



Accreditation of Entry-Level Occupational Therapy Education Programs

Guidelines for Education Providers

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Occupational Therapy Council (Australia & New Zealand) Ltd
PO Box 959
South Perth WA 6951

Phone: [+61-8-9368 2655](tel:+61-8-9368-2655)
Fax: [+61-8-9368 2677](tel:+61-8-9368-2677)

E-mail: admin@otcouncil.com.au
Web: www.otcouncil.com.au

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Glossary of terms

Academic leader	The person responsible for the overall development, leadership, management and evaluation of the entry-level and postgraduate occupational therapy programs delivered by the occupational therapy academic unit within an Education Provider. Sometimes called Head of Department, Discipline Head, Head of School, in some academic units academic leadership is provided by a team of senior staff.
Academic unit	The academic unit includes all components that comprise the full range of activities conducted within the ambit of occupational therapy, including entry-level programs, postgraduate education, research, continuing education and community service. The academic unit may also be referred to as school, department or discipline.
Accredited program	<p>A program of study that has been assessed as meeting the accreditation standards.</p> <p>Accreditation may be granted by the OTC if it is reasonably satisfied a program of study in occupational therapy, and the Education Provider that provides this program, meets the approved Accreditation Standards. The OTC may also grant accreditation if it is reasonably satisfied the program of study and the Education Provider meet the approved Accreditation Standards, and the imposition of conditions on the approval will ensure the program meets the standard within a reasonable time.</p>
Accreditation assessment	The process undertaken to assess whether a program of study meets the Accreditation Standards. The Education Provider undertakes a period of self-evaluation followed by formal review and verification by a team of external assessors who evaluate the achievement or otherwise of the standards.
Accreditation Standards	The document outlining the standards required of occupational therapy entry-level education programs in Australia.
AHPRA	Australian Health Practitioner Regulation Agency
Annual report	The report provided by Education Providers to the OTC as part of program monitoring.
Approved program	Denotes programs that are recognised by the Occupational Therapy Board of Australia (OTBA) as meeting the accreditation standards, either with or without conditions. Graduates from approved programs are eligible for registration. Approved programs are listed on the OTBA website.
AQF	Australian Qualifications Framework.
Assessors	The people who undertake the process of external verification of a program or programs. Assessors have completed training specific to their role in the accreditation process.
Assessor Team	An assessor team is formed to undertake the review of an individual program. The assessor team is usually made up of two or three members, one of whom is team leader. The team has experience and knowledge of the Accreditation Standards, the occupational therapy profession, educational matters and accreditation processes.
Competency Standards	The Australian Minimum Competency Standards for New Graduate Occupational Therapists (Occupational Therapy Australia, 2010).

Course	A term used differently by Education Providers, it sometimes refers to an individual subject and sometimes to a curriculum of study (program) that leads to the conferring of an approved award, for example a Bachelor degree.
Education Provider	The organisation or institution providing a program of study in occupational therapy.
Entry-level program	An undergraduate or postgraduate level program that prepares graduates to enter the workforce as beginning occupational therapy practitioners. A specific sequence of study/curriculum that leads to an initial qualification in occupational therapy.
Health Professions Accreditation Councils' Forum	The coalition of the accreditation councils of the regulated health professions. Previously known as the Forum of Australian Health Professions Councils.
Masters entry-level program	A program of study at Masters level that builds on a prior Bachelor-level qualification and leads to an initial qualification in occupational therapy. Sometimes referred to as a Graduate Entry Masters or GEM program.
National Law	The Health Practitioner Regulation National Law Act (2009) as in force in each state and territory of Australia. The National Law provides for the establishment of national registration (of individual practitioners) and accreditation (of programs of study).
Occupational Therapy Council (Australia and New Zealand) Ltd	The external entity appointed to provide an accreditation function for the OTBA.
OTC	Occupational Therapy Council (Australia & New Zealand) Ltd
Occupational Therapy Board of Australia	The registration authority for occupational therapists.
OTBA	Occupational Therapy Board of Australia
Occupational Therapy Australia Ltd	The Australian association of occupational therapists. The professional body representing occupational therapy in Australia and responsible for determining if a program of study meets the WFOT minimum standards and can be recognised by the WFOT. The association includes state and territory based bodies, usually referred to as divisions, and is sometimes referred to as OTA or OTAL.
Postgraduate Course/Program	A course or program of study that follows a first degree, leading to a formal qualification.
Program	A specific sequence of study/curriculum that leads to an entry-level qualification/award/degree in occupational therapy (programs are also referred to as courses).
Program leader	The person providing leadership for a specific program of study. Sometimes referred to as program or course coordinator or convenor.
Program Accreditation Committee (PAC)	The Program Accreditation Committee (PAC) is a subcommittee of the OTC and has the role of advising the OTC on accreditation for entry-level occupational therapy programs.
Re-accreditation	The term used to refer to the process of the five-yearly accreditation assessment of a program which has previously been accredited.

