side. We moved away from exams to more assessment-based.
- There was a review of a whole subject and accreditation allowed us to do that.
- It allowed us to look at improving areas where we were weaker in and allowed us to consider what we haven't included and where we would include them looking at the Body of Knowledge.



- We added more to comply with research skills and requirements.
- It did help us to focus on what we are looking like in the market, in terms of weaknesses, we didn't focus much on that because we don't believe there are any really. One of the things though we need to do more of is research.

3.2 Accreditation Criteria

Accreditation criteria are outcomes-based with universities required to demonstrate how their arrangements meet the criteria. Explanations of the criteria and examples are given in the evidence guide.

3.2.1 Analysis of reports

While all criteria are considered essential, criteria relating to: structure and learning activities adequately reflecting the qualification level (criterion 1.4); content reflecting the OHS Body of Knowledge (criterion 1.5); and assessment processes (criteria 5.1-5.6) are considered especially important. Items were considered 'critical' where the current status of the criterion would significantly impact on the acquired knowledge and skills of the graduate or the learning experience of the student. Table 3 lists the criteria considered critical in one or more assessments and the deficiencies which had to be addressed before accreditation was awarded.

Table 3: Deficiencies noted for critical criteria

Criteria		Common deficiency
1.4	Structure & learning activities appropriate to level of award (AQF)	<ul style="list-style-type: none"> • Depth of content and activities not at appropriate cognitive level (particularly for masters programs)
1.5	Content addresses OHS Body of Knowledge concepts	<ul style="list-style-type: none"> • Limited scope of hazards addressed • Inadequate attention to control (emphasis on hazard/risk assessment)
4.4	Sessional staff an integral part of the assessment process	<ul style="list-style-type: none"> • Contractual arrangements and staff engagement do not induct and include sessional staff into the educational or university culture, technology or processes
4.9	Student: staff and student-peer interaction enables development of skills, knowledge and understanding of an entry-level OHSP	<ul style="list-style-type: none"> • Limited use of student engagement tools in learning management system results in off-campus students having less opportunity for student and staff engagement or makes it difficult to assess the level of student engagement as records not available
4.10	Remote/distance delivery supports interaction equivalent to that expected for on-campus modes of delivery	

Other criteria that registered need for improvement in at least 6 of the 13 assessments (46%) occurred in program description (1.1) where there were gaps in the information available to students and course resourcing and teaching with the currency of learning materials (2.2). While some universities manage the assessment processes well, treating assessment as an integral part of learning as well as evaluating achievement, others did not provide adequate information on expectations or a consistent approach (5.2). One criterion (1.7) required the university to enunciate



the educational perspective and theoretical underpinning of the educational approach. This was poorly understood and inadequately addressed across the board. Action was required in some cases to: ensure adequate integration with OHS practice (1.6, 4.5); content and approach that reflected current research and leading-edge thinking (1.8); and the number of academic staff and range of skills appropriate to ensure viability of the program (2.5).

Table 4: Common deficiencies noted for criteria most frequently requiring action

Criteria		Common deficiency
1.1	Program information	<ul style="list-style-type: none"> Pre-enrollment information does not clearly describe the course structure, expected time commitment including that on-campus, technology or workplace requirements
1.7	Theoretical underpinning enunciated	<ul style="list-style-type: none"> Few universities are able to enunciate the underpinning educational philosophy and the students' 'learning journey'
2.2	Learning resources current, available and suitable	<ul style="list-style-type: none"> Online learning management system used as a repository for content with little use of student engagement features
5.1-5.2	Assessment is effective and expected student outcomes achieved	<ul style="list-style-type: none"> Assessment not adequately addressing key knowledge and skills Inadequate/inconsistent information provided to students on assessment requirements. Limited use of software for plagiarism checking Delay in feedback to students inhibiting formative value of assessment
6.2	Review process includes past and present students	<ul style="list-style-type: none"> While most programs have arrangements for industry input review processes do not always involve students. This is seen to be difficult in off-campus modes.

3.2.2 Interviews

The general consensus was that the criteria were appropriate, fair and valid. There was some comment that there was an overlap with AQF /TEQSA and internal university requirements but this was also a strength of the process with some course representatives noting that having completed accreditation they were exempt from internal university audit processes. There were also comments that there was some repetition in the criteria but on further analysis it appeared that the comments related to the repeated use of a particular document to address different criteria. One comment referred to criteria that were outside the control of the course coordinators as they related to university mechanisms and policy and queried whether these should be part of the criteria.

The content criteria for accreditation require mapping to the learning outcomes for the Core Body of Knowledge for Generalist OHS Professionals. The guidance note in the Information Pack states that:

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

General comment on the impact of the OHS Body of Knowledge on accreditation was that the accreditation process had highlighted what both universities and students need to focus on, which is content covered in the Body of Knowledge. The Body of Knowledge has highlighted the vastness of the information that needs to be covered and has enhanced what the students are actually learning. The value for students is in the mapping of content. Accreditation requires universities to map the



content of the courses in the program, and the result is that the Body of Knowledge is built in across programs as well as within courses.

