



AUSTRALIAN
PHYSIOTHERAPY
COUNCIL

EQUIVALENCE OF QUALIFICATION ACCREDITATION

EDUCATION PROVIDER EVIDENCE GUIDE

Disclaimer: These guidelines provide general information in relation to the equivalence of qualification accreditation of entry-level physiotherapy programs of study. While care has been taken in the production of this guide, no legal liability is implied, warranted or accepted by the authors or the Australian Physiotherapy Council Limited and any liability is hereby expressly disclaimed.

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Equivalence of Qualification Evidence Guide for Entry-level Physiotherapy Practitioner Programs of Study VI.1

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1. Introduction

This is a guide for education providers seeking equivalence of qualification accreditation.

The Australian Physiotherapy Council Limited (the Council) is the accreditation authority for Physiotherapy Practitioner Programs in Australia. The activities of the Council include: accreditation of Australian physiotherapy education programs; the assessment of international qualifications for equivalence, the assessment of qualifications and skills of overseas-qualified physiotherapists for registration and migration purposes.

Equivalence of qualification accreditation, by the Council, provides assurance that an entry-level physiotherapy qualification meets an international benchmark. By providing a standard for evaluation of entry-level physiotherapy qualifications, the accreditation process delivers an assurance of standing that is independent of the education provider.

This benchmarked reference benefits educational providers, potential students, graduates and employers by facilitating international comparability, reciprocal recognition and the mobility of physiotherapy graduates.

Graduates from a program accredited by the Council as an equivalent qualification, are eligible to undertake the Council's online written assessment which assesses the knowledge, problem-solving and decision-making skills required for safe and competent practice of physiotherapy, as defined by the Physiotherapy Practice Thresholds Australia and Aotearoa New Zealand.

2. Assessment for Equivalence of Qualification Process

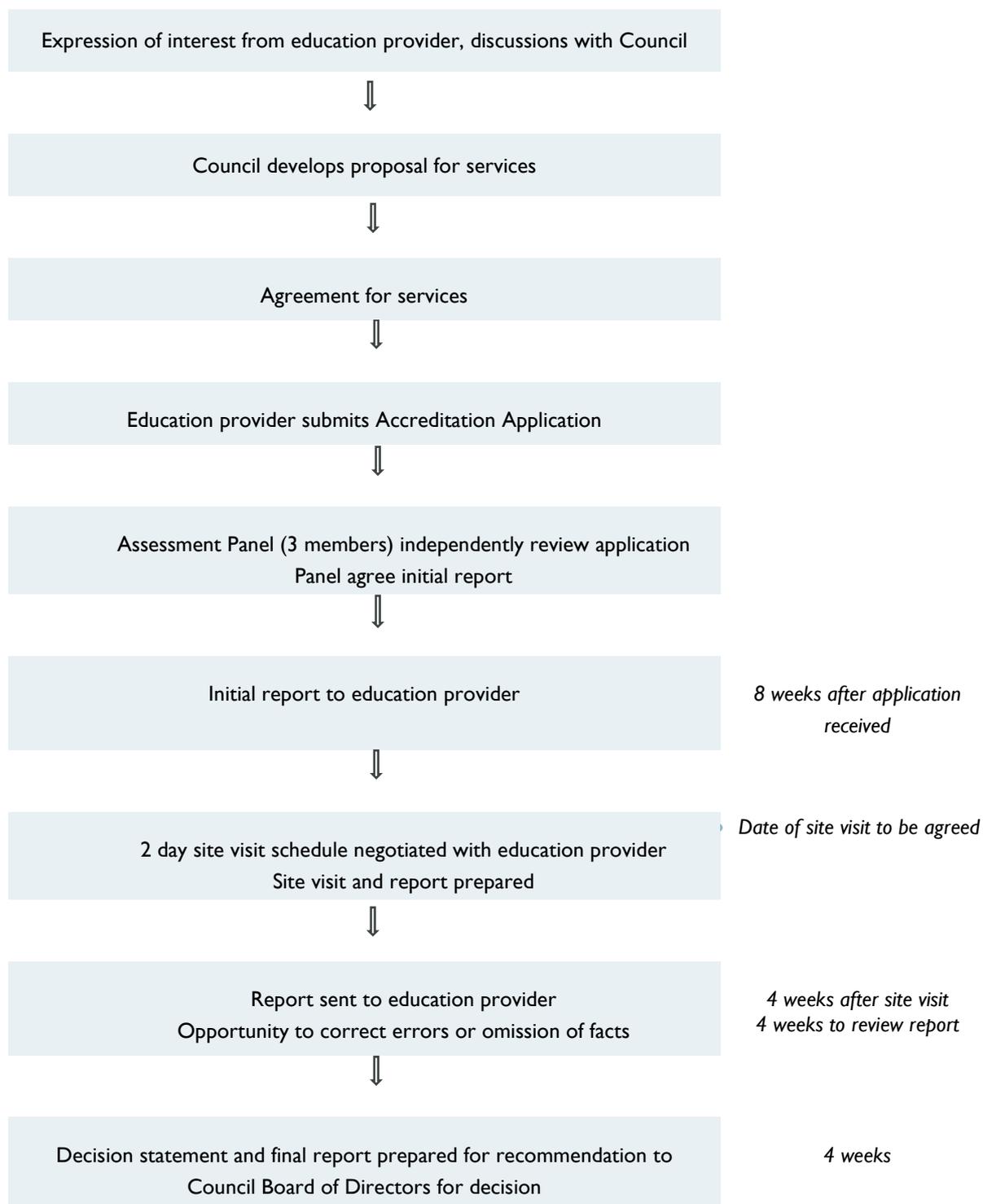
The process begins with an education provider expressing an interest to the Council in having a program assessed for equivalence of qualification accreditation, which will be followed by a discussion with the Council to explore and clarify the provider's expectations and requirements, the nature of the process and indicative timelines.