Self – evaluation	An element of the program accreditation review process in which the Education Provider formally assesses its entry-level programs and its achievements of the standards in a self-study submission.
Self-study	The submission produced by the Education Provider as an outcome of its self-evaluation, outlining the evidence that demonstrates how it meets the accreditation standards.
Site visit	An element of the program accreditation assessment process by which the assessor team verifies the information in the self-study through visiting the Education Provider and undertaking a range of consultations and interviews to gain first-hand information from key stakeholders. The site visit is usually conducted over two to three days, depending on the number of programs being accredited and whether the programs are delivered from more than one site.
Stage 1, 2, or 3 assessment	<p>The sequential assessment process applied to new programs of study prior to the graduation of the first cohort of students.</p> <p>Stage 1: notification of intention to seek accreditation. Stage 2: initial desktop assessment prior to intake of students. Stage 3: accreditation assessment with site visit prior to graduation of first cohort.</p>
Subject	A definable component of a program of study that has a syllabus, objectives, assessment, references and resources. Also referred to by some Education Providers as unit, course or paper. Each program of study includes a range of subjects that comprise the curriculum.
Undergraduate program	A sequence of study leading to a first degree at tertiary level. It is usually a Bachelor degree.
WFOT	World Federation of Occupational Therapists. The professional body representing the occupational therapy profession internationally.
WFOT Education Standards	World Federation of Occupational Therapists Minimum Standards for the Education of Occupational Therapists (2002).

Introduction

This document outlines the purpose and process of entry-level program accreditation in Australia conducted by the Occupational Therapy Council (Australia & New Zealand) Ltd (OTC). It has been written to provide guidance for Education Providers about the requirements for accreditation of new programs, the re-accreditation of previously accredited programs and the reports required for program monitoring. It is a companion document to the OTC's Occupational Therapy Accreditation Standards (December 2013).

Occupational Therapy Council (Australia & New Zealand) Ltd

The OTC is the external entity appointed to provide an accreditation function for the Occupational Therapy Board of Australia (OTBA). The OTC is an independent not-for-profit organisation and its purpose is to ensure that standards of education, training and assessment of occupational therapists are maintained and developed so the Australian public is assured of safe and proper practice. The OTC is a member of the Health Professions Accreditation Councils' *Forum* (HPACF).

The OTC's program accreditation function includes:

- Development and ongoing review of the Accreditation Standards for the purpose of accreditation under the National Law.
- Assessment of programs of study, and the Education Providers that provide the programs of study leading to eligibility for registration as an occupational therapist, to determine whether the programs meet approved Accreditation Standards.
- Monitoring programs of study and the Education Providers that provide the program of study to ensure they continue to meet the Accreditation Standards.

Accreditation Standards for Occupational Therapy

Australian entry-level occupational therapy programs and the Education Providers delivering those programs are assessed for accreditation using the standards outlined in the Occupational Therapy Accreditation Standards (December 2013).

The Accreditation Standards have been developed to meet relevant Australian and international benchmarks and are based on the available research and evidence base. Stakeholders are involved in the development and regular review of the standards, and there is wide-ranging consultation to gain feedback about the standards. The development and review of the standards is done in accordance with the Australian Health Practitioner Regulation Agency (AHPRA) *Procedures for the development of the Accreditation Standards*. The Accreditation Standards are reviewed on a regular basis.

The Accreditation Standards outline the requirements of occupational therapy entry-level Education Programs to ensure safe and competent graduates. They outline expectations for programs in the following eight domains:

- Philosophy and purpose
- Curriculum content and sequence
- Educational methods
- Practice education/fieldwork
- Local context of professional practice
- Educators
- Resources
- Quality improvement

In addition to the standards, explanatory notes are developed from time to time to expand on aspects of the Accreditation Standards. These can be accessed from the OTC website.

