ACCREDITATION MANUAL
FOR POSTGRADUATE PROGRAMS
OF STUDY IN OCULAR THERAPEUTICS
PART 2- STANDARDS

August 2013

Introduction

The Optometry Council of Australia (OCANZ) was established in 1996 and has the support of and representation from the:

- Optometry Registration Boards in Australia and New Zealand
- Heads of the optometry schools
- Optometrists Association Australia
- New Zealand Association of Optometrists.

The two key roles of OCANZ are:

- to conduct examinations for overseas qualified optometrists
- to accredit optometry programs in Australia and New Zealand leading to registration and endorsement.

From 2010, the Optometry Board of Australia (OBA) has assigned the optometry accreditation functions to OCANZ under the National Registration and Accreditation Scheme (NRAS) of Australia and previously through CORA. OCANZ provides a similar accreditation service to the Optometrists and Dispensing Opticians Board (ODOB) of New Zealand. The OBA and the ODOB are the Registration Boards for optometry in Australia and New Zealand respectively.

OCANZ provides a system of quality assurance for the Registration Boards.

This document sets out the graduate knowledge and skills outcomes and the set of accreditation standards (the Standards) applying to education providers[1] seeking accreditation or re-accreditation of postgraduate programs in ocular therapeutics.

The Standards apply to postgraduate therapeutics programs of study that train optometrists to obtain, possess, administer, prescribe or supply Schedule 2, 3 or 4 medicines (or their equivalent) for the treatment of conditions of the eye where this training has not been part of their undergraduate program of study.

In Australia, from December 2014, therapeutic qualifications will be a requirement for an individual's initial registration as a practicing optometrist. In the absence of therapeutic qualifications, Australian optometrists will have a notation on their registration indicating they are not qualified for a scheduled medicines endorsement. Overseas trained optometrists may be eligible for limited registration through application to the OBA.

Notes, where provided in this document, are intended to give the education provider guidance on possible evidence of the application of the accreditation standards in their program of study.

This document replaces the previous standards document 'Guidelines for Accrediting Postgraduate Therapeutics Training 7 November 2004.'

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[1] The National Health Practitioner Regulation Law Act 2009 uses the term **education provider** to cover organisations that may be accredited to provide education and training for a health profession. The term encompasses universities; other tertiary education institutions, or other institutions or organisations that provide vocational training; or specialist medical colleges or other health profession colleges. For consistency, OCANZ uses the terminology of the National Law in its standards and guidelines.

The OCANZ *Accreditation Manual for Postgraduate Programs of Study in Ocular Therapeutics Part 1- Processes and Procedures[2]* provides guidance on the process of assessment of a postgraduate program of study in ocular therapeutics.

General Principles
The development of the Standards has been informed by the guiding principles and objectives of legislation regulating all health practitioners in Australia and New Zealand.

The objectives and guiding principles of the *National Health Practitioner Regulation Law Act* 2009 (the National Law) have been taken into consideration in the development of the Standards. In particular, the objectives a, c and f of the National Law being:
  a) *protection of the public*
  c) *provision of high quality education and training of health practitioners*
  f) *to enable the continuous development of a flexible, responsive and sustainable Australian health workforce and to enable innovation in the education of, and service delivery by health practitioners.*

OCANZ intends that the Standards operate in a transparent, accountable, efficient, effective and fair way.

OCANZ expects graduates of OCANZ accredited post graduate programs of study in ocular therapeutics will:

- be trained for therapeutic practice to diagnose, treat and manage the wider range of ocular disease in the jurisdictions in Australia and New Zealand.

- meet the relevant competency standards in line with the requirements of their Registration Board.

- successfully complete a period of supervised clinical practicum.

- demonstrate safe and appropriate autonomous therapeutic management of patients, including the capacity to design, implement and monitor appropriate management programs.

- involve patients in their own care including transparency in relation to impacts of treatment.

- be equipped with skills to adapt to changes in the scope of therapeutic optometric practice.

- have the capacity to work in a collaborative and an integrated way with other health professionals and other parties in the health care system.