The assessment of an education program for equivalence is based on the following standards:

- Public safety is assured
- Academic governance and quality assurance process are effective
- Program design, delivery and resourcing enable students to achieve the required professional attributes and competencies
- Assessment is fair, valid and reliable

The accreditation process does not prescribe detailed program content, but requires education providers to demonstrate the alignment of unit of instruction learning outcomes to the Physiotherapy Practice Thresholds in Australia and Aotearoa New Zealand (2015) key competencies and foundational abilities.

Table I – Equivalence of Qualification Accreditation Process



3. Assessment criteria and evidence guide

The equivalence of qualification accreditation assessment criteria listed in the table below are the basis for evaluation of entry-level physiotherapy programs and inform the processes of continuous improvement.

An application for equivalence of qualification accreditation must provide sufficient evidence to demonstrate how the program meets the criteria listed in Table 2. Note that some of the indicative evidence items are repeated as they are relevant to more than one assessment criterion.

Table 2 – Equivalence of Qualification Accreditation assessment criteria

Public safety is assured	
Assessment Criteria	Indicative evidence
1.1 Protection of the public and the care of patients are prominent amongst the guiding principles of the educational program, clinical training and student learning outcomes.	<ul style="list-style-type: none"> Statement of overall education philosophy curriculum design and learning outcomes for the program of study.
1.2 Students achieve the relevant competencies before providing supervised patient care as part of the program.	<ul style="list-style-type: none"> Documentation describing the course structure that demonstrates timing of assessment of competency prior to clinical placement.
1.3 Students are supervised by suitably qualified and registered physiotherapy and health practitioners during clinical education.	<ul style="list-style-type: none"> Policies and procedures on endorsement of student clinical placement and standards for supervision.
1.4 Health services and physiotherapy practices providing clinical placements have robust quality and safety policies and processes and meet all relevant regulations and standards.	<ul style="list-style-type: none"> Clinical placement policies
1.5 The Education Provider holds students and staff to high levels of ethical and professional conduct.	<ul style="list-style-type: none"> Policies and procedures on ethical and professional behavior.

