

Western Herbal Medicine Education Accreditation Standards

Contents

Western Herbal Medicine Education Accreditation Standards	1
Western herbal medicine education in Australia	2
Western herbal medicine course accreditation.....	2
Higher degree regulation in Australia.....	2
Background to the Western Herbal Medicine Course Accreditation Standards	3
Purpose of the ARONAH accreditation process.....	4
Using the Western Herbal Medicine Accreditation Standards.....	4
Standards for accreditation of Western herbal medicine courses.....	5
Standard 1: Governance	6
Criteria	6
Standard 2: Informed scholarship and research capacity	7
Criteria	7
Standard 3: Curriculum conceptual framework	8
Criteria	8
Standard 4: Program Development and Structure	9
Standard 5: Program Content	10
Criteria	10
Standard 6: Student Assessment	12
Criteria	12
Standard 7: Students.....	13
Criteria	13
Standard 8: Resources	14
Criteria	14
Standard 9: Management of Clinical Experience.....	16
Criteria	16
Standard 10: Quality Improvement and Risk Management	18
Criteria	18

Western herbal medicine education in Australia

Programs of study eligible for accreditation with the Australian Register of Naturopaths and Herbalists (ARONAH) are delivered by a government accredited university or higher education provider and lead to the award of a Bachelor or Masters degree in Western herbal medicine, or equivalent nomenclature.

The Australian regulatory environment in which programs of study are accredited and delivered has undergone significant change in the past few years. Higher education regulation and quality assurance have also undergone major transformation. Further, national reforms in health policy, governance and funding are being implemented and may have further implications for Western herbal medicine education. These changes form the basis for reviewing and updating the Western herbal medicine Education Accreditation Standards contained in this document.

Western herbal medicine course accreditation

Professional education accreditation is concerned with the quality of the profession and its work, from the perspective of the public interest and community safety. It is part of a broader process of assuring the community that, having completed an accredited program of study, beginning professional practitioners have achieved agreed professional outcomes and are able to practise in a safe and competent manner equipped with the necessary foundation knowledge, professional attitudes and essential skills. This process itself however, relies on two fundamental principles:

1. That the education providers themselves are authorised to issue the relevant qualification and are evaluated to assure continued quality learning outcomes for their graduates.
2. That there exists a set of agreed and contemporary competency standards for the profession, against which the capability of intending graduates of entry to practice programs can be assessed.

In the case of Western herbal medicine, ARONAH has developed the Competency Standards for Western Herbal Medicine Practitioners. These Standards articulate the core competencies used to assess the performance of those wanting to obtain and retain membership with ARONAH as a Western herbal medicine practitioner. They are also used by higher education providers when developing Western herbal medicine curricula and assessing student performance.

The accreditation process administered by ARONAH is an efficient and effective proxy for externally assessing each graduate against relevant competency standards. Professional course accreditation must ensure that professional standards are protected without inhibiting diversity and innovation or constraining continuous quality improvement. As with the Competency Standards for Western Herbal Medicine Practitioners, the Western Herbal Medicine Education Accreditation Standards are regularly reviewed to ensure relevance in the light of pertinent changes in health and education legislation, policy, delivery and ethos.

Higher degree regulation in Australia

On 12 May 2011 the Government announced the establishment of an independent national body to regulate and assure the quality of all types of higher education. The Tertiary Education Quality and Standards Agency (TEQSA) started on 1 July 2011 to fulfil the Government's commitment to accredit providers, evaluate the performance of institutions and programs, encourage best practice, simplify current regulatory arrangements and provide greater national consistency.

The Government also committed to ensuring that growth in the higher education sector would be underpinned by a robust quality assurance and regulatory framework, which would

renew emphasis on student outcomes and the quality of the student experience. TEQSA will evaluate the performance of universities and other higher education providers every five years, or when there is evidence standards are not being met. As a consequence, all higher education institutions offering degree programs in Western herbal medicine will be regulated and accredited by TEQSA.

