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Learning outcomes: Constructing a bridge between professional accreditation and higher education quality assurance requirements in health

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Learning & Teaching

Learning outcomes: Constructing a bridge between professional accreditation and higher education quality assurance requirements in health

Extension to strategic Priority Project *'Harmonising higher education and professional quality assurance processes for the assessment of learning outcomes'*

Extension report 2015

Lead institution

The University of Adelaide

Partner institutions

Griffith University, Monash University, The University of Melbourne, The University of Queensland

Project leaders

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List of acronyms used

ADC	Australian Dental Council
ALTC	Australian Learning and Teaching Council
ALTF	Australian Learning and Teaching Fellows
AMC	Australian Medical Council
ANMAC	Australian Nursing and Midwifery Accreditation Council
AQF	Australian Qualifications Framework
IPL	Interprofessional learning
LTAS	Learning and Teaching Academic Standards
OLT	Office for Learning and Teaching
OSCE	Objective Structured Clinical Examination
TEQSA	Tertiary Education Quality and Services Agency
TLO	Threshold learning outcome

Executive Summary

The purpose of this extension to the project was to disseminate and build on the outcomes of the project *Harmonising higher education and professional quality assurance processes for the assessment of learning outcomes in health* (Harmonising project) completed in 2013. Specific project objectives were to:

- support the development of approaches to assessment of learning outcomes that are appropriate to individual disciplinary context and culture;
- pilot implementation of the Harmonising project Framework within a small number of institutions to test the utility of this approach in articulating specific course learning outcomes and in facilitating the collation of evidence of their achievement.

Qualitative evaluation of the utility of the Framework developed as a key outcome from the Harmonising project and based on threshold learning outcomes (TLOs) in institutional trials indicated that it was a useful framework to support higher education healthcare professionals in the documentation of learning outcomes, and for incorporating professional accreditation and Australian Qualifications Framework (AQF) standards into assessment mapping.

Additionally, the Harmonising project Framework provides a springboard for progressing the Interprofessional Learning (IPL) agenda around curriculum development and renewal in the context that Interprofessional Learning activities are based on common standards (namely TLOs). Discussion with representatives within the Australian higher education healthcare sector as part of the activities of this project has identified many possibilities for using this framework to further develop IPL initiatives.

Linkages with other OLT funded projects enabled through this extension to the grant have been created ensuring ongoing activities and use of the Framework. Associated with this is a renewed commitment to effective and considered benchmarking of assessment practices in some disciplines. The project team recommends further work in this area.

Contents

List of acronyms used	3
Executive Summary	4
1. Introduction.....	6
2. Dissemination	7
3. Summary of outcomes and achievements.....	11
4. References	12
5. Appendices	13
6. Certification	19

1. Introduction

This document provides a brief report on an extension to the project *Harmonising higher education and professional quality assurance processes for the assessment of learning outcomes in health* (Harmonising project) completed in 2013. The primary purpose of the project extension activities was to disseminate and build on the Harmonising project outcomes achieved throughout 2011-2013.

This report documents the dissemination activities that were undertaken, outcomes achieved and consider some future directions. Project activities primarily related to the demonstration disciplines identified for the Harmonising project (dentistry, medicine, midwifery, nursing and physiotherapy).

1.1 Project context

As the higher education standards environment evolves it is important that disciplinary academics continue to engage with, and contribute to, processes around the development of standards-related policy and practice. The extension activities are an important follow-on to the ALTC LTAS demonstration project in health, medicine and veterinary science (Health) (O’Keefe, Henderson & Pitt, 2011, O’Keefe, Henderson & Pitt, 2013) and more recently, the Harmonising project (O’Keefe, Henderson *et al.*, 2014a).