Academic governance and quality assurance processes are effective

Assessment Criteria	Indicative evidence
2.1 The provider has robust academic governance arrangements in place for the program of study that includes systematic monitoring, review and improvement.	<ul style="list-style-type: none"> • Overview of formal academic governance arrangements for the program including program quality assurance, review and improvement.
2.2 The organisation offering the program of study holds current registration with the relevant higher education authority.	<ul style="list-style-type: none"> • Statement of Registration as a provider with the appropriate local higher education authority e.g. in Australia this is TEQSA

Program design, delivery and resourcing enable students to achieve the required professional attributes and competencies

Assessment Criteria	Indicative evidence
3.1 A coherent educational philosophy informs the program of study design and delivery.	<ul style="list-style-type: none"> • Statement of overall education philosophy curriculum design and learning outcomes for the program of study. • Sample student time table for each year to show sequencing of the units of instruction and clinical placements.
3.2 Program of study information is clear.	<ul style="list-style-type: none"> • Program of study information provided to prospective and enrolled students, (link to website).
3.3 Program learning outcomes address all the relevant attributes and competencies.	<ul style="list-style-type: none"> • Curriculum mapping including alignment of unit of instruction learning outcomes to the Bi-national Physiotherapy Practice Threshold (2015) key competencies and foundational abilities.
3.4 The quality and quantity of clinical education is sufficient to produce a graduate competent to practise across the lifespan in a range of environments and settings.	<ul style="list-style-type: none"> • Summary table of the clinical placements completed by the student demonstrating experience across acute, rehabilitation and community practice in a range of environments and settings across the lifespan. • Example of the mechanism the student used to record their clinical placements.
3.5 Learning and teaching methods are intentionally designed and used to ensure students achieve the required learning outcomes.	<ul style="list-style-type: none"> • Unit of instruction outlines detailing how the unit is structured and enacted at each stage. • Examples of how topics within the curriculum are integrated both horizontally and vertically.

3.6 Graduates are competent in research literacy for the level and type of the program.	<ul style="list-style-type: none"> • <i>Examples of where research literacy is covered in the program of study.</i>
3.7 Principles of inter-professional learning and practice are embedded in the curriculum.	<ul style="list-style-type: none"> • <i>Examples of how students interact with other health profession students and/or other health professionals through the program of study.</i>
3.8 Teaching staff are suitably qualified and experienced to deliver the units that they teach.	<ul style="list-style-type: none"> • <i>Academic staffing profile including professional qualifications, registration status and teaching and supervision responsibilities</i>
3.9 Learning environments support the achievement of the required learning outcomes.	<ul style="list-style-type: none"> • <i>Report on learning environments, facilities, equipment and resources available to deliver the program of study.</i>
3.10 Cultural competence is integrated within the program and clearly articulated as required disciplinary learning outcome.	<ul style="list-style-type: none"> • <i>Examples of learning and assessment from across the program of study demonstrating the integration of cultural competence.</i>
3.11 The physiotherapy program complies with the relevant national qualifications framework and aligns to the Australian Qualifications Framework (AQF).	<ul style="list-style-type: none"> • <i>Evidence of the relevant national qualification framework level and where it aligns to the Australian Qualifications Framework (AQF).</i>

Assessment is fair, valid and reliable	
Assessment Criteria	Indicative evidence
4.1 There is a clear relationship between learning outcomes and assessment strategies.	<ul style="list-style-type: none"> • <i>Assessment policies and procedures</i> • <i>Unit of instruction outlines detailing how the unit is structured and enacted at each stage.</i>
4.2 Scope of assessment covers all learning outcomes relevant to attributes and competencies.	<ul style="list-style-type: none"> • <i>Assessment blueprint/matrix which details assessment methods and weightings and demonstrates alignment of assessment to unit of instruction learning outcomes.</i>