Feedback was that while programs had become more aligned with the OHS Body of Knowledge institutions still had the flexibility to maintain their specialities. A negative dimension of such flexibility is that there was some uncertainty as to what is core content and what is not, and what level of understanding is required of graduates.

Concern was expressed as to the 'safety' bias of the OHS Body of Knowledge at the expense of 'health' related topics. This imbalance has been recognised and has been considered in the schedule for development of future chapters of the OHS Body of Knowledge.

3.3 Process

Accreditation is seen as making the OHS industry more professional as a whole. Most respondents reported that the process was a good way of improving the quality of education offered through their programs that will lead to their graduate' success in their career and that the accreditation process has encouraged people who may be already in the industry without qualifications to take on study.

The accreditation process is based on a desk audit of documents, review of on-line learning materials and discussion platforms, and telephone interviews of students, staff and Head of School. A few comments noted that, while students were interviewed this process did not effectively address face-to-face teaching components which might disadvantage some programs.

The process was seen as resource intensive and time consuming with the universities undertaking activities such as workshops to map content and review assessment criteria. Other activities seen to require time involved becoming familiar with and accessing detail of university policies.

Some example comments are given below.

- What was very good was we didn't have to provide paper copies of things, and things could be packaged up electronically. Particularly when you run an online program.
- The good thing about the process is that we went through the interviews and we got verbal feedback.
- How easy? – I think that with any accreditation process, it is just something that we have to do.
- It ran rather smoothly and there were no hiccoughs. But only slight ambiguities that we sorted out.
- We would like to see it less bureaucratic and less prescriptive.

One negative comment referred to the perception that one or more of the panel members had not made themselves suitably familiar with the program documents and online materials. This was a justified comment in one case and action has been taken to facilitate appropriate preparation by all panel members. It should also be noted that the framing of interview questions to validate documentation may lead to a perception that the panel members have not reviewed the documents.

A few responses relating to interview questions around resourcing and staffing levels and work hours suggested that this was a matter for the Head of School and not for teaching staff or program leaders. However the resource-related interview questions are seen as critical for the viability of the



program and it is important to obtain different perspectives on the issue. One related comment of concern is the perception that an interview question intruded on the respondent’s privacy in relation to the reasons for working part-time. Notes retained from the interviews do not refer to any such questions; there is no reason why such a question would be asked and care will be taken in the future to ensure any related questions are framed appropriately.

Some university representatives expressed concern that other, possibly competing academics were members of assessment panels. Peer academic representation on accreditation panels is a common feature of all professional accreditation processes. The OHS accreditation processes tends to have a lower representation of peer academics than some other professional accreditation processes, panel members are selected to minimise potential conflict of interest and all panel members sign a *No-conflict of interest statement* and are briefed on the confidentiality requirements for each assessment.

4 Benchmarking of Australian accreditation to international examples

4.1 Comparable accreditation bodies

Internationally, the countries with comparable OHS education accreditation processes are the US (ABET) and the UK (IOSH). Comparison of the education accreditation processes for the three organisations (AOHSEAB, ABET, IOSH) identified that while there is a different approach to terminology there is considerable similarity in processes between the USA (ABET) and Australia (AOHSEAB). The IOSH process has some similarities with that of Australia and the USA with the major differences being in the reliance on another organisation for establishment and assessment of education criteria, the number/range of people involved in the assessment, and with IOSH requiring the ongoing involvement of an external examiner. The IOSH range of eligible qualifications and broad international application also introduces some differences.

Table 5 summarises the similarities and differences between the Australian accreditation processes and structures and that for ABET and IOSH.

Table 5: Comparison of Australian OHS accreditation with that of ABET and IOSH

	Similarities	Differences
Accrediting organisation	Not-for-profit Related to professional body Influenced by government level standards/organisations (AOHSEAB, IOSH)	Recognised through accrediting body (ABET)
Eligible programs	Higher Education (Bachelor/Masters) English	
Country of operation	Mainly one country or region (AOHSEAB, ABET)	Across a number of countries IOSH)
Outcome	No ranking	
Process	Considerable similarity in initial process (AOHSEAB, US); less similarity IOSH)	Approval process for final report (minor difference) (AOHSEAB, ABET)

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	Assessment by a panel (AOHSEAB, US) On-site visit (US) (IOSH?) Inclusion of on line learning management system as part of evidence (AOHSEAB, IOSH)) Annual review requirement (AOHSEAB, IOSH)	Reliance on one person for assessment (academic reader) (IOSH) Ongoing involvement of external examiner (IOSH)
Education criteria	Considerable similarity (AOHSEAB, ABET); different style or wording, AOHSEAB more specific on some criteria, ABET more specific on others	Reliance on criteria and assessment by another body. (IOSH)
Knowledge criteria (mapped to INSHPO)	Strong correlation with some gaps with OHSBoK (AOHSEAB) Strong correlation with some gaps with learning outcomes (IOSH) but no benchmark reference for nature/depth of knowledge.	ABET correlation difficult to map as knowledge is inferred from learning outcomes with few specific knowledge statements. ⁴
Skill criteria (mapped to INSHPO)	Correlation with some major gaps (AOHSEAB)	ABET learning outcomes describe some skills at a high level. IOSH level descriptors give some indication of skills at a high level.