Similarly, Australian regulatory reforms in higher education, including the establishment of the Tertiary Education Quality Standards Agency (TEQSA), have been taken into account in the Development of the Standards. Where the education provider is not a tertiary institution, equivalent performance to relevant sections of the TEQSA standards is required. The *Council of Australian Governments Principles for Best Practice Regulation* document has guided the design of the Standards so its operation does not create unnecessary restrictions and its delivery appropriately balances cost impacts with likely public benefit.

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[2] As developed by OCANZ and as updated from time to time.

The Standards have been written with consideration that they not have a negative impact on the ability of the workforce to work in a flexible and innovative way, nor impede clinical training or public safety.

OCANZ acknowledges the assistance of the Australian Medical Council in allowing OCANZ to utilise the *Standards for Assessment and Accreditation of Specialist Medical Education Programs and Professional Development Programs by the Australian Medical Council* 2010 to inform the development of these Standards.

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Standard 1 – Context of the postgraduate program of study in ocular therapeutics (the program)

1.1   Governance

1.1.1   The education provider's governance structures are defined and these structures are understood by those delivering the program.

1.1.2   The composition of any committee or equivalent body established by the education provider with responsibility for the program's delivery and its terms of reference are written in an unambiguous manner and understood by its members.

1.1.3   The education provider is able to demonstrate that its internal structures prioritise the role of education relative to other activities.

1.1.4   The education provider consults relevant groups, including the broader community where relevant, on issues relating to the purpose of the program, the curriculum of the program, the graduate knowledge and skills outcomes and governance of the program.

Notes

Governance structures and the range of functions vary between education providers. No particular structure is preferable. The education provider demonstrates that their chosen structure or functions perform effectively over time.

The education provider's approach to c*onsultation with relevant groups* demonstrates stakeholders outside of the educational setting are engaged as the program structure and approach may directly impact these stakeholders, including stakeholders involved in clinical supervision and employers of the program graduates.

1.2   Program management

1.2.1   The education provider establishes a committee or equivalent body with the responsibility, authority and capacity to plan, implement and review the program and set relevant policy and procedures.

1.2.2   The management and leadership responsibilities of the head of the program are written in an unambiguous manner and understood by the head.

1.2.3   Education and training activities are supported by the level of resources, including equipment and administrative systems, required to effectively support the program.

Notes

The education provider provides evidence that a committee or an equivalent body is in place to develop and implement curriculum and assessment, policy and content.

The membership of the committee or equivalent body should include members with knowledge and expertise in optometry and ocular therapeutics education as well as members from the optometry profession.

The education provider maintains adequate systems for recording and reporting on program management activities and program student records.

1.3 Educational expertise and collaboration

1.3.1 The education provider uses educational expertise in the development, management delivery and evaluation of the program.

1.3.2 The education provider engages with other educational institutions and understands how its curriculum and assessment approach compares with other relevant programs.

1.4 Interaction with the health sector

1.4.1 The education provider has constructive working relationships with relevant government departments, non- government agencies and facilities, individuals and groups in the optometry profession and other health professions in promoting the education, training and on-going professional development of graduates.

Notes

Relevant agencies and facilities includes, for example, health service agencies and healthcare providers, universities and other teaching and/or research institutions. Evidence of formal mechanisms for consultation and cooperation may need to be provided, particularly in relation to teaching and clinical placement of the program students.

1.5 Financial resources

1.5.1 The education provider allocates adequate recurrent funding to deliver the program and meet the program objectives.

Notes

The education provider demonstrates sufficient resources to enable it to deliver and maintain the postgraduate ocular therapeutics program and ensures that sufficient resources are available throughout the anticipated timeframe that the program will operate.

1.6 Research and scholarship

1.6.1 The education provider utilises research and scholarship to inform its approach to teaching and learning in the program.

Notes

The education provider provides evidence that research and scholarship support the approach it takes to teaching and learning in the program. The education provider provides opportunities for program students to have direct contact with researchers.

1.7 Staff resources

1.7.1 The education provider engages suitably qualified teaching staff with demonstrated capacity and expertise to deliver the program.

1.7.2 The education provider has adequate administrative and technical staff to support implementation of the program and other activities, and to manage and deploy its resources.