The Australian Minimum Competency Standards for New Graduate Occupational Therapists (2010) and the World Federation of Occupational Therapists (WFOT) Minimum Standards for the Education of Occupational Therapists (2002) have been incorporated into the OTC's Accreditation Standards.

The Australian Minimum Competency Standards for New Graduate Occupational Therapists (2010) represents the minimum knowledge, skills and attitudes required for safe and competent practice in new graduate occupational therapists in Australia. Education Providers must ensure the graduates of their programs will be able to practise in accordance with the competency standards.

The Minimum Standards for the Education of Occupational Therapists (WFOT 2002) are international standards for occupational therapy education. They have been developed by the WFOT to provide a basis for international consistency and cohesiveness of occupational therapy practice and recognition of occupational therapy qualifications internationally. They describe the essential inclusions in occupational therapy educational programs in order for the program to be recognized by the WFOT.

The accreditation process

Overview

The accreditation process assesses the capacity of an entry-level occupational therapy program and the Education Provider delivering the program to produce graduates who have the knowledge, skill and professional attributes necessary for them to practise occupational therapy safely and competently in Australia, and who are prepared for life-long learning that will be necessary for them to remain competent to practise.

The accreditation process also aims to support the continuous improvement of occupational therapy programs so they are responsive to developments in occupational therapy research, practice and the needs of the community. The accreditation process provides opportunity for Education Providers to engage in benchmarking and external review which contributes to the ongoing improvement of occupational therapy education.

In line with the *Health Practitioner Regulation National Law Act 2009* (National Law), accreditation may be granted by the OTC if it is reasonably satisfied a program of study in occupational therapy, and the Education Provider that provides this program, meet the approved accreditation standards. The OTC may also grant accreditation if it is reasonably satisfied the program of study and the Education Provider substantially meet approved accreditation standards, and the imposition of conditions will ensure the program meets the standards within a reasonable time.

The OTC aims to provide rigorous, fair and consistent processes for accrediting programs of study and Education Providers. Its accreditation functions are performed in line with the Australian Health Practitioner Regulation Agency (AHPRA) and the Health Professions Accreditation Councils' *Forum Quality Framework for the Accreditation Function*. The accreditation review process is implemented uniformly across Australia for all entry-level occupational therapy programs offered at undergraduate and postgraduate levels. Established programs are monitored annually and assessed for re-accreditation every five years. New programs must seek an initial accreditation assessment prior to the first intake of students, are monitored throughout the progressive implementation of the program and undergo further assessment prior to the graduation of the first cohort (refer to Stage 1, 2 and 3 assessments described later in this document).

The OTC Program Accreditation Committee

The Program Accreditation Committee (PAC) is the subcommittee of the OTC responsible for advising the OTC on all aspects of accreditation for entry-level occupational therapy programs. The PAC has the delegated authority of the OTC to determine the accreditation status to be awarded to occupational therapy entry-level programs and reporting of these decisions to the Board of OTC.

The PAC functions include:

- Ensuring the OTC has systems, policies, procedures and processes in place for a rigorous, fair, consistent and high quality entry-level program accreditation process consistent with AHPRA/ National Law requirements.
- Making recommendations to the OTC on the Accreditation Standards, and ensuring the standards are reviewed regularly, informed by developments in policy, workforce, occupational therapy practice and wide-ranging consultation, and consistent with AHPRA/National Law requirements.
- Obtaining feedback from the OTBA regarding competence of graduates, to inform the OTC's entry-level program accreditation functions.
- Reviewing program accreditation reports received from assessment teams, and preparing a report for OTC (and OTBA) based on the assessors' documentation.

- Monitoring programs and Education Providers, including through receiving reports and determining actions required.
- Receiving and addressing complaints and concerns about an accreditation status and the accreditation process from members of the public/stakeholders, and from Education Providers which are disputing an accreditation decision.
- Documenting reports (initial, annual and half yearly updates) in relation to the Accreditation Standards and processes consistent with AHPRA/National Law requirements, for review by OTC directors.
- Ensuring proper conduct of program accreditation processes and procedures.

Accreditation Assessment Teams

An accreditation assessor team is formed to undertake the accreditation assessment of each program. The OTC policies on the selection, appointment, training and performance review of assessor team members aim to ensure a fair and consistent assessment process.