4.2 INSHPO Global Framework for OHS Practice

The Global Framework for OHS Practice developed by the International Network of Safety and Health Practitioner Organizations (INSHPO) includes role/activity statements and specifies required knowledge and skills. As part of benchmarking the criteria for accreditation the OHS Body of Knowledge was mapped to the INSHPO knowledge statements and, to the extent it was possible, the INSHPO skill statements were mapped to the capability statements derived from the AQF.

There was a high level of similarity in the INSHPO knowledge topics and the OHS Body of Knowledge conceptual chapters. The INSHPO knowledge statements not covered by the OHS Body of Knowledge are listed in Table 6. Inclusion of a knowledge topic in this table does imply that it is agreed that it should be a topic for the OHS Body of Knowledge but that it should be considered when developing the schedule for development or when related chapters are being drafted.

Table 6: Knowledge topics included in INSHPO knowledge statement but absent from the OHS Body of Knowledge

Theoretical	Health- related	Ergonomics	Professional practice
Theories of safety management (high reliability, error and performance variation, resilience engineering)	Mental illness in the work place Health protection and promotion Fitness for work Healthy work	Process and equipment instrumentation and control Human factors and ergonomics (including anthropometry, cognitive ergonomics) Workplace layout Impact of technology	Leadership Communication and consultation Change management Ethics and professional practice Understanding and resolving conflict Project management

⁴ ABET currently undergoing a review.



			Strategic and operational planning
Hazard and risk management	Control	Performance monitoring	Information
Hazard analysis methods (eg: JSA, FMEA, HAZOP, Fault tree, bow tie) Use and interpretation of hazard monitoring equipment Inspections, maintenance and testing Documentation, rules and procedures Outsourcing/contractor management Competent workers – recruitment and selection	Barrier maintenance requirements Establishing and managing a PPE program Investigation methods	Auditing Key performance indicators Benchmarking Basic methodologies of quantitative and qualitative evaluation	Basics of contract law ILO, ISO and other international standards OHS information management

The INSHPO skill statements are derived in a different way and are not based on a qualification framework as are the Australian capability statements. The INSHPO skills statements may be useful as an associated reference. They include actions and performance criteria which can indicate the desired/actual level of achievement for individuals and so can give guidance to educators, students, new graduates, professionals and managers as the expected standards.

Table 7: Mapping of INSHPO skills to category of Australian capability

INSHPO skill	Category in Australian capability statement
B1.1 Knowledge management B1.2 Critical thinking	Analyse and evaluate information
B1.2 Problem solving and critical thinking B1.3 Evidenced based practice d	Solve problems
A1 Verbal communication A2 Professional presentation skills B1.3 Evidenced-based practice	Communications skills to transmit knowledge, skills and ideas
B2.1 Mentoring (part) B2.2 Engaging B3.1 Teamwork B3.3 Leadership (very little) B4.1 Project management B5.1 Professional practice B5.2 Ethical practice	Application

5 Recommendations for change

Recommendations derived from analysis of reports and interviews as well as suggestions for improvement made in the interviews are listed below.

Criteria
Review criteria to eliminate any repetition.
Review guideline for criterion related to the OHS Body of Knowledge to clarify requirements while maintaining flexibility.
Review the schedule for developing new chapters for the OHS Body of Knowledge giving priority to ‘health’ related chapters and gaps identified in the mapping of the OHS Body of Knowledge to the INSHPO knowledge statements. (In association with SIA.)



Interviews
<p><i>"The sample questions, there was no accreditation question that was like the sample questions that we received. I can understand why that was the case, but if you are going to have sample questions, make them more realistic or don't have them."</i></p> <p>While interview questions tend to be structured to explore specific queries/issues that have arisen through examination of documents or previous interviews the sample interview questions should be reviewed to better reflect actual questions. However, panel members should not be constrained from following up issues revealed in interviews with other stakeholders simply because they were not flagged in the sample questions.</p>
Promotion
<p><i>"I think there needs to be a bit more marketing to the OHS Profession as a whole as to what are the benefits to the OHS professionals and the students as OHS professionals are not registered. It is a developmental process though, but it would be good for employers to have an understanding of the accreditation. It's around marketing it."</i></p> <p>Promotion strategy to be developed in association with SIA.</p>

Some further suggestions for change made by universities included a request for universities that could not provide the administration support for accreditation to be treated differently or able to negotiate with the Board. While the Board works with universities to support the process and to bring an element of flexibility to the accreditation process the outcome should be that students and employers have confidence in the student learning experience and graduate outcomes. Commitment by the university to the program and appropriate resources are an important part of this.

Staff and students are currently selected by the Registrar for interview from names provided by the university as people who have agreed to be interviewed. One university requested a schedule of names and times for interview so they could coordinate the interviews. While it is recognised that there will often be pre-discussion and briefing prior to the interviews the approach of the Board is that interviewees should feel free to make objective comments about the program. Thus the Board manages the interview schedule and also requires that interviews are conducted privately with individuals.