One of TEQSA's first tasks was to review the National Protocols for Higher Education Approval Processes. After reviewing this assurance framework, TEQSA prepared the draft Higher Education Standards Framework and consulted widely on it in 2011. The resulting Threshold Standards (comprising the Provider and Qualification Standards), passed into legislation on 4 January 2012. They apply to all higher education providers offering Level 5 (diploma) to Level 10 (doctoral) qualifications as described in the Australian Qualifications Framework. The Teaching & Learning, Research and Information Standards are still to be developed and, when finalised, may have further implications for the Western Herbal Medicine Program Accreditation Standards. Another government initiative arising from the Bradley Review was the publication of the revised Australian Qualifications Framework (July 2011). The framework (AQF) is the national policy for regulated qualifications in Australian education and training. It incorporates the qualifications from each education and training sector into one comprehensive framework comprising 10 levels of qualification (from certificates to doctoral degrees), with a bachelor degree sitting at Level 7.

The AQF stipulates the learning outcomes expected within each level of education in relation to knowledge, skills and the application of both. This is to ensure the integrity of qualifications and standardisation across education providers, settings and delivery modes. All institutions offering entry to practice Western herbal medicine programs are required to comply with the new AQF criteria for learning outcomes. The Register of AQF Qualifications and Authorised Issuing Organisations, lists all qualifications and the organisations authorised to issue them.

[Background to the Western Herbal Medicine Course Accreditation Standards](#)

This sets forth ARONAH's accreditation standards, which are at the heart of the ARONAH recognition process. These standards were developed by the ARONAH Board based on benchmarking with primary care professions in Australia and Western herbal medicine education standards internationally and reflect a consensus amongst the Board regarding the content, characteristics and resources of a Western herbal medicine program necessary for:

1. graduating safe and effective practitioners capable of working within the broader context of the Australian healthcare systems, and
2. achieving its educational mission and objectives.

In order to achieve candidacy and accreditation, a Western herbal medicine program must: demonstrate compliance with ARONAH's accreditation standards and policies; a program that achieves candidacy or accreditation is responsible for maintaining ongoing compliance with the standards and policies. The Board commits to a comprehensive review of the accreditation standards every 5 years to ensure that they continue to foster high quality in Western herbal medicine education, reflect the evolving needs of the field and the broader healthcare system, and comply with the requirements of TEQSA. The next comprehensive review of the standards is scheduled for 2020.

ARONAH also reviews individual standards whenever circumstances may necessitate such a review. The Board welcomes suggestion for improving its accreditation standards and policies.

Purpose of the ARONAH accreditation process

The purpose of the ARONAH accreditation process is to ensure the quality of the profession and its work on behalf of public interest and public safety. The public needs to know that higher education providers of Western herbal medicine programs produce graduates who are competent to practise safely and effectively.

The education provider is to ensure graduates have the required common and transferable skills, knowledge, behaviours and attitudes (articulated in the Competency Standards for Western Herbal Medicine Practitioners) upon which to build the competencies they need to practice. Accreditation evaluates whether the provider, on the basis of the evidence provided, is likely to meet this goal.

Professional course accreditation is concerned with the quality of the profession and its work, from the perspective of the public interest and public safety. This is contrasted with accreditation (or similar assessment) of a higher education provider (the provider of professional education) by TEQSA for purposes of quality assurance and risk management. However, under this framework, such accreditation or quality assurance of higher education providers is a pre-requisite for accrediting programs of Western herbal medicine study by ARONAH.

External professional (or occupational) accreditation helps assure the community that individual professionals, having completed an accredited program of study, are safe and competent beginning practitioners. It is an efficient and effective proxy for assessing every graduate against the Competency Standards for Western Herbal Medicine Practitioners. Accreditation therefore involves comprehensively examining the higher education provider's governance system and quality management framework; student enrolment processes, student support, assessment and workplace experience; curriculum philosophy, curriculum structure and content; and teaching and learning approaches.