1.8 Continuous improvement

1.8.1 The education provider routinely reviews and updates program structures, functions and policies and in doing so can identify and implement requisite corrective actions and responds to changes in the environment and knowledge base as required.

Notes

The education provider utilises educational strategic planning so its curriculum and program are current and appropriate for changes in health care delivery, scientific progress and changing community needs.

The education provider demonstrates mechanisms are in place to recognise and initiate responses to emerging issues, especially those that cross disciplinary boundaries. Topics of emerging interest may include recent or imminent legislation changing the scope of practice of optometry or changes in methods of practice arising from new knowledge or technology.

It is appropriate that the education provider conducts, or contributes to, the comprehensive review of the program from time to time but maintains mechanisms to review and make incremental changes to the curriculum and its components.

The education provider includes input from program students and recent graduates when planning a new program or making adjustments to the existing program. In managing changes to education, training and assessment requirements, education providers consider the impact of their planned changes on program students. In making program changes, education providers are guided by the principle of 'no disadvantage to program students'.

Standard 2 – Organisational purpose and program outcomes

2.1 Organisational purpose

2.1.1 The education provider in developing the program purpose, sets and promotes high standards of optometric practice in prescribing ocular therapeutics and includes the recognition of social and community responsibilities in relation to managing ocular therapeutic treatments.

2.1.2 The education provider defines the purpose of the program in consultation with key stakeholders.

2.2 Graduate knowledge and skills outcomes

2.2.1 The education provider has defined graduate knowledge and skills outcomes for the program which are consistent with the outcomes set out below.

2.2.2 Members of the staff providing the program and the program students enrolled in the program demonstrate knowledge and understanding of the graduate knowledge and skills outcomes.

2.2.3 The education provider makes information on graduate knowledge and skills outcomes publicly available.

Notes

The education provider provides evidence that upon satisfactory completion of the program, graduates obtain an understanding of and are able to demonstrate the therapeutic level

competencies in line with the agreed standard of their relevant Registration Board[3] and as updated from time to time. Similarly, a graduate intending to practice in Australia will need to be aware of and practice consistently with the National Prescribing Service Limited *Competencies Required to Prescribe Medicines* (2012)[4] or subsequent revisions/amendments of this document (or a replacement equivalent).

A graduate will:

- demonstrate the requisite knowledge, skills and professional attributes necessary for independent practice and autonomous prescribing in ocular therapeutics, including:

  - a thorough understanding of the microbiological, immunological and pathological processes relevant to eye and eye-related disease.

  - a sound knowledge of the pharmacology of ophthalmic drugs (both topical and systemic) used in the treatment of eye-related disease.

  - competence to diagnose and treat allergic, infective, inflammatory, toxic and traumatic conditions of the anterior eye, and be aware of the circumstances in which referral for specialist medical treatment is required.

  - competence to diagnose, monitor and treat glaucoma.

  - an understanding of the emergencies and serious complications that can be associated with eye disease so that these can be identified and properly managed and awareness of the circumstances in which referral for specialist medical treatment is appropriate.

  - a thorough understanding of the potential side effects of or adverse responses to ocular drugs, the scope of interaction that a chosen ocular drug may have with other systemic and ocular drugs, and how to avoid and manage such complications.

  - the capacity to provide non-invasive first aid for ocular conditions.

  - a thorough understanding of their relevant national Registration Board guidelines and legislative provisions related to the use of therapeutic agents used to manage eye disease including allergic, infective, inflammatory, toxic and traumatic conditions of the anterior eye.

  - the capacity to work in an integrated and collaborative way with other health professionals, organisations and parties in the health care system.

- be able to practice unsupervised in prescribing ocular therapies, providing safe and high quality care and independent therapeutic management of patients, including the capacity to design, implement and monitor appropriate management programs.

- be able to assess and maintain their competence and performance through continuing professional education, the maintenance of existing skills and the development of new skills.

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[3] Consistent with the Trans-Tasman Mutual Recognition Agreement
[4] Found at http://www.nps.org.au/__data/assets/pdf_file/0004/149719/Prescribing_Competencies_Framework.pdf

The education provider recognises and builds on outcomes from undergraduate levels of optometry education when defining their graduate knowledge and skills outcomes.