6 Comment by Board Education Advisor

A separate report has been provided by the Education Advisor for the Board. (See Appendix 1.) The overall judgment there is that the accreditation process has worked as well as might have been expected. It will be appropriate for the Board to consider whether requirements of institutions should become more stringent in future. This judgment is informed by participation in all accreditations undertaken to date and reflection on the information provided to assist in the process.

The most noticeable constraint on the process is the Board's access to available resources which to some extent has been minimised by the personal commitment of the Registrar. The implications of current resourcing are reflected in the inability to mount regular site visits and, to interrogate staff and student within a reasonable time frame. In the medium term, there may be little option other than to maintain present arrangements.

A constraint on judging the success of the accreditation process is its newness. Until programs are considered a second time, it is not possible to make data-based judgments about the impact of the process helping institutions make the best of their case for accreditation.



The documentation the Board has developed in partnership with industry professionals and academics has been a critical source of guidance and support to institutions. The view here is that most of that material should stand, although there are some suggestions for specific but relatively minor changes with the detail discussed in the report (Appendix 1). That report suggests nothing that conflicts with this document, although two matters are included below to emphasise their importance.

First, the accreditation process relies on institutions having their own quality assurance processes. How well these operate varies between institutions. It is suggested that the Board should require specific evidence of the operation of these in relation to the OHS program seeking accreditation.

Second, the Board should significantly strengthen the requirement for genuine involvement of the OHS profession in program development, both reflecting its own practice in developing support materials and the importance of programs in the preparation of graduates for professional practice. The requirements should include institutions ensuring time for consideration of proposals for advisory groups whose membership is weighted to practising professionals before proposals go to University decision-taking bodies.

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Appendix 1: Report on the accreditation process to the Australian OHS Education Accreditation Board

Emeritus Professor Bruce King

Introduction

This report represents an individual assessment of the OHS Education Accreditation process by the Education Advisor to the Board. It is informed particularly by two elements: (1) reflection on the Information Pack provided to institutions seeking accreditation, and (2) participation as an observer in all institutional accreditations to date.

The general position taken here is that the accreditation process has worked reasonably well to the present point, but that it is appropriate to consider it becoming more stringent in future. This presents difficulties for the Board in that more rigorous scrutiny and interrogation of applications will have resource implications that may be difficult to contemplate.

Various aspects of the accreditation process are considered below. Recommendations from the body of the document are separately listed in the conclusion.

The role of the OHS Education Accreditation Board

The Board has overseen all stages of the accreditation process to date, including (1) a trial period with Victorian universities, (2) the development of resource materials (e.g. the Information Pack and its appendices) to support institutions through the preparation of applications and site visits, (3) linking accreditation to other pressures for accountability in higher education, including requirements of both the Australian Qualifications Framework and the Tertiary Education Quality and Standards Agency, (4) building understanding of what is involved in accreditation through workshops that have both developed stakeholders perspectives and helped build and refine support materials, (5) resourcing and managing the accreditation process, (6) adjudication of reports provided by accreditation panels, (7) promulgation of the results of applications, and (8) feedback to institutions on areas requiring improvement and the maintenance of a data base to ensure annual reporting on implemented changes. The Board can legitimately claim significant success in these matters to date.

The success thus far has been in part due to the various sources of expertise Board members bring to the table, the mechanisms for dealing with any perceptions of conflict of interest (either on the Board or in accreditation panels), and the capacity of the Registrar to manage processes within available resources. The latter, including the workload carried by the Registrar, has been critical.

Constraints on the accreditation process

Despite the success of the Board in implementing an accreditation model within a new professional area, it has to be acknowledged that the approach adopted has been restricted to that possible within the resources available, including the time of the Registrar. There has been some success in building a resource base through sponsorship, but the present model is necessarily less comprehensive than in some other professional areas. Typically, these have longevity, a larger student population, and a tradition of scrutiny against national standards on their side. Generally,

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they are able to levy much higher fees for assessing applications – and make greater demands on the resources of applicant institutions – than the Board has been able to do.

The most obvious limitation of the present approach is the duration of site visits and the capacity to interrogate staff and students within the available time frame. Interviews have been conducted by teleconference which is, simply, better than having no access at all but it is hardly ideal. Site visits are expensive, involving travel and accommodation costs, plus demands on the unremunerated time of panel members. In the medium term, there may be little option other than to maintain present practice. The constrained time, both with students and to interrogate in some detail a range of institutional staff is, however, a major limitation on the process.

Further, the Board has been heavily dependent upon the willingness of teaching teams, and sometimes individual staff members, to develop applications and provide necessary information in advance to the visiting panels. The Registrar has had to manage relations with institutional representatives with this dependency in mind.

A further constraint arises from the newness of things. It is not possible to make judgements about any improvement in student performance – and consequently the enhanced value of accreditation to the profession – until the second round of accreditations.