Periodic accreditation of Western herbal medicine programs stimulates education providers to review and assess their own programs. It draws out weaknesses and gives providers the opportunity to validate the strengths of existing programs and introduce new teaching and learning initiatives. The ARONAH Western herbal medicine program accreditation process supports diversity, innovation and evolution in approaches to education. The standards therefore do not prescribe the content of curricula, the inclusion of core subjects or the educational approaches required to deliver the study program

Using the Western Herbal Medicine Accreditation Standards

The Western Herbal Medicine Accreditation Standards are designed principally for use by higher education providers seeking accreditation of an entry to practice program of Western herbal medicine study. ARONAH assessment teams evaluate programs in accordance with these standards and make recommendations to the ARONAH Board for decision. While the standards are principally for use by higher education providers, they are also useful for anyone interested and involved in the education of Western herbal medicine practitioners.

Higher education providers seeking accreditation have to complete an application pack (available at www.aronah.org.au). The pack includes the Western Herbal Medicine Accreditation Standards and relevant guidance on addressing them. The guidance is regularly reviewed and updated to assist education providers prepare their submissions.

Standards for accreditation of Western herbal medicine courses

This document describes the requirements of ARONAH for the accreditation of courses intended to qualify graduates for registration for the practice of Western herbal medicine.

It also provides guidance on the documentation that should be submitted by the provider educational Institution seeking accreditation of a Western herbal medicine course. The application/submission should be structured to address each of the standards for accreditation in turn.

The suggested documentation is for guidance. It is for the Institution applying for accreditation to show that each standard is met and to decide on the information to be included in the main text of the application and the supporting documents necessary to do this. However, if the assessment team believes the documentation is inadequate a revised submission may be requested and accreditation will not proceed until suitable documentation is received. Documentation that does not bear directly on a standard or provides excessive detail should not be included. The sources of copies of supporting documents must be clearly identified. In the event that an institution is found to not meet all of the requirements of accreditation by the Board, conditional accreditation may be granted. Institutions offered conditional accreditation will be required to submit a detailed plan outlining the process through which they will address the identified areas of concern. The duration, conditions and requirements of conditional accreditation will be determined by the Board on a case-by-case basis.

It is expected that the documentation will be provided in a ring binder with page numbers, index separators and a contents page to assist the assessment team find information quickly. Long supporting documents (such as staff curriculum vitae and subject/unit guides) should be in appendices or a separate folder. Booklets and brochures should be in a pocket attached to the ring folder if they are not suitable for ring binding.

Standard 1: Governance

The course is provided by a university or higher education provider registered by the Tertiary Education Quality and Standards Agency (TEQSA), which can provide the resources and the scholarly context that will ensure effective learning. The education provider has established governance arrangements for the program of study that develop and deliver a sustainable, high-quality education experience for students, to enable them to meet the Competency Standards for Western Herbal Medicine Practitioners.

Criteria

The education provider must provide evidence of:

- 1.1 Current registration by the TEQSA as an Australian university or other higher education provider
- 1.2 Current accreditation of the program of study by the university (or TEQSA for non-self-accrediting higher education providers) detailing the expiry date and recommendations, conditions and progress reports related to the department.
- 1.3 Sufficiency of resources to carry out the program's mission and educational objectives current, short and long term, including appointment of a qualified business manager or chief financial officer
- 1.4 Listing on the Australian Qualifications Framework (AQF) National Registry for the award of Bachelor degree as a minimum.
- 1.5 Current, documented academic governance structure for the university (or other higher education provider) and the Faculty, Department or Division conducting the program which ensures academic oversight of the program and promotes high-quality teaching and learning, scholarship, research and ongoing evaluation.
- 1.6 Terms of reference for relevant department committees and advisory and/or consultative groups.
- 1.7 Staff delegations, reporting relationships, and the role of persons or committees in decision making related to the program, including title, name and qualifications of the Dean or Head of that Faculty, Department or Division.
- 1.8 Governance arrangement between the university or higher education provider and the department that ensures responsiveness to accreditation requirements for ongoing compliance with accreditation standards.
- 1.9 Policies relating to credit transfer or the recognition of prior learning that are consistent with AQF national principles and the graduate's ability to meet the Competency Standards for the professional category.
- 1.10 Policies and procedures regarding human resources that include procedure for evaluating the performance of administrative staff on a regular basis, a grievance policy for employees, and non-discrimination and equal opportunity policies.
- 1.11 Statement of the campus or campuses on which the course is provided.
- 1.12 The annual report of the university or higher education provider and/or other appropriate publications that provide information on the nature, resources and standing of the provider institution.