The assessor team is usually made up of two or three members, one of whom is team leader. The assessor team includes a minimum of one registered occupational therapist. All team members are senior practitioners, educators and professional leaders with knowledge, skill and experience in accreditation processes. The team may also include a local occupational therapy advisor who provides advice to the assessors about the local issues relevant to the program, professional and community members with relevant background/expertise. An observer may accompany the team.

Teams are responsible for:

- reviewing the self-evaluation submission (the self-study) and assessing the program of study and the Education Provider against the approved Accreditation Standards;
- where a site visit is to be included in the accreditation assessment, inspecting resources and interviewing key stakeholders;
- preparing a report about the program and the Education Provider in relation to the Accreditation Standards.

The assessor team is supported in the delivery of its responsibilities by the OTC's Professional Adviser.

Outcomes of an accreditation assessment

In line with the National Law, accreditation may be granted by the OTC if it is satisfied a program of study in occupational therapy, and the Education Provider that provides this program, meets the approved Accreditation Standards. The OTC may also grant accreditation if it is reasonably satisfied the program of study and the Education Provider substantially meet approved Accreditation Standards, and the imposition of conditions on the approval will ensure the program meets the Accreditation Standards within a reasonable time.

For new programs applying for accreditation, the outcome of an accreditation assessment may be:

- Accreditation with conditions
- Not Accredited

For accredited programs, the outcome of an accreditation assessment may be:

- Accreditation
- Accreditation with conditions
- Accreditation revoked

Accreditation	Accreditation is granted where all Accreditation Standards have been met
Accreditation with Conditions	Accreditation is granted with conditions when the Accreditation Standards are substantially but not fully met. It is anticipated that the program will be able to gain accreditation status subject to the conditions being addressed within the period specified in the conditions and depending on satisfactory progress reports.
Not Accredited	This result is awarded to a new program that has not provided sufficient evidence that the Accreditation Standards have been substantially met.
Accreditation revoked	This result is awarded to an accredited program that no longer meets the Accreditation Standards or has not met the conditions imposed within the required time frame and there is no reasonable assurance the program has the capacity to take necessary remedial action in a reasonable time frame.

Reporting the accreditation decision

The OTC reports its accreditation decision and provides the accreditation report to the OTBA. The OTBA makes the decision on the approval of the program of study for registration purposes. Programs must be approved to enable students to apply for registration. Students must be registered prior to commencing their first clinical placement. Graduates of approved programs of study are eligible for General Registration. To practise as an occupational therapist and use the title ‘occupational therapist’ in Australia, a person must be registered with the OTBA. The OTBA maintains the list of the approved programs of study which can be accessed via the OTBA website.

The OTC also reports its accreditation decision and provides the accreditation report to the professional association, OTA. OTA, as a member of the WFOT, has an ongoing responsibility to ensure programs meet the WFOT (2002) Minimum Standards of Education, and to report this to the WFOT. Provision of the OTC accreditation reports to OTA enables the association to meet its reporting requirement without duplication of accreditation processes.

Accreditation of new occupational therapy programs

In seeking accreditation status, Education Providers offering entry-level education programs in occupational therapy undertake a self-evaluation followed by an external assessment by a team of accreditation assessors.

New programs of study undergo a three-stage assessment process which commences prior to the first intake of students. Following successful completion of the third stage, programs are monitored annually and re-accredited every five years.

Education Providers planning new occupational therapy programs in Australia must:

Stage 1:

- Indicate to the OTC their intention to commence a new program, and ensure they are informed of all accreditation requirements 12-18 months ahead of planned commencement.

Stage 2:

- Apply for an initial assessment of the program and gain a successful accreditation outcome (Accreditation with Conditions) prior to the first student intake.
- Provide periodic reports and demonstrate progress as outlined in the conditions in the Stage 2 report.

Stage 3:

- Assessment, including a site visit in the final year prior to the graduation of the first cohort of students, where the assessor team will gather detailed feedback from internal and external stakeholders.

Programs are subsequently monitored annually and fully assessed every five years to retain their accreditation status.