Documentation provided to institutions seeking accreditation

The OHS Education Accreditation Board has developed, in consultation with industry professionals and OHS educators through both a trial program and related workshops, comprehensive information to guide institutions through the accreditation process. Ultimately, the usefulness of these resources must be determined by institutional representatives and accreditation panels in relation to their separate purposes. The present paper considers only some elements of the documentation, specifically (1) the principles underlying the accreditation process, (2) the criteria for accreditation, (3) the accreditation process, and (4) the evidence guide.

1. Principles underpinning the accreditation process

The first principle acknowledges that ‘the academic quality and standards of programs for education of professionals are primarily secured by the internal quality assurance processes of the institutions. Thus the accreditation process does not prescribe detailed program objectives or content but requires providers to have in place their own mechanisms for validating outcomes and continually improving quality.’

This principle needs to be strengthened and made more direct. Experience of OHS accreditations thus far indicates that institutional processes operate with varying degrees of stringency. Answers should be sought to questions about the extent and operation of the internal processes, what issues were raised about the program in question, how they were addressed, the extent to which data collections inform program development, and what evidence exists for program improvement over time.

Recommendation 1. The first principle should be amended to read: ‘The accreditation process acknowledges that 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.’



The second principle recognises the value of different approaches to OHS professional education and indicates that ‘criteria for accreditation are outcome-based allowing institutions the maximum flexibility’ in the methods they adopt to achieve required standards. This should stand.

The third principle emphasises the constructive element of accreditation and its embodied respect for the expertise and academic autonomy of providers. This should stand, but with the caveat that institutions should be transparent and comprehensive in providing all appropriate information to the accreditation panel. This should be underscored by an addition to the principle.

Recommendation 2. The third principle should be strengthened by adding a second sentence – ‘As a corollary, institutions are expected to be open and transparent in providing all appropriate information to the accreditation process on request.’

The fourth principle aligns the accreditation process to the internal quality assurance procedures of the institution in the interests of minimising complexity (and workload) in the application process. Given the changing nature of the higher education environment, this could be strengthened by a simple amendment.

Recommendation 3. The fourth principle by amending ‘aligned with institution quality processes’ so it reads ‘aligned with institutional and other externally required quality assurance processes.’

The fifth principle relates to the openness of the accreditation process to external scrutiny, its collegiality, transparency and fairness, and the attempt to balance academic and wider professional priorities. It should stand.

The sixth principle refers to the reliance during accreditation on self-and peer-assessment ‘for the purpose of publicly and openly assuring adequate standards ... and constant improvement in quality’. This seems to replicate considerations embodied in the other principles. It appears to add little.

Recommendation 4. The sixth principle be omitted.

The seventh principle establishes that accreditation relates to whole programs, rather than individual courses or part programs. It should stand.

The eighth principle acknowledges that successful completion of an accredited program ‘provides satisfactory evidence of having completed the knowledge requirements for entry-level OHS professional certification as a minimum.’ The last three words seem redundant in the context of the rest of the wording of the principle.

Recommendation 5. The last three words of principle eight be omitted.

2. Criteria for accreditation

The document defines the four elements of a professional education program at paragraph 5.1 of the Information Pack as

1. An accredited sequence of study provided at the AQF Level 7 or above (excluding graduate certificate)
2. OHS as defined in the OHS Body of Knowledge constitutes more than 50% of the credit points and a minimum of one year equivalent fulltime study

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3. Objectives and learning experiences in the program are directed to the achievement of agreed student learning outcomes derived from the OHS Body of Knowledge and demonstrated through assessment performance to agreed standards
4. A process for ongoing consultation with industry-based personnel.

These criteria are important and should stand, although with perhaps minor amendments. For example, in the second criterion, panels have tended to interpret ‘more than 50% of the credit points’ as ‘at least 50% of the credit points’ and this is perhaps a pragmatic change that would not threaten commitment to the OHS component.

Recommendation 6. The wording of the second element of the definition of an OHS professional education program be amended to read ‘at least 50% of the credit points’ rather than ‘50% of the credit points’.

The third criterion refers to ‘assessment performance to agreed standards’. The expression ‘agreed standards’ here is problematic in that the parties to any such agreement are not specified (e.g. individual academics and their students, groups of academics within a program teaching team, the program team and – through its expectations – TEQSA, the program team and practising OHS professionals). Appendix A1: Criteria for accreditation of university level OHS professional education programs, repeats this ambiguous usage. Certainly, during accreditation visits, panel members have sought evidence that assessment activity conforms to a published schedule of expected outcomes and levels of performance, but equally there has been concern that assessment activity reflects TEQSA statements of student capability for the kind of program in question. It was anticipated that after the establishment of TEQSA, disciplinary panels would establish sets of standards for like programs across the nation, but this appears not to have happened. Accordingly, the Board may wish to give consideration to what it considers constitutes ‘assessment performance to agreed standards’.

Recommendation 7. The OHS Education Accreditation Board should establish a small working group to bring forward a paper for consideration on a shared understanding of ‘assessment performance to agreed standards’.