The education provider defines graduate knowledge and skills outcomes toward which curriculum, assessment and evaluation need to be targeted.

Standard 3 - The education and training program

3.1 Curriculum framework

3.1.1 The education provider organises the program curriculum framework aligned to the graduate knowledge and skills outcomes. The curriculum framework for the program is publicly available.

3.2 Curriculum structure, composition and duration

3.2.1 The education provider demonstrates the program curriculum satisfies its obligations under the higher education regulatory framework operating in their jurisdiction; for example, the Australian Quality Framework (AQF) and New Zealand Qualifications Authority (NZQA) and course accreditation standards of the Tertiary Education Quality and Standards Agency (TEQSA).

3.2.2 The education provider specifies the educational objectives and outcomes, details the nature and range of clinical experience required to meet these objectives, and outlines the syllabus of knowledge, skills and professional qualities to be acquired in each component or stage in the curriculum.

3.2.3 The education provider demonstrates the curriculum covers, but may not be limited to, the following topics:

A. Biomedical Foundations
Pathology
Immunology
Microbiology
Pharmacology

B. Ocular Disorders and Management
Disorders of the Eyelids
Disorders of the Lacrimal System
Disorders of the Conjunctiva
Disorders of the Cornea
Diseases of the Sclera and the Episclera
Disorders and Diseases of the Posterior Eye
Systemic Diseases with Ocular Involvement
Post-surgical Care (Cataract and Refractive)
Glaucoma
Iritis and Diseases of the Uvea

C. Integrated and Collaborative Patient Management

D. Basic Life Support

E. Regulation and Administration
Legal requirements relevant to optometry practice and prescribing ocular therapeutics
(relevant to the jurisdiction where the graduate is registered to practice)
Non-statutory guidelines relevant to optometry practice and prescribing ocular
therapeutics

3.2.3   The education provider certifies that the graduate has successfully completed the
program by providing the graduate with a diploma or other formal award in a manner
consistent with the relevant qualification standards.

3.2.4   The education provider determines the duration of the program[5] taking into account

- the graduate's likelihood of successfully achieving the graduate knowledge and skills
outcomes

- that the integrity of the graduate knowledge and skills outcomes is maintained; in
particular that the graduate is able to independently and safely prescribe ocular
therapeutics.

3.2.5   The education provider recognises and builds on outcomes from undergraduate levels of
optometry education when defining their curriculum.

3.2.6   The education provider includes a minimum of 50 hours of supervised clinical practicum,
covering mild to severe disease, in its requirements for successful completion of the
program.

Notes

The education provider ensures program students are aware of the goals and objectives of the
program at its onset and this is reinforced during the delivery of the program. The education
provider develops a curriculum that is responsive to the rapid growth of knowledge relating to
optometry and its foundation in biomedical science as well as changes in the practice of
optometry.

The education provider emphasises principles underlying ocular therapeutics throughout the
curriculum to ensure graduates are capable of independent practice immediately on graduation,
have current knowledge and are highly proficient in applying clinical skills.

3.3   The continuum of learning

3.3.1   The education provider demonstrates the program is appropriately situated within the
continuum of optometry training.

Notes

The education provider recognises that training in ocular therapeutics is training for an
enhanced diagnostic and therapeutic skill and a specific set of treatment skills which builds on
the experience, knowledge and skills of already qualified optometrists.

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[5] The education provider, if a tertiary institution, complies with the requirements of the relevant regulatory framework for higher
education operating in their jurisdiction in determining the volume of learning for the program, for example the *AQF Second edition
2013* and subsequent editions. Other education providers should be able to demonstrate equivalent performance to such
requirements operating in their jurisdiction.

Standard 4 - Teaching and learning

4.1　The education provider employs a range of teaching and learning methods to meet the outcomes of the program.

4.2　The education provider encourages program students to evaluate and take responsibility for their own learning, and prepares them for career-long learning.

4.3　The education provider enables program students to develop specific skills in therapeutic practice before these are used in a clinical setting.