Standard 2: Informed scholarship and research capacity

The course is taught in the institutional context of sustained scholarship, which informs teaching and learning in Western herbal medicine and ensures that students understand the process of research and the importance of evidence to inform theory and practice and are able to critique and evaluate new and established ideas and concepts

Criteria

- 2.1 Annual report of scholarly activity of the university or higher education providers. The documentation should indicate any involvement with, or impact on, students from within the Western herbal medicine program.
- 2.2 Current, documented research projects including details of principal researchers and explanatory title for each project being pursued by staff and higher research degree students (as appropriate) in the academic unit that has primary responsibility for teaching the Western herbal medicine program.
- 2.3 Research funding awarded over the last 3 years to staff in the academic unit that has primary responsibility for teaching the Western herbal medicine course.
- 2.4 Peer-reviewed publications produced in the last 6 years by the academic staff of the academic unit that has primary responsibility for teaching the Western herbal medicine course.
- 2.5 For new courses, an institutional strategic plan outlining initiatives and infrastructure which ensures capacity for significant research and scholarly enquiry within the department that has primary responsibility for teaching the Western herbal medicine program.
- 2.6 Position descriptions and recruitment policies for academic staff outlining the requirement for scholarly activity.
- 2.7 Learning outcomes within the program/s include key elements associated with critical analysis of scientific research and its evaluation.

Standard 3: Curriculum conceptual framework

The program provider makes explicit, and uses a contemporary conceptual framework for the Western herbal medicine program of study that encompasses the educational philosophy underpinning design and delivery. The philosophical approach to professional Western herbal medicine practice is consistent with the Competency Standards and provide the necessary knowledge and skills for the safe and effective practice of Western herbal medicine. The statement of the goals of the course is made known to students and teaching staff by its publication in course handbooks and guides that are read by students.

Criteria

The program provider demonstrates:

- 3.1 A clearly documented and explained conceptual framework for the educational and clinical training program, including the educational and professional Western herbal medicine philosophies underpinning its curriculum.
- 3.2 The incorporation of contemporary Australian and international best practice teaching, learning and assessment methodologies and technologies to enhance the delivery of curriculum content, stimulate student engagement and promote understanding.
- 3.3 A program of study that is congruent with contemporary and evidence-based approaches to professional Western herbal medicine practice and education.
- 3.4 Teaching and learning approaches that:
 - a) Enable achievement of stated learning outcomes
 - b) Facilitate the integration of theory and practice
 - c) Scaffold learning appropriately throughout the program
 - d) Encourage the application of critical thinking frameworks and problem-solving skills
 - e) Engender deep rather than surface learning
 - f) Encourage students to become self-directed learners
 - g) Embed recognition that graduates take professional responsibility for continuing competence and life-long learning
 - h) Instil students with the desire and capacity to continue to use, and learn from, emerging research throughout their careers
 - i) Promote emotional intelligence, communication, collaboration, cultural safety, ethical practice and leadership skills expected of Western herbal medicine
 - j) Incorporate an understanding of, and engagement with, intraprofessional and interprofessional learning for collaborative practice.

Standard 4: Program Development and Structure

The program of study is developed in collaboration with key stakeholders reflecting contemporary trends in Western herbal medicine education; complying in length and structure with the Australian Qualifications Framework (AQF) for the qualification offered and enabling graduates to meet the Competency Standards for Western Herbal Medicine Practitioners. Supervised clinical practicum is sufficient to enable safe and competent Western herbal medicine practice by program completion.