The Information Pack ties accreditation standards to the TEQSA Course Accreditation Standards and in Appendix A1 provides considerable assistance to program teams in elaborating the TEQSA components and indicating likely acceptable evidence of compliance with them. The appendix also stipulates that compliance is mandatory. A later appendix (Appendix A3: Evidence guide to accompany criteria for accreditation of university level OHS professional education programs) provides detailed elaborations of the various criteria and indicates what would constitute possible evidence of compliance. This document was developed in consultation with providers during the trial of accreditation processes and affords a major resource for applying institutions.

Aspects of TEQSA’s role are currently under consideration by the Minister and his Department, and while there are indications that its future per se is not in question, some structural change is inevitable. Present considerations will build upon an earlier review of the Agency by Professor Kwong Lee Dow. The Accreditation Board has relied heavily on the TEQSA course accreditation standards and, of course, they are not open to the Board to vary. It would seem unlikely that they will change in the near future and present proposed legislative amendments do not suggest this.



The Board's link to TEQSA accreditation standards was considered and deliberate, both to link OHS developments to the national context and also to limit the workload imposed on institutions and program teams. This position should be maintained.

Recommendation 8. The Board maintain the present link between OHS accreditation and TEQSA accreditation standards.

The fourth criterion refers to consultation with industry reflecting both the Board's concerns about expectations of the profession regarding the capabilities of new graduates and government commitments to an educated workforce. This criterion needs to be strengthened. While there have been good examples of academic/industry cooperation around program development, there have also been instances where consultative groups have had over-representation of academics, or have not been significantly involved in discussions about expectations of students or the shaping of program components. There should be evidence that such consultative groups are established, meet regularly, have timely input to decisions about program development, and have membership giving greater weight to OHS professional practitioners than members of academic staff.

Recommendation 9. The Board significantly strengthen the requirement for genuine involvement of the OHS profession in program development.

3. Accreditation criteria and performance measures

The major component of Appendix 1A, was extensively worked through at Board meetings and with staff responsible for programs during the trial period. Generally, with the experience of several accreditations to test its elements, the document stands up very well. Most criteria should stand. The discussion here will be directed only to those areas where change might be considered.

Criterion 1.7 - Theoretical underpinning.

The performance measure reads: 'The approach to teaching and learning and assessment is clearly enunciated and evident both in teaching arrangements and support provision.' This criterion has proved to be quite problematic for program teams and panels have had to exercise considerable latitude in deeming the criterion met. To be blunt, some program teams have either no idea of what educational philosophy underpins their practice or simply assume that a simple content transmission model of teaching is the only option available to them. The Evidence Guide (Appendix A3) attempts to develop a more sophisticated understanding of what is being sought in this criterion but has had limited impact. Ironically, because institutions have generally rolled out quite sophisticated e-learning platforms across all programs, these have sometimes begun to break down exclusively transmission models of teaching, through the provision of discussion boards, tools for small-group discussion, student self-assessment, etc., but there is not often recognition that these are elements of different philosophies of teaching and learning. If this criterion is to remain – and it should – it needs to be elaborated and made more comprehensible. The Education Advisor, Registrar and a teaching academic might work together to achieve this.

Recommendation 10. The Registrar establish a small group to redevelop the performance measure for Criterion 1.7.

Criterion 1.8 – Theoretical underpinning.

The performance measure reads: 'The teaching program is informed by current research.' This has generally been interpreted by panels – reinforced by the Evidenced Guide – as relating to the scholarship underpinning content. However, there is now a considerable literature on research-

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based teaching methodologies and it may be time to expand this criterion to include the research base of teaching practice. This is taken up below in relation to the Evidence Guide.

Recommendation 11. The performance measure of Criterion 1.8 be expanded to include the research base of teaching practice.

Criterion 2.5 – Academic Staff.

The performance measure reads: Academic staff in sufficient number and capability to ensure the quality and viability of the program. Fulfilling this criterion is bedevilled by the current size of a number of OHS programs and the difficulty, both for resource reasons and the availability of suitable candidates – of maintaining an appropriate level of staffing. Panels have been sensitive to the difficulties confronted by program leaders and heads of school in this regard and this should continue to be the case. However, there remains the base question of whether staffing in a given program is adequate to it being delivered at an appropriate standard. The criterion should stand.

Criterion 4.4 – Academic staff.

The performance measure reads: Where sessional staff are employed for a series of lectures or for a unit there is evidence of them being supported to contribute as an integral part of the educational process. The comments in the paragraph above apply here. Underpinning the performance measure here is the belief that quality programs are a team responsibility, with staff responsible for individual units planning and developing their contribution in consultation with their colleagues, to ensure a logical development of concepts, avoid repetition, building capabilities over time, etc. Too often this is not the case and panels have interviewed sessional staff who are assuming considerable responsibility for program elements with almost no contact with their colleagues or any systematic support from their school. Program leaders and heads of school have sometimes been quick to deflect the substance of this performance measure by pointing to the value sessional staff bring to the program through their recent industry experience. With an increasing number of programs of all kinds being delivered by sessional staff, this will continue to be a matter the accreditation panels should pursue with vigilance. The criterion should stand.

Criterion 5.6 – Assessment practices.