A major outcome of the Harmonising project was the practical application of the Threshold Learning Outcomes (TLO) to support nationally consistent identification and assessment of learning outcomes across health disciplines. A unifying framework (the Framework) to facilitate a common approach for reporting the scope and level of student achievement across AQF dimensions and professional accreditation expectations was developed based on the threshold learning outcomes. It was envisaged that this framework could then be used to simultaneously demonstrate compliance with accreditation, registration and higher education quality assurance requirements (O’Keefe, Henderson *et al.*, 2014b).

The Framework is based on the six threshold learning outcomes in health (O’Keefe, Henderson & Pitt, 2011) and acknowledges the importance of the following assessment principles in relation to academic standards and professional accreditation expectations.

Assessment program development should be guided by:

- the use of blueprints/mapping that clearly articulate the relationship between the learning outcomes and the assessment strategies;
- a combination of multiple assessment modes including direct observation;
- emphasis on criterion-referenced assessments;
- authentic, valid and reliable assessment methods;
- the use of expert assessors who have participated in some form of calibration process;
- clearly articulated standards for individual or combined assessments using appropriate methods (O’Keefe, Henderson *et al.*, 2014a, pp21).

A guide to support implementation of this framework was also developed providing information to assist disciplines to embed the TLOs into existing course and program organisation and documentation (O’Keefe, Henderson *et al.*, 2014b).

1.2 Project aims

With a focus on intended adoption and strategic change, the overarching aim of the extension activities was to disseminate and build on the outcomes of the Harmonising project. It was intended also to support the development of approaches to assessment of learning outcomes that are appropriate to individual disciplinary context and culture. In addition to this broader context, a specific aim was to pilot implementation of the Harmonising project Framework within a small number of institutions to test the utility of this approach in articulating specific course learning outcomes and in facilitating the collation of evidence of their achievement at institutional level. Dissemination activities primarily related to the demonstration disciplines identified for the Harmonising project (nursing, midwifery, dentistry, medicine and physiotherapy).

1.3 Project methodology

The extension activities were carried out over a period of 12 months. Specific activities included a series of presentations, workshops and meetings with academic representatives in healthcare, preparation of scholarly works and dissemination and promotion of the Framework and guide produced as part of the activities of the Harmonising project. These are described in more detail in the subsequent section on dissemination.

2. Dissemination

2.1 Outcomes reporting and end user engagement

Representatives of Councils of Deans and Accreditation Councils associated with each of the demonstration disciplines identified for the Harmonising project were invited to meetings, with the aim of reporting on project outcomes and to discuss potential implementation of the TLOs as a framework for assessment and streamlining of quality assurance processes.

2.2 Discipline network briefings

Participants involved in activities as part of the Harmonising project who were interested in further engagement were invited to join a discipline-specific interest group (network). The aim of these networks promoting wider engagement between academic healthcare representatives. By way of maintaining and fostering these five discipline networks of teaching academics a state based series of seminars was presented to each group on findings and outcomes of the Harmonising project, along with further exploration of the utility of the Framework. These meetings were held in Brisbane, Sydney and Adelaide between July and September 2013 (Appendix 1).

2.3 Institutional trials

Involving consultation and collaboration across two institutions, these trials incorporated discussion of potential approaches to using the TLOs, in addition to the AQF and professional accreditation standards, as key reference points in articulating specific course learning outcomes. In addition, the utility of the Harmonising project Framework (O’Keefe, Henderson *et al.*, 2014b) in facilitating the collation of evidence of achievement of course learning outcomes was explored.

The institutional trials were designed as workshops, conducted in two parts (sessions) for each institution. In institution 1 the primary focus was on a single discipline (Nursing) and in institution 2 the project team worked with academic representatives in a multidisciplinary health faculty (including in alia dentistry, medicine, nursing and physiotherapy). For both institutions, the workshops were well attended (Appendix 1) and incorporated discussion and informal interactions with staff about specific concerns within their teaching, learning and assessment responsibilities.

Workshop Session 1. Overview of Harmonising project, current status of teaching and assessment

This session incorporated a brief overview of the Harmonising project (Appendix 3), followed by an exploration of the current status of curriculum, teaching approaches and assessment and potential for change. This session also included interactive exploration of key challenges in documenting student achievement of learning outcomes and was video linked to satellite sites.