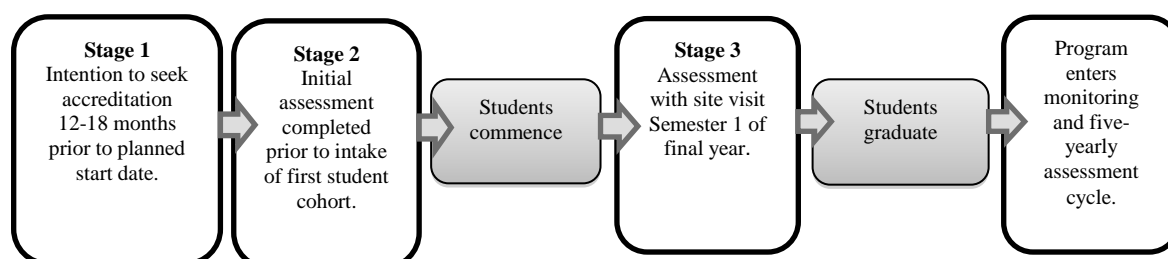


Figure 1: Stages of accreditation for new programs

(i) Information required for Stage 1: Intention to seek accreditation

Education Providers should provide the following information to the OTC:

- Name and address of Education Provider (include mail and web address and relevant phone numbers).
- The title of the proposed award and course code of the planned program.
- Address of proposed program (Provide relevant campus and specify the location).
- Name and contact details of program leader/program developer.
- Proposed commencement date.
- Likely student intake numbers.

Education Providers should ensure they obtain information from OTC about Stage 2 and subsequent assessment processes, including the current Accreditation Standards and explanatory notes.

(ii) Information required for Stage 2: Initial assessment.

Education Providers planning to commence entry-level education programs in occupational therapy are required to undertake a self-evaluation and provide a self-study submission to the OTC demonstrating the extent to which their program meets the Accreditation Standards. Detail of the information to be included in the self-study is outlined later in this document.

An assessor team undertakes a detailed desk-top assessment of the program's self-study submission. Further information may be requested by the assessor team.

The Stage 2 assessment is to ensure the Education Provider intending to establish a new occupational therapy program has the capacity to achieve all Accreditation Standards and especially has:

- adequate physical and human (staff) resources;
- a sound curriculum structure in place; and
- consulted with the occupational therapy profession and service providers to ensure the future practice education/fieldwork requirements of the new program can be met.

Based on information from the self-study and any additional information obtained, the assessor team documents its findings and recommendations in a report to the PAC. The assessors' report includes information on the extent to which the program meets the required standards, and recommendations of conditions to be set. The PAC determines whether or not the program substantially meets the Accreditation Standards. The PAC reports its decision to the OTC directors. The outcome of a Stage 2 accreditation assessment may be:

- Accreditation with conditions
- Not accredited

The Stage 2 accreditation report provided to the Education Provider by the OTC will outline the evidence that will need to be provided sequentially as the program is rolled out, and the timelines for these to be met.

(iii) Information required for Stage 3: assessment with site visit in final year.

Education Providers undertake a further self-evaluation of their program in the final year prior to the graduation of the first cohort and submit a self-study submission demonstrating how their program meets the Accreditation Standards. Verification of the evidence provided in the self-study is comprised of two key components:

- the assessor team's detailed assessment of the program's self-study; and
- a site visit.

The site visit enables the assessor team to assess how the program functions, gain information from key stakeholders and to validate or refute the information presented in the self-study submission. The site visit normally takes place in the first semester in the fourth year of a four-year program and in the first semester of the second year of a two-year program.

Based on information from these two key components of the accreditation process the assessor team documents its findings and recommendations in a report to the PAC. The assessors' report includes information on the extent to which the program meets the required standards, recommendations of any conditions to be set as well as commendations and recommendations for improvement. The PAC determines whether or not the program meets or substantially meets the accreditation standards based on the accreditation report. The PAC reports its decision to the OTC directors. The outcome of a Stage 3 accreditation assessment may be:

- Accreditation
- Accreditation with conditions
- Accreditation revoked

Accreditation of established occupational therapy programs (Re-accreditation)

Programs are re-accredited every five years. Accredited programs of study will be scheduled into the OTC timetable for accreditation assessment.

Education Providers undertake a self-evaluation and provide a self-study submission demonstrating how their program meets the Accreditation Standards. Verification of the Education Provider's claims in the self-study is comprised of two key components:

- the assessor team's detailed assessment of the program's self-study documents, and
- a site visit.