Criteria

The program provider demonstrates:

- 4.1 A clear, concise and realistic mission statement for the educational and clinical training program that identifies what the program intends to accomplish, and encompasses the educational preparation of Western herbal medicine practitioners
- 4.2 A set of programmatic objectives that are consistent with the mission and address instruction, research/scholarship and service, which is used to guide the program in establishing specific learning outcomes for students in the program.
- 4.3 Consultative and collaborative approaches to curriculum design and program organisation between academic staff, those working in health disciplines, students, consumers and other key stakeholders
- 4.4 Contemporary Western herbal medicine practice in the development and design of curriculum
- 4.5 A map of subjects against the Competency Standards relevant to the professional qualification which clearly identifies the links between learning outcomes, assessments and required graduate competencies
- 4.6 Descriptions of the curriculum content and the rationale for its extent, depth and sequencing in relation to the knowledge, skills and behaviours expected of students at each stage of the program
- 4.7 Opportunities for student interaction with other health professionals to support understanding of the multi-professional health care environment and facilitate interprofessional learning for collaborative practice
- 4.8 A minimum of 400 hours of supervised naturopathic clinical experience with at least 60% of those hours providing care as the primary clinician, not inclusive of simulation activities, incorporated into the program and providing exposure to a variety of health conditions with sufficient client interactions to ensure development of diverse skills in patient care and management.
- 4.9 Content and sequencing of the program of study prepares students for clinical practice and, wherever possible, incorporates opportunities for simulated learning
- 4.10 Supervised clinical practicum included as soon as is practically possible within the program to facilitate early engagement with the professional context of practice
- 4.11 Extended clinical practicum in Australia included towards the end of the program to consolidate the acquisition of competence and facilitate transition to practice. A summative assessment is made at this time against all Competency Standards for the relevant profession in the clinical setting
- 4.12 Equivalence of subject outcomes for programs taught in Australia in all delivery modes in which the program is offered (subjects delivered on-campus or in mixed-mode, by distance or by e-learning methods)
- 4.13 Where the structure of the program allows for multiple entry pathways for which students receive block credit or advanced standing (other than on an individual basis), evidence that each pathway meets the Competency Standards for the relevant Course Accreditation Standards

Standard 5: Program Content

The program content delivered by the program provider comprehensively addresses the Competency Standards for Western Herbal Medicine Practitioners. Emphasis is placed upon these competencies rather than defining a prescribed content however it would be expected that courses would include instruction in specific elements as outlined within this standard. The program content also incorporates Australian and international best practice perspectives on Western herbal medicine as well as existing and emerging national and regional health priorities.

Criteria

The program provider demonstrates:

- 5.1 A comprehensive curriculum document structured around the conceptual framework that includes:
 - a) Program structure and delivery modes
 - b) Subject outlines
 - c) Linkages between subject objectives, learning outcomes and their assessment, and national competencies
 - d) Teaching and learning strategies
 - e) A supervised clinical experience summary and plan
 - f) At least 4 years full time study load or its equivalent
- 5.2 A central focus throughout the program is Western herbal medicine practice, comprising core health professional knowledge and skills and specific Western herbal medicine practice knowledge and skills that are evidence based, applied across the human lifespan and incorporate national and regional health priorities, health research, health policy and reform.
- 5.3 Western herbal medicine traditional knowledge, research and evidence-based enquiry underpins all elements of curriculum content and delivery
- 5.4 The development clinical competence including support for students to become caring and ethical primary care practitioners with a well-developed sense of personal wellness, knowledge of their unique skills as healers, and full understanding of their scope of practice and its strengths and limitations
- 5.5 Academic and clinical education components are carefully coordinated and integrated, and are mutually reinforcing allowing for a graduated progression in the student's knowledge, skills, attitudes and behaviours, and fosters the student's consequent ability to manage increasingly complex clinical knowledge and patient cases.
- 5.6 Program content supports the development and application of knowledge and skills in:
 - a) Critical thinking, analysis and problem solving
 - b) Quality improvement technologies
 - c) Research appreciation and translation
 - d) Legal and ethical issues in health care and research
 - e) Health informatics and health technology
 - f) Lifelong learning
- 5.7 Program addresses specific content in:
 - a) Western herbal medicine history, principles, philosophy and clinical theory
 - b) the basic sciences of biology, chemistry and physics to the extent necessary to lay foundations for proper understanding at an advanced level of the human and clinical sciences taught later in the course
 - c) the life sciences of anatomy, genetics, biophysics (selected), histology, embryology, physiology, biochemistry, microbiology and psychology
 - d) pathology, pharmacology, pharmacognosy and general medicine, especially those aspects of general medicine most important to Western herbal medicine clinical management
 - e) environmental and public health (including epidemiology, clinical ecology, immunology and infectious diseases)