The performance measure reads: Assessment together with timely and comprehensive feedback to students on their performance is treated as an integral part of the learning process. Generally, assessment questions have been well-handled by program teams, although students – in keeping with a pattern familiar across all higher education – still have concerns about the timeliness and comprehensiveness of feedback on their performance. Too often this problem occurs because teachers make a distinction between teaching and assessment, regarding the latter as a necessary but essentially administrative imposition on their workload. There is too little appreciation of the formative dimension of assessment feedback in assisting students to understand their own performance deficiencies and to take steps to overcome them. This is a critical issue of teaching quality and the wording of the performance measure should be strengthened.

Recommendation 12. The performance measure for Criterion 5.6 should be amended to read: Assessment together with timely and comprehensive feedback to students on their performance is demonstrably an integral part of the learning process.

Criterion 6.3 – Review process includes stakeholder input.

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The performance measure reads: Approval and review process includes industry and OHS professional representation. Providers are encouraged to have at least two certified OHS professionals as part of the program review and approval process. This needs to be substantially strengthened. Programs should have a consultative committee with a majority of industry-based professionals, who see documentation relating to review and program development at such time as allows them to have input to proposals before they go to school or university approval committees.

Recommendation 13. The performance measure for Criterion 6.3 be amended to read: “OHS Programs should have a consultative committee with a majority of industry-based professionals, who see documentation relating to review and program development at such time as allows them to have input to proposals before they go to school or university approval committees or other decision-making bodies”.

4. The Evidence Guide

This guide was developed with teaching academics through the trial period. It affords a comprehensive guide to the kinds of matters the assessment panel will wish to address and what constitutes *prima facie* evidence that the various criteria have been addressed and met. The most important element in any judgement of its usefulness will be the reaction of teaching teams that have experienced the accreditation process. The view here is that the document should stand, with possible amendment to take in the following comments.

Criterion 1.7 – Theoretical underpinning. ‘The approach to teaching and learning is clearly enunciated’

This has been discussed above. A desirable development here would be that all staff involved in teaching OHS programs meet to determine collectively the philosophy and orientation of the program, the preferred teaching methodologies, and the approaches to assessment. Realistically, this would require a substantial change in the way program teams operate in some institutions. The issue is whether the Board thinks it should set its expectations beyond much current practice in the interests of achieving a higher level of overall quality in OHS professional education. If the previous recommendation relating to this criterion is accepted, the small group so established might bring advice to the Board on this issue.

Criterion 1.8 – Theoretical underpinning. ‘The teaching program is informed by research.’

The recommendation above is that this criterion should be expanded from its present focus on disciplinary scholarship to the scholarship of teaching. The difficulty here is that many academic staff have no training in pedagogy and rely heavily on models to which they have been personally exposed, regarding teaching as something of an art, or where good practice can be arrived at through personal trial and error. The fact is that there is now a substantial body of research on university teaching that should inform the way programs are planned and implemented. The question here is how high the Board wants to set the bar on this issue. As a minimum, the Evidence Guide could ask what research has influenced decisions about the way teaching and learning is planned and supported.

Criterion 2.5 – Academic Staff. One listed example under this criterion is ‘Workplans’.

I do not think these have ever been sought during accreditation visits. It would be preferable to see some evidence that the academic staff collaborate in the planning and delivery of the program.

Criterion 4.4 – Academic Staff.

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Given that there have been concerns about the degree of support for sessional staff, more attention could be given by the accreditation panels to evidence of induction, mentoring and regular meetings with such staff.

Criterion 6.3 – Review process includes stakeholder input.

Accreditation panels should pay particular attention to the member list of Advisory Committees to ensure an appropriate level of input from practising professionals.

Conclusion

The judgment here is that the OHS Education Accreditation Board can legitimately claim success in the implementation of accreditation processes for University programs at all appropriate levels that service the need for qualified professionals in this field.

The clear strengths of the Board's approach has been: (1) the involvement of both professional practitioners and academics in shaping the process, (2) the support provided to institutions engaging with the process for the first time, (3) the resource materials supplied as part of that support, including both the clarity of expectations on, and the examples of appropriate evidence expected to support, applicant institutions, (4) the respect for institutional autonomy in both program delivery and quality assessment, and (5) the relationship established between OHS accreditation and wider demands on institutions for quality assurance and accountability.

Less positive elements include: (1) the constraints on the accreditation process of both time and available resources, (2) the setting of expectations at a relatively low level in relation to other professions to encourage participation and allow for success in the process, and (3) the need to increase rapidly the rate of accreditations if an appropriate cycle of review is to be achieved, which will intensify the constraints of time and available resourcing.

The issue for the Board is whether it wishes to strengthen the present process or continue to operate with things as they are. The recommendations below are extracted from the foregoing text and are intended to provide for some tightening of current arrangements without necessarily involving on significant change.

Recommendations

Recommendation 1. The first principle should be amended to read: 'The accreditation process acknowledges that 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.'

Recommendation 2. The third principle should be strengthened by adding a second sentence – 'As a corollary, institutions are expected to be open and transparent in providing all appropriate information to the accreditation process on request.'

Recommendation 3. The fourth principle by amending 'aligned with institution quality processes' so it reads 'aligned with institutional and other externally required quality assurance processes.'