The site visit enables the assessor team to assess how the program functions and to validate or refute the information presented in the self-study.

Based on information from these two key components of the accreditation process the assessor team documents its findings and recommendations in a report to the PAC. The assessors' report includes information on the extent to which the program meets the Accreditation Standards, recommendations of any conditions to be set as well as commendations and recommendations for improvement. The PAC determines whether or not the program meets or substantially meets the accreditation standards based on the accreditation report. The PAC reports its decision to the OTC directors. The outcome of a re-accreditation assessment may be:

- Accreditation
- Accreditation with conditions
- Accreditation revoked.

The stages of the accreditation decision-making process

Stage 1: Intention to seek accreditation 12-18 months prior to the planned intake of the first cohort of students	
1.	Education Provider notifies the OTC of its intent to commence a new program at least 12-18 months prior to the planned commencement.
2.	The OTC provides the Accreditation Standards and guidelines and any other detail of accreditation requirements to Education Provider.
3.	The OTC commences tracking of program and providing advice as required.
4.	OTC informs OTA of the Education Provider's intention to commence a new program.
Stage 2: Initial assessment prior to intake (for Accreditation with Conditions) 9-12 months prior to planned commencement of a new program	
5.	Education Provider prepares self-study and submits self-study to OTC 9-12 months prior to the planned commencement.
6.	Assessor team appointed and briefed by the OTC Professional Adviser - Program Accreditation. Desktop assessment of self-study by OTC assessor team to determine if the program is on track to meet all Accreditation Standards and recommendation of the conditions that should be put in place to monitor the achievement of the Accreditation Standards.
7.	Assessor report reviewed by the PAC. The PAC determines if the program has met the Accreditation Standards, and hence can be accredited under the National Law, and determines the conditions it will impose. The PAC decision is reported to the OTC directors.
8.	Should the program not be accredited, the OTC informs the academic leader of the program of the reasons and the accreditation process ceases. Should the Education Provider choose to reapply, the accreditation assessment recommences from Step 5 above.
9.	OTC reports its accreditation decision to the OTBA. The OTBA reviews the recommendations and approves (or not) the accreditation status and may impose conditions on the approval.
12.	The OTC informs the academic leader of the program of the OTC accreditation decision and provides the accreditation report.
10	The OTC provides its decision and copy of the accreditation report to OTA.
11.	OTC receives the OTBA decision on approval status.
12.	The OTC informs the academic leader of the program of the OTBA approval status.
13.	The Education Provider provides reports as required on the conditions outlined in the accreditation report. The PAC receives and reviews reports on conditions. OTC advises Education Provider if satisfactory progress is being made to achieve the standards or if additional action is required.

Stage 3 Accreditation assessment in final year of new program prior to graduation of the first cohort of students and/or five-yearly re-accreditation assessment	
14.	The OTC notifies the Education Provider of the scheduled accreditation assessment at least nine months prior to site visit. OTC Professional Adviser - Program Accreditation liaises with academic leader about submission requirements and site visit dates. Site visit dates are confirmed three months prior.
15.	Assessors appointed and briefed by the OTC Professional Adviser - Program Accreditation.
16.	Education Provider prepares and submits self-study no later than six weeks prior to the site visit. Assessor team reviews the self-study.
17.	The OTC Professional Adviser - Program Accreditation consults with the assessors and the academic leader of the program to refine the site visit program.
18.	Assessors undertake site visit and draft reports. The OTC Professional Adviser - Program Accreditation collates the reports from team members and finalizes the report in consultation with the assessor team leader.
19.	Assessor report is reviewed by the PAC. The PAC determines if the program has met/is continuing to meet the Accreditation Standards and can be accredited under the National Law. The PAC decision is reported to the OTC directors.
20.	The draft report is sent to the academic leader for correction of factual error. Corrections checked by OTC Professional Adviser - Program Accreditation and referred to PAC if necessary.
21.	The OTC informs the academic leader of the program of the OTC accreditation decision and provides the final report, no later than three months following the site visit.
22.	OTC reports its accreditation decision to the OTBA. The OTBA reviews the recommendations and approves (or not) the accreditation status.
23.	The OTC provides its decision and copy of the final accreditation report to OTA.
24.	OTC receives the OTBA decision on approval status.
25.	The OTC informs the academic leader of the program of the OTBA approval status.
26.	Education Provider provides reports as required in any conditions outlined in the accreditation report. PAC receives and reviews reports on conditions. OTC advises Education Provider if satisfactory progress is being made to achieve the standards or if additional action is required.
Annual program monitoring	
27.	Education Provider provides annual reports to the OTC by 30 June each year throughout the five-year accreditation cycle.
28.	Annual reports are received and reviewed by the PAC, which determines if any additional accreditation assessment process is required.
29.	OTC reports accreditation and monitoring actions to the OTBA as part of the scheduled reporting process.