- f) Diagnostic skills including physical, psychological, clinical, laboratory, diagnostic imaging, and differential diagnoses
 - g) Therapeutic subject matter including botanical medicine and conventional pharmaceutical drugs
 - h) Clinical subject matter including body systems and their interactions, cardiology, psychology, dermatology, endocrinology, ENT, gastroenterology, urology, proctology, gynaecology, neurology, orthopaedics, pulmonology, natural childbirth/obstetrics, paediatrics, geriatrics, rheumatology, oncology and hematology
 - i) differential diagnosis, prognosis and treatment including the assessment and management of complex conditions and how human behaviour, attitudes and lifestyle can contribute to illness and be factors in its amelioration
 - j) patient lifestyle counselling in preventive approaches, including health education/promotion, disease prevention and mind-body medicine
 - k) the clinical skills of diagnosis, oral and written communication and counselling and the development of clinical judgment in deciding appropriate treatment and/or referral
 - l) Clinical risk management
 - m) Financial recordkeeping, ethics, jurisprudence, marketing and Western herbal medicine practice management
 - n) Research skills including the ability to document the outcomes of Western herbal medicine care
- 5.8 Inclusion of subject matter that gives students an appreciation of the diversity of Australian culture, develops their knowledge of cultural respect and safety, and engenders the appropriate skills and attitudes
- 5.9 Inclusion of a discrete subject specifically addressing Western herbal medicine philosophy and traditional knowledge, and which develops their knowledge of core Western herbal medicine principles and engenders a critical and balanced understanding of the interface between new and traditional knowledge within contemporary Western herbal medicine practice.
- 5.10 Core concepts pertaining to the use and practice of Western herbal medicine principles are appropriately reflected in all program components:
- a) Vital force
 - b) Energetics of medicinal plants
 - c) Specificity in diagnosis and medication
 - d) Holistic pharmacology
- 5.11 Equivalence of theory or workplace experience gained outside Australia in terms of subject objectives, learning outcomes and assessment. Learning experiences undertaken outside Australia must not exceed one semester.

Standard 6: Student Assessment

The curriculum incorporates a variety of approaches to assessment that suit the nature of the learning experience and robustly measure achievement of required learning outcomes, including a summative assessment of student performance against the current Competency Standards for Western Herbal Medicine Practitioners.

Criteria

The program provider demonstrates:

- 6.1 A consistent approach to student assessment across teaching sites and modalities that is periodically reviewed and updated
- 6.2 Clear statements about assessment and progression rules and requirements provided to students at the start of each subject
- 6.3 The level, number and context of assessments are consistent with determining the achievement of the stated learning outcomes
- 6.4 Both formative and summative assessment types and tasks exist across the program to enhance individual and collective learning as well as inform student progression
- 6.5 A variety of assessment approaches across a range of contexts to evaluate competence in the essential knowledge, skills and behaviours required for professional Western herbal medicine practice
- 6.6 Assessment of student communication competence and English language proficiency before undertaking supervised clinical practicum subjects
- 6.7 Validated instruments are used in clinical practicum assessments to evaluate student knowledge, skills, behaviours and competence
- 6.8 Ultimate accountability for assessing students in relation to their supervised clinical practicum
- 6.9 Assessments include the appraisal of competence in pharmacokinetics, pharmacodynamics and the quality use of Western herbal medicine therapeutics including consideration of interactions with pharmaceutical medications
- 6.10 Evidence of procedural controls, fairness, reliability, validity and transparency in assessing students
- 6.11 Processes to ensure the integrity of online assessment
- 6.12 Collaboration between students, health service providers (where relevant) and academics in selecting and implementing assessment methods
- 6.13 A summative assessment of student achievement of competence against the Competency Standards for Western Herbal Medicine Practitioners is conducted by a qualified Western herbal medicine practitioner in an Australian clinical context before program completion.

Standard 7: Students

The program provider's approach to attracting, enrolling, supporting and assessing students is underpinned by values of transparency, authenticity, equal opportunity and appreciation of social and cultural diversity.