4.4　The education provider provides appropriate theoretical instruction.

4.5　The education provider provides the opportunity for program student participation in relevant aspects of direct patient care (including patients with pathology)

Notes

The education provider utilises innovative methods of teaching that promote the educational principles of active program student participation, problem solving and development of communication skills in delivery of the program. Problem-based learning, computer assisted learning and other program student-centred learning strategies are encouraged.

Standard 5 - Assessment of learning

5.1　Assessment approach

5.1.1　The education provider has a policy that describes its assessment philosophy, principles, practices and rules. The policy aligns assessment with learning outcomes and is based on the principles of objectivity, fairness and transparency.

5.1.2　The education provider documents assessment and progression requirements and ensures the document is accessible to program students and staff.

5.1.3　The education provider ensures a balance of formative and summative assessments.

Notes

The education provider uses assessment to reinforce the goals and objectives of the program.

The education provider documents how assessment balances formative and summative elements, the number and purpose of examinations (including a balance between written and practical examinations) and other assessment requirements, and makes explicit the criteria and methods by which any judgments based on the various assessments are made.

5.2　Assessment methods

5.2.1　The education provider assesses program students throughout the program, using fit for purpose assessment methods and formats to assess the learning outcomes.

5.2.2　The education provider has a blueprint to guide the assessment of program students for each phase of the program.

5.2.3　The education provider uses validated methods of standard setting in assessment.

Notes

The education provider ensures assessment approaches are constructed through blueprints or assessment matrices which match assessment items or instruments with outcomes. The education provider evaluates their assessment approach at the overall program level rather than on the psychometric properties of individual instruments. The education provider adopts a balance of valid, reliable and feasible methods to drive learning to the program goals and outcomes.

The education provider incorporates direct observation of program student performance in the clinical setting using performance-based assessment as well as other forms of clinical assessment.

5.3   Assessment feedback

5.3.1.   The education provider has processes for timely identification of underperforming program students and implementing remediation.

5.3.2   The education provider facilitates regular feedback to program students following assessments to guide their learning.

5.3.3   The education provider gives feedback to supervisors and teachers on program student cohort performance.

Notes

The education provider has systems in place to monitor program student progress, to identify program students experiencing difficulty early and, where possible, to assist them to complete their program successfully using methods such as remedial work and re-assessment, supervision and counselling.

The education provider has clearly defined policies relating to times when the remediation and assistance offered is not successful and/or appropriate, definitions of unsatisfactory progress and limits on the duration of program, for example.

5.4   Assessment quality

5.4.1   The education provider regularly reviews its assessment policies and practices including, where applicable, blueprinting and standard setting, psychometric data, quality of data, and attrition and progress rates.

5.4.2   The education provider ensures that the scope of the assessment practices, processes and standards is consistent across geographical locations and over time.

Notes

The education provider ensures that when educational objectives of the program or a component of the program is changed, assessment process and methods are reviewed and revised where appropriate to reflect the new objectives. Similarly, the education provider introduces new or revised assessments where evaluation of specific curriculum components and associated assessment reveals a need.

Standard 6 - Monitoring and evaluation

6.1 Ongoing monitoring

6.1.1 The education provider regularly monitors and reviews the program including curriculum content, quality of teaching and supervision, assessment and program student progress decisions. The education provider manages concerns about, or risks to, the quality of any aspect of the program in a timely manner.

6.1.2 The education provider seeks teacher and program student feedback in a systematic manner and analyses and uses the results of this feedback for monitoring and program development and improvement.

Notes

The education provider monitors and evaluates the curriculum to assess the achievement of educational objectives. The education provider has a plan that articulates the purpose and procedures for conducting the evaluation, such as why the data are being collected, from whom and when, methods and frequency of data analysis, responsibility for receiving evaluation reports, and possible decisions or actions in response to particular findings. The plan describes how and when poor results will be followed up.

6.2 Outcome evaluation

6.2.1 The education provider analyses the performance of cohorts of program students and graduates in relation to the outcomes of the program.

6.2.2 The education provider evaluates the outcomes of the program.

6.2.3 The education provider examines performance in relation to program student characteristics and feeds this data back to the relevant committee(s) or other equivalent body(ies) responsible for program student selection, curriculum and program student support.