In these sessions participants found it useful to discuss the background to the Harmonising project by outlining the TLOs, the national learning and teaching agenda at the time that the TLOs were developed, and subsequent developments in the higher education space since the development of the TLOs. This presentation outlined the TLOs and the broad consultation that took place indicating that they were a robust representation across health of those domains important for student learning outcomes.

As a number of participants at each workshop were directly involved in the submission of documents for accreditation they were interested in exploring the challenges encountered and suggestions for more aligned processes identified through the Harmonising project. The Framework developed as a key outcome from the Harmonising project was seen as a useful mechanism for the documentation of learning outcomes. Participants agreed that its utility lay in its potential for transparent documentation and organisation of information for accreditation bodies and higher education quality assurance including relatively easily locating assessments activities according to relevant AQF standards.

Workshop Session 2. Utility of TLOs, Interprofessional Learning (IPL) activities based on common learning outcomes and standards

The second session focussed on requirements and current issues around dual reporting (to accreditation councils and higher education bodies such as the Tertiary Education Quality and Standards Agency (TEQSA)), the utility of TLOs, and for institution 2 the notion that common learning outcomes and standards could provide a

firm basis for IPL curriculum development. This session was also video linked to satellite sites.

For institution 1, this session focused specifically on the information required by the accreditation body for the nursing programs and the need for transparent processes to demonstrate that appropriate AQF requirements in relation to learning outcomes had been met. Consequently, discussion was focused on criterion-referenced assessment, i.e. what criteria, and also assessment strategies and tools rather than the reporting requirements.

Participants agreed that the TLOs were useful because they were not prescriptive; but rather an umbrella for the diverse assessment activities that students engaged in, for example OSCEs, portfolios, poster presentations, video vignettes, essays and examinations. The strong links with industry were emphasised as being important for the applicability of the assessments. This was enabled because service-learning agreements encouraged reciprocal learning that is of mutual benefit to both student and to clinical service in the community. An agreed activity with the clinical service was a component of the assessment of the clinical practicum in the final year of the nursing program (for registration). Participants described their current assessment arrangements, subsequently drawing on the TLOs to organise the evidence for student attainment of the requisite standard/s.

Discussion at institution 1 also focussed on student performance and its reliable measurement across multiple clinicians in the practice settings. Despite good relationships and agreements, clinical placement supervisors are always keen to have more information about behavioural markers against which they should be assessing students. Presently institution 1 does not have a universal tool that it uses across all of its facilities that provides a standard measure for guidance for student assessment of clinical practice. Participants could see the value of using performance indicators and/or behavioural cues, and this work they would see progressed in conjunction with the clinical facilities.

A diverse group of academic staff from across the university attended the second session at institution 2. All were involved in processes associated with demonstrating and documenting that the requisite teaching and learning standards for their discipline had been met. There was considerable value in this diverse group as many of the issues that arise are not specific to health.

The participants also included staff who were directly involved in teaching, learning and assessment activities. This session had a different focus from previous sessions in that it was an exploration of the utility of the TLOs. The diversity present in the workshop participants greatly enhanced the range of possible applications of the TLOs and the framework to further develop IPL initiatives. Possibilities about common frameworks and criteria for assessment were also discussed. Some of the participants at institution 2 were already using TLOs as a reference point in curriculum development and assessment mapping and reported that the Framework was of great assistance in these processes.

Summary of session discussion

Participants raised the following key issues during session discussion:

- There are real challenges associated with justifying achievement of the requisite AQF level in health due to the complexity of clinical practice;
- Participants agreed that using TLOs as a framework for incorporating professional accreditation and AQF standards into assessment mapping was "a great framework which will be very helpful";
- IPL should be transferrable and not rely on who (which disciplines) are participating. The learning outcomes are then critical, hence TLOs are valuable.