Accreditation Fee

Education Providers are charged a fee for the cost of the accreditation process.

Self-study submission documents required for an accreditation assessment

The Education Provider is required to undertake a self-evaluation as the first part of its preparation for a Stage 3 accreditation assessment for new programs or a re-accreditation assessment for established programs. The academic staff responsible for developing and delivering the entry-level program should undertake a detailed evaluation of the program and present evidence of its achievement of the Accreditation Standards in a self-study submission. The self-study submission should provide evidence of the manner in which the program meets the requirements for each of the Accreditation Standards as well as an overview of the program (detailed below). Detail of the evidence required is outlined in the Occupational Therapy Accreditation Standards (December 2013) document.

When more than one program of study is being accredited at any one time, Education Providers must complete one self-study submission for each program, except for honours and fully embedded programs of study. In the case of honours and embedded programs, information should be provided to indicate where there is overlap/integration/separation of the programs (e.g. use a table format to illustrate where programs share subjects).

Where a program is offered on multiple campuses, the self-study should provide separate responses for all domains of the Accreditation Standards where there is variation due to location e.g. separate advisory committees, variation in curriculum content. In particular, the following four domains should be reported separately:

- Practice education/fieldwork
- Local context of professional practice
- Educators
- Resources

Where documents or appendices are the same for each program, cross reference can be made to the one set of documents.

The self-study should be sent to the OTC in hard copy and electronically. The hard copy should consist of a maximum of two A4 lever arch folders or equivalent (one hard copy should be provided). It is recommended that appendices are only provided electronically (thumb drive or disc). The assessors and OTC Professional Adviser - Program Accreditation will review the self-study submission in detail and seek additional information if required from the academic leader.

The self-study prepared for each program must include the following sections:

PART 1: Program overview

- 1.1 Contact details and introductory information
- name of Education Provider;
 - title of all program(s) of study to be accredited;
 - length of each program;
 - Education Provider code/s for each program of study;
 - name of the award conferred for each of the above programs (e.g. Bachelor of Occupational Therapy, Master of Occupational Therapy Practice);
 - abbreviation of award(s) (e.g. BOccTher);
 - name and contact details of the academic leader/leadership team of the occupational therapy program(s) being accredited;
 - name of program accreditation coordinator (if different from above);
 - site location and address/contact details of education provider and program being accredited (ensure this indicates the location for any site visit);
 - phone and email contact details;
 - web address of program being accredited;
 - detail of the expected completion date and last date of conferral of the award to students in any other accredited entry-level occupational therapy program that is being phased out;
 - **For new programs:** Provide the intended date for first intake of students.

1.2 Index to self-study

List the documents included in the self-study to ensure ease of access for the assessors.

1.3 Snapshot (1-2 pages)

The purpose of this section is to provide the assessors with an understanding of the environment in which the program to be assessed is located, including the defining features of the Education Provider and program, and the particular strengths/features/focus for which the occupational therapy program is or will be known.

Include:

- A broad overview of the occupational therapy academic unit e.g. the range of entry-level and postgraduate programs/activities being provided by the academic unit.
- The size of the current or planned student intake to the program being accredited and the number of students in each year of the program.
- Comment on any particular defining features or achievements of the occupational therapy program.
- Particular local circumstances that provide context for and shape the program.

PART 2: Self-evaluation against the accreditation standards

The self-study must provide evidence the program meets each standard. Refer to the Accreditation Standards (December 2013) for information about the evidence required for each of the following eight domains of the program:

SECTION 1: Philosophy and purpose
Provide evidence relevant to standards 1.1-1.8

SECTION 2: Curriculum content and sequence
Provide evidence relevant to standards 2.1-2.9.

Refer to Appendix 1 and 2 for templates for mapping of the location and development of content relevant to the competency standards in the curriculum (Standard 2.5).