Criteria

The program provider demonstrates:

- 7.1 Students are selected for the program based on clear, justifiable and published admission criteria.
- 7.2 Students have sufficient English language proficiency and communication skills to be able to successfully undertake academic and workplace experience requirements throughout the program.
- 7.3 Students are informed about, and have access to, appropriate support services including counselling, health care and academic advisory services.
- 7.4 Processes to enable early identification and support for students who are not performing well academically or have professional conduct issues.
- 7.5 All students have equal opportunity to attain the current Competency Standards for Western Herbal Medicine Practitioners. The mode or location of program delivery should not influence this.
- 7.6 Processes for student representation and feedback in matters relating to governance and program management, content, delivery and evaluation.
- 7.7 People with diverse academic, work and life experiences are encouraged to enrol in the program.

Standard 8: Resources

The program provider has adequate facilities, equipment and teaching resources as well as staff who are qualified, capable and sufficient in number, to enable students to attain the current Competency Standards for Western Herbal Medicine Practitioners

Criteria

The program provider demonstrates:

- 8.1 Staff, facilities, equipment and other teaching resources are sufficient in quality and quantity for the anticipated student population and any planned increase.
- 8.2 Students have access to a well-maintained and catalogued library that has holdings of books, journals and other media that are current and sufficient in number and breadth to support the diversity of the program content.
- 8.3 Students have sufficient and timely access to academic and clinical teaching staff to support their learning.
- 8.4 Human resource departments have a clearly articulated plan to ensure academic and operational staff requirements are met.
- 8.5 Students have sufficient and timely access to support services that will facilitate successful completion of their course including:
 - a) Admissions
 - b) Orientation
 - c) Advisement and counselling
 - d) Financial aid (if offered)
 - e) Tutorial services
 - f) Career development services
- 8.6 A balance of academic, clinical, technical and administrative staff appropriate to meeting teaching, research and governance commitments.
- 8.7 Staff recruitment strategies:
 - a) are culturally inclusive and reflect population diversity
 - b) take affirmative action to encourage participation from Aboriginal and Torres Strait Islander peoples.
- 8.8 Documented position descriptions for teaching staff, clearly articulating roles, reporting relationships, responsibilities and accountabilities.
- 8.9 The Head of Discipline is a Western herbal medicine practitioner who holds a relevant post-graduate qualification
- 8.10 Staff teaching and assessing Western herbal medicine practice related subjects are qualified Western herbal medicine practitioners with relevant academic experience and a minimum of two years clinical experience with the majority of clinical faculty members having a minimum of five years of experience.
- 8.11 Staff contributing to clinical instruction in a supervised/mentored environment can do so with less than two years clinical experience.
- 8.12 Academic staff are qualified in the relevant discipline for their level of teaching, to at least one qualification standard higher than the program of study being taught or with equivalent professional experience, but preferably terminal degrees in their field.
- 8.13 In cases where an academic staff member's tertiary qualifications do not include Western herbal medicine, their qualifications and experience are relevant to the subject(s) they are teaching.
- 8.14 The overall composition and combined experience of the faculty adequately reflects the Western herbal medicine orientation of the program and ensure graduates are capable of integrating Western herbal medicine principles, philosophy and clinical theory into clinical practice.
- 8.15 Processes to ensure academic staff have a sound understanding of contemporary scholarship and professional practice in the subject(s) they teach.
- 8.16 Teaching and learning takes place in an active research environment where academic staff are engaged in research and/or scholarship and/or generating new

knowledge. Areas of interest, publications, grants and conference papers are documented.

- 8.17 Policies and processes to verify and monitor the academic and professional credentials of current and incoming staff and to evaluate their performance and development needs.
- 8.18 Student load within the broader program and individual subjects are managed to ensure students receive.
- 8.19 All policies and procedures are made available to students and staff through a handbook (or comparable publication)

Standard 9: Management of Clinical Experience

The program provider ensures that every student is given a variety of supervised clinical practicum experiences conducted in clinical settings providing suitable opportunities and conditions for students to attain the current Competency Standards for Western Herbal Medicine Practitioners.