Staff who participated in the workshops at institution 2 had a higher level of background knowledge and were therefore better prepared to actively contribute and debate the issues that arose. They had been given specific information about the content and what could be achieved through their participation in the workshops. Arriving with an increased level of preparedness assisted them to 'take something with them that was directly related to their business'. While participants from institution 1 enjoyed participating and found the discussion useful to a broad understanding of the learning outcomes, they were not able to specifically differentiate the value to their designated responsibilities. With this site (institution 1) we indicated that we were happy to communicate further with them if further questions arose following our visit. At institution 2 the participants were all familiar with the AQF, for many of them demonstrating compliance with AQF and documentation of learning outcomes was a core part of their business. At institution 2 participants were involved in a university wide initiative, and collaborated regularly around the issues that they were facing, and were therefore appreciative of different perspectives and also validation of the issues that they were facing.

Differences between the two university sites were apparent. It was observed that where there was a strong focus on making a virtue out of compliance and a 'we can do it' attitude, there was potential for greater momentum around the process of articulating and assessing learning outcomes. Additionally, the attendees at institution 2 were multi-disciplinary including non-health; there were already established processes for them to raise and share their issues about how best to address the standards required for learning and teaching and demonstrating attainment of learning outcomes. The individuals involved in the workshops were very active in this space. Discussions were very frank and honest about the realities of the challenges in meeting the requirements. A sense of sharing the challenges was reassuring to participants that they were not alone. This is especially important for those university staff who are situated regionally or remotely. The support from interested parties, structure and processes from the senior staff of institution 2 was excellent. Specific resources had been quarantined to assist staff and this was seen as very valuable.

Throughout the project, and as evidenced in these workshops, it was apparent that individual institutions carry a unique combination of staff attitudes, practices and processes in reporting and assessment of learning outcomes. The 'broad spectrum' nature of the Framework is therefore valuable as it allows for these differences between individual institutions with no loss of utility, and it is gratifying to see firsthand that the Framework is already assisting healthcare educators in meeting assessment and accreditation reporting requirements and in curriculum development.

2.4 Dissemination and promotion of Framework and guide

The final report, resource and guide were distributed widely to councils of deans, accreditation councils, discipline network members, Australian Learning and Teaching Fellows (ALTF) and discipline scholar networks, including selected recipients in the wider healthcare academic community.

Additionally, three papers drawing on outcomes of the Harmonising project have been drafted for publication:

- *Harmonising professional accreditation and higher education quality assurance processes in health care disciplines: the emerging primacy of learning outcomes in higher education quality assurance vs. existing approaches to accreditation;*
- *Interprofessional education: academic quality at what cost?*
- *Engaging with higher education quality assurance: stories from the coalface.*

Outcomes of the Harmonising project were also presented at *Collaborating Across Borders IV* in Vancouver, June 2013 (the presentation can be accessed here: <http://cabiv.ca/PDF/H10i.pdf>).

3. Summary of outcomes and achievements

3.1 Project outcomes

The additional dissemination activities of the Harmonising project have created a number of new and exciting national collaboration opportunities.

The relevance of the Harmonising project Framework for progressing the IPL agenda has been appreciated widely across a number of Australian universities in curriculum development and renewal (personal communications), facilitating cross-disciplinary sharing of teaching, learning and assessment tool development.

Robust dialogue is continuing in many forums as a result of this project. Although currently this discussion is still predominantly focussed on understanding the relevant issues in relation to clinical assessment across different health disciplines, the scene is set for national coordinated activity. Associated with this is a renewed commitment to effective and considered benchmarking in some disciplines. The project team recommends further work in this area.