4.3 Multiple assessment tools, modes and sampling are used including direct observation in the clinical setting.

- *Assessment blueprint/matrix which details assessment methods and weightings and demonstrates alignment of assessment to unit of instruction learning outcomes.*

4.4 Suitably qualified and experienced physiotherapists undertake the assessment of physiotherapy specific competence.

- *Academic staffing profile including professional qualifications, registration status and teaching and supervision responsibilities.*

4.5 All learning outcomes are mapped to the required attributes and competencies, and assessed.

- *Assessment blueprint/matrix which details assessment methods and weightings and demonstrates alignment of assessment to unit of instruction learning outcomes.*

4. Outcomes

Accreditation is granted for a period of up to 5 years. During the period of accreditation, the Council monitors the program to ensure that it continues to meet the standard. The education provider is required to complete an annual report to the Council, which includes information such as:

- Student enrolment data
- Evidence of clinical education placements
- Changes to academic staffing
- Identification of a major change(s) to the program
- Outcomes of continuous improvement processes.

5. Application

The application template requires education providers to include a short statement addressing each criterion and an explanation of the evidence submitted to demonstrate the criterion is met. Education providers should include any further evidence and information they deem appropriate to support their submission. The Council relies on both documentary evidence submitted by the education provider and experiential evidence obtained by the Assessment Panel at a site visit, to make its decision. Hard copies of information are not required, providers are encouraged to use hyperlinks to key documents within the application rather than uploading large files.

The Council will consult with the Head of the Academic Unit and the Panel members regarding dates for the site visit and will establish whether the education provider will make the necessary travel/accommodation arrangements, or whether the Council will take responsibility for this and invoice the provider on a cost-recovery basis.

Following an initial review of the application, the Council will provide the Head of the Academic Unit with the matters to be addressed and a proposed site visit schedule. Site visits are usually conducted during academic semester to enable meetings with students and staff.

Table 4 – sample site-visit schedule

Time	Activity	
Day 1		
8.45-9.00	Arrival and set-up	Panel members require access to wifi and meeting room.
9.00-9.40	Meeting with Senior Executive members	<p>(10 min) Panel Chair Brief overview of purpose and process for the site visit as part of the accreditation process.</p> <p>(30 min) Senior Executive Team Discussion and confirmation of the strategic direction for the program, resourcing, governance.</p>
9.45-10.45	Academic governance and quality assurance	<p>(60 min) Governance</p> <ul style="list-style-type: none"> • systems of monitoring and review • quality improvement processes
10.45-11.00	Break	(15 min) morning tea - panel only
11.00 - 12.40	Program of study and Assessment	<p>(100 min) Curriculum and Assessment</p> <ul style="list-style-type: none"> • Overview of educational philosophy and design of the program • Learning outcomes and assessment alignment to Physiotherapy Practice Thresholds • Learning environment and teaching methods • Learning and teaching methods including inter-professional learning • Integration of cultural competence in the curriculum • Development of student research literacy • Program assessment strategy • Range of assessment methods • Moderation of assessment
12.45-1.30	Lunch	(45 min) working lunch - panel only
1.30-2.30	Staffing	<p>(60 min) Staff interviews</p> <ul style="list-style-type: none"> • Teaching staff suitably qualified and experienced • Support for professional development