Criteria

The program provider demonstrates:

- 9.1 Constructive relationships and clear contractual arrangements with all health providers where students gain their clinical experience and processes to ensure these are regularly evaluated and updated.
- 9.2 Risk management strategies in all environments where students are placed to gain their clinical experiences and processes to ensure these are regularly reviewed and updated.
- 9.3 Supervised clinical experiences provide timely opportunities for experiential learning of curriculum content that is progressively linked to attaining the current Competency Standards for Western Herbal Medicine Practitioners:
 - a) Integrates Western herbal medicine principles, philosophy, clinical theory and clinical practice into every clinical interaction
 - b) Opportunities to develop the clinical knowledge, skills and critical judgement necessary for safe and effective practice as a primary care Western herbal medicine practitioner including patient counselling on health promotion and disease prevention, patient assessment, diagnosis, treatment, prognosis and management, and referral as appropriate
 - c) Opportunities to demonstrate competence in the full range of Western herbal medicine therapeutics as set forth in this standard
 - d) Opportunities to develop the knowledge, skills, attitudes and behaviour necessary to establish effective professional relationships with patients, faculty, colleagues, other health care practitioners and the public
 - e) Opportunities to treat patients of all ages, to treat a wide variety of conditions and diseases, and to develop case management skills
 - f) Opportunities to interact with other healthcare providers
 - g) Group forums for discussion among faculty and students on a variety of clinical subjects and case analyses, with the inclusion of Western herbal medicine principles, philosophy and clinical theory as relevant to the discussion topic
 - h) Opportunities to develop cultural/ethnic competence include socio-sexual and gender sensitivity, as well as an understanding of medical ethics and the medical consequences of common societal and environmental problems
 - i) Opportunities to develop a thorough knowledge and the necessary skills of charting practices and patient record maintenance, including applicable legal requirements
 - j) Opportunities in Western herbal medicine practice management (e.g. attracting and retaining patients, time management, charging and collecting fees, etc)
- 9.4 Each student is provided with a variety of clinical experiences reflecting the major health priorities and broad landscape of Western herbal medicine practice. Opportunities are provided for intraprofessional and interprofessional learning and the development of knowledge, skills and behaviours for collaborative practice.
- 9.5 Clearly articulated models of supervision, support, facilitation and assessment are in place so students can achieve required learning outcomes and current Competency Standards for the Western Herbal Medicine Practitioners.
- 9.6 Academics, Western herbal medicine practitioners and other health professionals engaged in supervising and supporting students during workplace experiences are adequately prepared for this role and seek to incorporate contemporary and evidence-based Australian and international perspectives on Western herbal medicine practice.

- 9.7 Assessment of Western herbal medicine clinical competence within the context of the clinical experience is undertaken by an appropriately qualified Western herbal medicine practitioner.
- 9.8 Appropriate resources are provided, monitored and regularly evaluated to support students while on supervised clinical practicum.

Standard 10: Quality Improvement and Risk Management

The program provider is able to assess and address the risk to the program, its outcomes and students, and has a primary focus on continually improving the quality of the teaching and learning experience for students and the competence of graduates.

Criteria

The program provider demonstrates:

- 10.1 Responsibility and control of program development, monitoring, review, evaluation and quality improvement is delegated to the Western herbal medicine department with oversight by the academic board or equivalent.
- 10.2 Regular evaluation of academic and clinical supervisor effectiveness using feedback from students and other sources; systems to monitor and, where necessary, improve staff performance.
- 10.3 Professional and academic development of staff to advance knowledge and competence in teaching effectiveness and assessment.
- 10.4 Feedback gained from the quality cycle incorporated into the program of study to improve the experience of theory and practice learning for students.
- 10.5 Regular evaluation and revision of program content to include contemporary and emerging issues surrounding Western herbal medicine practice, health care research and health policy and reform.
- 10.6 Students and staff are adequately indemnified for relevant activities undertaken as part of program requirements.
- 10.7 Policies and established practices which address occupational health and safety, sexual harassment and disability.
- 10.8 All formal complaints and grievances made by students are handled in an equitable manner according to published policies and procedures with documentation of all complaints stored for three years.
- 10.9 Accurate and complete student record keeping including permanent academic records that document the completion of program requirements.