Notes

The education provider uses practitioner self-assessment of preparedness for practice and other multi-source feedback mechanisms to evaluate outcomes.

The education provider has mechanisms in place to obtain feedback from both employers and graduates.

6.3 Feedback and Reporting

6.3.1 The education provider reports the results of outcome evaluation through its internal governance, management and administration structures and to teachers and program students.

Standards 7 - Program students

7.1   Admission policy and selection

7.1.1   The education provider clearly states the principles to underpin the selection process.

7.1.2   The education provider uses processes for selection into the program that:

- are based on the published criteria and the principles of the education provider concerned

- are evaluated with respect to validity, reliability and feasibility

- are transparent and fair

- are capable of standing up to external scrutiny

- include a formal process for review of decisions in relation to selection with information on this process available to candidates prior to the selection process.

7.1.3   The education provider documents and publishes its selection criteria.

7.2   Program student participation

7.2.1   The education provider has formal processes and structures that facilitate and support the involvement of program students in governance of the program within the constraints of the program being of limited duration.

Notes

The education provider considers pathways for program student participation including program student representation on curriculum committees or input into formal consultative process. The education provider ensures program students have ready access to conveners of components of the program and to administrative staff.

7.3   Communication with program students

7.3.1   The education provider has mechanisms to inform program students about the activities of its decision-making bodies.

7.3.2   The education provider provides clear and easily accessible information about the program, costs and requirements and any proposed changes.

7.3.3   The education provider provides timely and correct information to program students about their status in order to facilitate their progress through program requirements.

Notes

The education provider deals with program students in an open and transparent way. The education provider has mechanisms in place to inform prospective and enrolled program students of policies and processes, including (but not limited to):

- selection to the program

- the design, requirements and costs of the program

- proposed changes to the design, requirements and costs of the program

- institutional sources of guidance and support systems

- recognition of prior learning and flexible study options.

7.4 Resolution of problems and disputes

7.4.1 The education provider has reconsideration, review and appeals processes in place that allow program students to seek impartial review of assessment decisions, and makes its appeals policies publicly available.

7.4.2 The education provider evaluates de-identified appeals and complaints to determine if there is a systems problem.

Notes

The education provider ensures its processes for resolving problems and disputes encourage procedural fairness, transparency and credibility.

The education provider utilises a mix of members who are external to the education provider as well as impartial internal members when convening a review or appeals committee. The education provider publicises its grounds for review and/or appeal.

The education provider communicates its findings in a timely way to appellants and issues written reasons for its decisions.

Standard 8 - Educational resources

8.1 Physical facilities

8.1.1 The education provider, in recognising the centrality of optometrical equipment and technologies to optometric practice, ensures program students and staff have access to well-maintained physical facilities and equipment at its teaching and learning sites.

8.2 Information resources and library services

8.2.1 The education provider has information communication technology infrastructure and support systems sufficient to achieve the learning objectives of the program.

8.2.2 The education provider ensures program students have access to the information communication technology applications required to facilitate their learning in the clinical environment.

8.2.3 The education provider has library resources available to staff and program students including access to computer-based reference systems, support staff and a reference collection adequate to meet curriculum and research needs.

8.3 Clinical learning environment

8.3.1 The education provider ensures that the clinical learning environment, whether internally or externally located, offers program students comprehensive and varied

patient contact, and is appropriate to achieve the outcomes of the program and prepares graduates for ocular therapeutics practice.

8.4 Clinical supervision

8.4.1 The education provider informs clinical supervisors of their responsibilities, and monitors their performance.

8.4.2 The education provider ensures that there is an effective system of clinical supervision to ensure safe involvement of program students in clinical practice.

Notes

The education provider has mechanisms in place to ensure all external clinical placements provide services and teaching of an appropriate standard. The education provider defines the objectives and the assessment of all clinical placements and ensures both program students and supervising practitioners are aware of these. The education provider has an active relationship with the practitioners who provide program student instruction in external clinical settings demonstrated through regular meetings, and by visits to the sites by staff of the education provider. The education provider appropriately monitors the educational experiences of program students in the external clinical placements.