		<ul style="list-style-type: none"> • Support staff: technical, laboratory, teaching and learning, administrative
2.30-3.30	Facilities	<p>(60 min) Ttour of facilities</p> <ul style="list-style-type: none"> • Facilities and equipment support the achievement of learning outcomes • Specialist teaching spaces and key equipment, laboratories, simulation, clinics etc. • General teaching spaces • Resources to sustain the quality of education required • Student support areas including library, computer labs etc.
3.30-3.45	Break	(15 min) afternoon tea - panel only
3.45-4.45	<p>Program of Study - Clinical Education</p> <p>Public Safety</p>	<p>(60 min) Clinical Education</p> <ul style="list-style-type: none"> • Clinical education model • Students achieve relevant competencies before providing supervised care • Students supervised by suitably qualified clinical educators • Quality and quantity of clinical placements across the lifespan and in a range of environments and settings • Education provider support for clinical educators • Monitoring process for students on placement • Monitoring of placement providers
4.45-5.00	Short break	(15 min)
5.00 - 5.45	External Advice	<p>(45 min) Academic Program and Resources, Graduate Outcomes</p> <p>Meeting with external advisory panel or representative</p>
Day 2		
9.00-12.00	Clinical education site visits	<p>(180 min) Clinical Education Sites</p> <p>Engagement with clinical placement providers, including visits to key clinical education sites.</p> <p>Specifically addressing:</p> <ul style="list-style-type: none"> • Education provider engagement with clinical sites (i.e., support, professional development of clinical educators, assessment, resourcing etc.) • Alignment of placements with the curriculum • Student engagement with placements (e.g., preparedness, support, facilities etc.) • Experience of physiotherapy graduates from the program (re-accreditation)

12-12.30		Travel back to campus
12.30-1.30	Lunch	(60 min) working lunch - Panel only
1.30-2.30	Student Experience (re-accreditation)	(60 Min) Student Interviews <ul style="list-style-type: none"> • Program information is clear and accessible • Academic program – teaching, assessment and clinical education placements • Access to facilities and services • Student representation and feedback
2.30- 4.00	Panel Discussion and report writing	(90 min) Discussion and drafting panel report
4.00-4.30	Debrief with Provider	(30 min) Debrief General feedback and confirmation of next stages of the process

6. Monitoring of programs

Education providers are required to report annually to the Council to maintain the equivalence of Qualification accreditation status. The Annual Report will include:

- Student enrolment data
- Detailed evidence of clinical education placements
- Changes to academic staffing
- Progress work on any existing conditions on accreditation
- Identification of a major change(s)
- Other reporting that may be identified by the Council as part of audit procedures.

For accredited programs without conditions, the Chair of the Accreditation Panel will complete an assessment of the Annual Report submission. Where a Condition(s) is in place, two academic panel members will review the report to determine progress against the Condition(s) and complete an assessment of the Annual Report submission.

The outcome of the Annual Report assessment is reported to the Board of Directors. Any outcome that impacts the accreditation status of the program will be identified in a Decision Statement.

The accreditation outcome for a program following an Annual Report will be one of the following:

- Accreditation - the accreditation status of the program remains unchanged, or a condition(s) has been met that enables the program to achieve Accreditation without conditions; or
- Accreditation with Conditions – the accreditation status remains unchanged, or a condition(s) is imposed on Accreditation, as an assessment has been made that criteria are only substantially met; **or**
- Accreditation Revoked – the program no longer meets or substantially meets the accreditation standard, and it is not expected the program can meet the standard in a reasonable time.

Where a decision is made to revoke the accreditation of a program, the education provider will be notified in writing. The letter will be accompanied by a report, which includes the evidence applied to determine that the program no longer meets, or is unable to meet in a reasonable time, the Accreditation Standards.

6.1 Major Change

As part of the annual reporting process, the education provider is required to identify actual or planned changes to the program that are outside the usual evolution of a physiotherapy program due to quality improvement initiatives. Twelve (12) months' notice should be given of planned major change(s).

A major change is defined as: A significant variation to currently accredited content or delivery of an academic program or to the practices, policy, structure or governance of the academic unit or education provider that could impact on the outcomes of a program of study.

An assessment of impact of the change(s) will be undertaken by the Accreditation Panel, based on the evidence presented in the Annual Report and the panel will determine if the change is major. Determination of a major change will prompt a full application for accreditation.

Major changes may include but are not limited to:

Changes to program attributes including:

- Addition of, or change to, award level (for example, Bachelors to Masters/Masters extended program)
- Change to the program duration.

Changes to curriculum including:

- Significant variation to the currently accredited curriculum with respect to course structure, units, learning outcomes, content, or delivery method
- Significant changes to the clinical education program model or level of support from clinical education partners.