Linkages with other OLT funded projects have been created and have ensured ongoing activities and use of the Framework. This includes the following:

- 'Collaborating across boundaries: a framework for an integrated interprofessional curriculum', M. O'Keefe, 2013 OLT National Teaching Fellowship;
- 'Developing a national approach to interprofessional education across all Australian health professions', R Dunston, 2013 OLT Extension Grant;
- 'A clinical assessment tool (CAT) for the Bachelor of Nursing: Dissemination of Tool and Benchmarking of Learning Outcomes', A. Henderson, 2013 OLT Extension Grant.

3.2 General lessons learned

Given the currently changing environment around higher education standards we have found it to be of great advantage to maintain ongoing communication with the participants of the project from the point of view of information sharing, both in the context of broader activities and change within the sector, as well as those within this project. This has resulted in increased interest and momentum around project activities and their applicability to individual institutions. As we found during the Harmonising project, the interest and willingness of participants to engage in extension activities has demonstrated that this work is of tangible benefit and value to the sector.

It has been important to plan ahead in getting healthcare professionals together, in order to overcome difficulties around time constraints of participants. We have found face-to-face engagement is particularly useful in communicating with both the project participants as well as the project team to facilitate discussion in nature that is otherwise not easily achieved via teleconference or email.

4. References

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5. Appendices

5.1 Appendix 1- Meetings held throughout 2013/14 for dissemination activities of Harmonising project

Date/s of the event	Event title, Location	Brief description of the purpose of the event	Number of participants
27-Jun-13	Meeting via teleconference with representatives of institution 1	Meeting to discuss work plan /strategy for institutional trial	3
11-Jul-13	Discipline Network briefing, Brisbane	To report on final outcomes of the Harmonising project	6
06-Aug-13	Discipline Network briefing, Sydney	To report on final outcomes of the Harmonising project	5
20-Aug-13	Discipline Network briefing, Adelaide	To report on final outcomes of the Harmonising project	6
12-Sept-13	Meeting with ANMAC, Canberra	To report on final outcomes of the Harmonising project	3
15-Aug-13	Institution 1 (workshops)	Exploration of utility of Harmonising project Framework	16
29/30-Aug-13	Institution 2 (workshops)	Exploration of utility of Harmonising project Framework	24
12-Sept-13	Meeting with AMC, Canberra	To report on final outcomes of the Harmonising project	4
09-Oct-13	Meeting via teleconference with ADC	To report on final outcomes of the Harmonising project	5
17-Sep-13	Project team meeting via teleconference	To discuss project activities	3
31-Oct-13	Project team writing retreat, Sydney	Preparation of scholarly papers	6
28-Feb-14	Project team meeting, Melbourne	To discuss advancement of scholarly papers and final report	6

5.2 Appendix 2- Presentation to discipline briefing meetings

Harmonising higher education
and professional accreditation processes
for the assessment of learning outcomes
in health

Harmonising project discipline workshops 2013

ALTC Learning and Teaching Academic
Standards (LTAS) Project 2010

Academic standards expressed as threshold
learning outcomes that a graduate of any
given discipline must have achieved

Harmonising project discipline workshops 2013

Identifying common learning outcomes in health

LTAS Health, Medicine and Veterinary Science

- 26 healthcare disciplines
- 950 academic leaders
- 70 councils and professional bodies

Professional accreditation standards grouped
into common content domains

Six threshold learning outcomes identified

Harmonising project discipline workshops 2013

Threshold Learning Outcomes (Health)

Upon completion of their program of study, health graduates at professional
entry level* will be able to:

- Demonstrate professional behaviours
- Assess individual and population health status and, where necessary, formulate and implement management plans in consultation with patients/clients/carers/animal owners
- Promote and optimise the health and welfare of patients/clients and populations
- Retrieve, critically evaluate, and apply evidence in the performance of health care activities
- Deliver safe and effective collaborative health
- Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development activities

(* as defined by individual disciplines)