Recommendation 4. The sixth principle be omitted.

Recommendation 5. The last three words of principle eight be omitted.



Recommendation 6. The wording of the second element of the definition of an OHS professional education program be amended to read 'at least 50% of the credit points' rather than '50% of the credit points'.

Recommendation 7. The OHS Education Accreditation Board should establish a small working group to bring forward a paper for consideration on a shared understanding of 'assessment performance to agreed standards'.

Recommendation 8. The Board maintain the present link between OHS accreditation and TEQSA accreditation standards.

Recommendation 9. The Board significantly strengthen the requirement for genuine involvement of the OHS profession in program development.

Recommendation 10. The Registrar establish a small group to redevelop the performance measure for Criterion 1.7.

Recommendation 11. The performance measure of Criterion 1.8 be expanded to include the research base of teaching practice.

Recommendation 12. The performance measure for Criterion 5.6 should be amended to read: Assessment together with timely and comprehensive feedback to students on their performance is demonstrably an integral part of the learning process.

Recommendation 13. The performance measure for Criterion 6.3 be amended to read: OHS Programs should have a consultative committee with a majority of industry-based professionals, who see documentation relating to review and program development at such time as allows them to have input to proposals before they go to school or university approval committees or other decision-making bodies.



Appendix 2: Detailed analysis of areas for improvement identified through accreditation

Table A1 indicates the number of accreditation assessments where improvement was required for specific criteria together with the outcome of the action to date. It should be noted that for the majority of accreditations there has only been one review period.

Table A1: Areas for improvement identified through accreditation and response

	Criteria	No of applications requiring action at accreditation assessment ⁵ n=13	Status as at 2014 ⁶			
			NYD	IP	FM	SO
1	Course design appropriate and meets Qualification Standards					
1.1	Program information	6	3	X	1	2
1.2	Program and award title	2		1		1
1.3	Program content description	3	1	X	1	1
1.4	Structure & learning activities appropriate to level of award (AQF)	6*	4	1	1	
1.5	Content addresses OHS Body of Knowledge concepts	6****	3	2		1
1.6	Integration of learning with workplace/ professional practice	5	3	X	1	1
1.7	Theoretical underpinning enunciated	8	4	3		1
1.8	The teaching informed by current research.	5	3	X	1	1
2	Course resourcing and information is adequate					
2.1	Practical facilities	3	1	X	X	2
2.2	Learning resources – current, available and suitable	6	2	1		3
2.3	IT facilities and staff IT skills	3	2	X	X	1
2.4	Reliability and accessibility of IT facilities	2		X	2	
2.5	Academic staff – number and capability	5	2	X	3	
2.6	Support staff – number and quality	0				
3	Admission criteria are appropriate					
3.1	Entry-requirements stated	0				
3.2	Entry requirements ensure students able to achieve learning outcomes	5	2	1	1	1
4	Teaching and learning are of a high quality					
4.1	Organisational structure – budget and infrastructure	2	2			
4.2	Defined academic leader	0				
4.3	Academic staff – inducted & part of the education process	1		1		
4.4	Sessional staff an integral part of educational process	5*	1	1	3	
4.5	Input by OHS Professionals	2	1	X	1	
4.6	Teaching staff have/developing OHS experience	2	2			
4.7	Teaching staff supported in undertaking professional development.	1	1			

⁵ * = Number of assessments deemed critical for this criteria resulting in accreditation being withheld.

⁶ NYD = Not yet due for reporting as only incurred in 2014; IP = In progress; FM = For Monitoring; SO = Signed Off



	Criteria	No of applications requiring action at accreditation assessment ⁵ n=13	Status as at 2014 ⁶			
			NYD	IP	FM	SO
4.8	Teaching staff supported to undertake research and maintain scholarship in the field	3	3			
4.9	Student: staff and student-peer interaction enables development of skills, knowledge and understanding of an entry-level OHSP	4*	1	X	3	
4.10	Remote/distance delivery supports interaction equivalent to that expected for on-campus modes of delivery	4*	2	X	2	
4.11	Student support/counselling regarding academic progress	4*	1	X	3	
5	Assessment is effective and expected student learning outcomes achieved					
5.1	Assessment practices provide evidence that knowledge and skills achieved to agreed standards	6	4	1		1
5.2	Assessment principles, methodology, criteria and expectations enunciated and communicated prior to commencement of teaching	6	2	2	1	1
5.3	Range of assessment modes	1	1			
5.4	Validity and reliability of assessment	3	2		1	
5.5	Integrity of assessment	3	2	1		
5.6	Assessment and timely and comprehensive feedback to students is treated an integral part of the learning process	3	1	1	1	
6	Course monitoring, review, updating and termination are appropriately managed					
6.1	Program is systematically reviewed on a regular basis	2	1	X	X	1
6.2	Review process includes past and present students	6	2	3	1	
6.3	Review process includes industry & OHS professional representation.	6	3	X	1	2
	Total of actions	129	62	19	28	20
	Total number of actions where response is due			67		
	% of status of responses for which action is due (n=67)			28%	42%	30%