Changes to resources and infrastructure including:

- Significant increase in student numbers relative to resources
- Significant changes to academic staff that may adversely affect the provider's capacity to deliver the program(s)
- Major changes to educational facilities that may adversely affect the provider's capacity to deliver the program(s)
- Changes to the legal status of the corporate entity of the education provider
- Any incident or circumstance, which could affect the education provider's integrity or capacity to conduct its business or deliver the program.

7. Confidentiality

The accreditation process is confidential to the participants. In order to undertake its accreditation role, the Council requires detailed information from education providers. This typically includes sensitive or commercial-in-confidence information such as plans, budgets, appraisals of strengths and weaknesses and other confidential information. The Council require members of accreditation panels, members of the Accreditation Committee, Council members and staff to keep confidential all material provided to the Council by education providers. Information collected is used only for the purpose for which it is obtained.

8. Complaints and appeals against decisions

The Australian Physiotherapy Council Limited is required by section 48(4) of the National Law to have a process for internal review of certain accreditation decisions. An education provider has thirty (30) days to seek a review of an accreditation decision, including the outcome from an Annual Report.

There are two grounds for an application to review a decision:

- 1) The manner in which the accreditation process was conducted was procedurally unfair

This may include, but is not limited to, matters such as the sequence and timing of the accreditation process, the process of review and evaluation of documentation and the conduct of the site visit. OR

- 2) The decision of the Directors was unjustified or patently unreasonable in the circumstances i.e. that the decision was not supported by substantial evidence on the record or that the decision was made on capricious or arbitrary grounds and not the application of objective standards.

8.1 Procedure

The education provider is required to:

- Lodge the appeal with the CEO of the Australian Physiotherapy Council Limited in writing within thirty (30) days of the date of the Council letter advising the education provider of the accreditation decision; and
- Pay the scheduled fee to meet the cost of the review at the time of lodgement of the appeal. The fee will be refunded in part or full if the outcome of the review is in favour of the education provider; and
- Clearly state the grounds for seeking a review of the decision supported by evidence. The onus is on the education provider to provide such evidence.

Upon receipt of an application for an internal review of the decision, the Council CEO will acknowledge receipt of the application and establish an Internal Review Panel comprising of three members:

- A nominee of the Australian Physiotherapy Association
- A nominee of the Council of Physiotherapy Deans, Australia and New Zealand; and
- A person nominated by the Board of Directors with experience in investigation of complaints, who is not a physiotherapist.

The nominees must be familiar with accreditation processes, and must not have been involved in the accreditation of the program that is the subject of the review, nor have any perceived or actual conflict with the education provider or its personnel, in accordance with procedural fairness. This panel must be convened within thirty (30) days of the receipt of the appeal.

The Internal Review Panel will limit its scope to the grounds stated by the education provider in the application for review of the decision.

The Internal Review Panel shall be provided with the documentation lodged by the education provider, a copy of the accreditation decision letter, the Executive Summary and Accreditation Report, and any other documentation from the record of accreditation process, as requested. Although the Internal Review Panel will predominantly make its decision based on documentary material, it has the discretion to make any such inquiries as it deems necessary to inform deliberations before coming to its conclusion.

The Internal Review Panel is entitled to obtain independent legal advice if a question of law arises during the review. The Australian Physiotherapy Council Limited is responsible for the cost of its independent legal advice.

The outcome of the review by the Internal Review Panel should be notified to the education provider no later than ninety (90) days from date of lodgement of the appeal with the Council. A statement clearly outlining the reason for the decision of the Internal Review Panel will be provided.

The decision of the Internal Review Panel is taken to be the decision of the Board of Directors and supersedes any prior decision made by the Board of Directors. The decision by the Internal Review Panel is final.

The Council CEO will provide a notification of outcome to the:

- a) Education provider
- b) Board of Directors; and
- c) Physiotherapy Board of Australia.