Harmonising project discipline workshops 2013

Value of articulating common graduate learning outcomes

Sector wide dialogue drawing on disciplinary diversity and good practice

Link between professional accreditation and academic standards

Common framework across health

Harmonising project discipline workshops 2013

After LTAS: Harmonising project

Maree O'Keefe, Amanda Henderson

The University of Adelaide

Brian Jolly, Lindy McAllister, Louisa Remedios,
Rebecca Chick

Supported by the ALTC/OLT

Harmonising project discipline workshops 2013

Harmonising Project

Develop a framework to support reporting requirements for professional accreditation and higher education quality assurance agencies

- A single point of documentation and record keeping for accreditation and TEQSA
- A visible and transparent examination of the curriculum to assist curriculum renewal

Harmonising project discipline workshops 2013

Part one: Discipline workshops

Consider learning outcomes, professional accreditation requirements and the AQF within existing programs

Review common assessment approaches and identify key assessment principles

Explore options for streamlining institutional reporting requirements for accreditation and higher education QA processes

Harmonising project discipline workshops 2013

Workshop	Participants	Higher education institutions represented	Other institutions represented
Physiotherapy	16	11	1
Dentistry and Oral Health	16	9	2
Medicine	21	14	2
Nursing and Midwifery	16	11	1

Harmonising project discipline workshops 2013

Part two: Case Studies

Explore utility of threshold learning outcomes as a framework for reporting scope and level of student achievement

Discussion paper

Harmonising project discipline workshops 2013

Discipline	AQF levels represented
Dentistry	7, 9
Medicine (2 case studies)	7, 9E
Midwifery	7
Nursing	7, 9
Physiotherapy (3 case studies)	7, 9, 9E

Harmonising project discipline workshops 2013

Case Study: Discussion prompts

Where are learning outcomes assessed?

What assessment tools/approaches are used?

What does the data set look like?

How is the standard determined?

How do existing learning outcomes match the AQF?

How could reporting be streamlined?

Harmonising project discipline workshops 2013

Summary of Key Findings

Highly variable evidence of learning outcomes
Multiple learning outcomes assessed concurrently
Some learning outcomes require aggregates of individual component assessment items and multiple sampling

Harmonising project discipline workshops 2013

Summary of Key Findings (continued)

Preference for reporting evidence against aggregated learning outcomes such as threshold learning outcomes rather than as individual competencies

Harmonising project discipline workshops 2013

National Forum

50 health discipline leaders and representatives from accreditation councils, councils of deans, TEQSA, HESP, OLT and the AQF Council.

Consensus on:

- Accreditation councils have a distinct role in the assessment and monitoring of academic standards.
- Professional accreditation requirements can be better aligned with higher education academic standards.

Harmonising project discipline workshops 2013

National Forum (Cont)

- AQF criteria and naming conventions of entry-level professional qualifications should remain diverse
- An overarching framework or template could assist universities to provide information effectively and efficiently that meets the requirements of TEQSA and accreditation councils.
- Governance structures and standardised processes can help establish common assessment and reporting pathways.

Harmonising project discipline workshops 2013

Framework

A framework for incorporating professional accreditation and AQF standards into assessment blueprinting/mapping in healthcare disciplines

Harmonising project discipline workshops 2013

Threshold learning outcome Retrieve, critically evaluate, and apply evidence in the performance of health-related activities	AQF level			
	Assessment tasks			
Discipline accreditation standard	Literature review	SAQ	Research project	Clinical case study
Practice evidence-based dentistry	9	7	LONA	9
Evaluate and integrate emerging trends in healthcare as appropriate	7	7	9	9
Formulate treatment plans that integrate research outcomes with clinical expertise and patient views	LONA	9	LONA	9

Harmonising project discipline workshops 2013

6. Certification

Certification by Project Leader

I certify that this is an accurate representation of the progress of the project.

Project Leader: Professor Maree O'Keefe

Signature:



Date: 10/4/14

Certification by DVC/PVC (Academic), or equivalent, or their official delegate

I acknowledge submission of the Progress Report.

Full name: Professor Denise Kirkpatrick

Position: Pro Vice-Chancellor (Student Experience)

Signature:



Date: 05.05.14