SECTION 3: Educational methods
Provide evidence relevant to standards 3.1-3.8

SECTION 4: Practice education/fieldwork
Provide evidence relevant to standards 4.1-4.10.

An explanatory note relevant to the standards for practice education/fieldwork can be accessed from the OTC website.

SECTION 5: Local context of professional practice
Provide evidence relevant to standards 5.1-5.4.

SECTION 6: Educators
Provide evidence relevant to standards 6.1-6.8.

SECTION 7: Resources
Provide evidence relevant to standards 7.1-7.4.

SECTION 8: Quality improvement
Provide evidence relevant to standards 8.1-8.10.

Appendices/Attachments

The Site Visit

A site visit is undertaken for Stage 3 assessments and subsequently for each five yearly re-accreditation assessment. A site visit may also be undertaken as part of an accreditation assessment triggered by a major change. The purpose of the site visit is to enable the assessors to verify information provided in the self-study and gather first hand feedback from observation of everyday activities of the Education Provider and program through interviews with key stakeholders, and reviewing resources and documents.

The OTC Professional Adviser - Program Accreditation will consult with the program leader and the assessors regarding dates for the site visit. The site visit date will be confirmed, wherever possible, with the Education Provider no later than three months prior to the site visit.

The OTC Professional Adviser - Program Accreditation will liaise with the academic leader to determine the scheduling of meetings during the site visit and will provide guidance on what additional evidence will need to be available for the assessors to review. Usually examples of student work, detailed subject outlines and other teaching and learning materials are required. During the site visit, the assessors will interview stakeholders including:

- academic staff including academic leaders (e.g. Dean, Head of Faculty), casual and sessional academics, staff providing service teaching;
- administrative staff including those managing practice education/fieldwork;
- students;
- recent graduates;
- members of advisory/consultative committees;
- employers;
- student practice education/fieldwork supervisors.

The site visit is usually conducted over two to three days, depending on the number of programs being accredited, the number of campuses, campus location and complexity of the program. Refer to Appendix 3 for an example of a site visit timetable.

Where an Education Provider offers the program at another campus either within Australia or off-shore, site visits to these campuses are usually required in order to assess that the accreditation requirements are met at all campuses.

The Education Provider will be requested to provide a dedicated lockable room or similar space, access to power and telephone for use by the assessor team for the duration of the site visit. Access to online teaching and learning material is also usually requested by the assessors during the site visit.

It would be expected morning/afternoon tea and a light lunch would be provided for the assessors during the site visit. The site visit schedule may include opportunities for informal interaction with academic and professional staff e.g. during morning tea, however assessors are otherwise discouraged from socialising with program staff during the site visit. It is helpful for assessors to maintain a respectful distance during the accreditation to allow for an objective assessment of the program.

At the conclusion of the site visit, the assessor team will provide brief feedback to the program's leadership team on its findings, clarify any issues about which there is confusion or uncertainty, and outline the final stages of the accreditation process. The assessors do not provide the accreditation decision at this meeting. Following the site visit, the assessors, with assistance from the OTC Professional Adviser - Program Accreditation, will prepare a draft report which will be sent to the academic leader for correction of factual error prior to its finalisation.

Program monitoring

The OTC monitors Approved Programs of Study and the Education Providers which offer the Approved Programs of Study in accordance with the requirements of section 50 of the National Law. The OTC aims to undertake the monitoring process in the spirit of quality improvement.

Annual reports

All accredited Education Providers (except those which are scheduled for re-accreditation in the current year), are required to complete and return an annual report of compliance with OTC Accreditation Standards (December 2013) by 30 June each year. This may be in addition to any reports required as part of accreditation with conditions.

Annual reports are received and reviewed by the PAC, which determines if action is required. Reports of major change could potentially trigger an additional accreditation assessment process, which may be managed through a 'desk-top' assessment, may require a site visit and may result in a change of the accreditation status of a program.

The annual report will seek information on:

- Program descriptors:
 - course code, length, title;
 - AQF level;
 - name of head of program.
- Number of students in each year.
- Number and profile of staff.
- Progress/action on recommendations.
- Progress/action on conditions.
- Major change.
- Anticipated major changes in the next 12 months.

On receipt of the annual report, the OTC Professional Adviser - Program Accreditation will undertake a desktop review to ensure it is complete then forward it to the PAC with a recommendation about any additional action that might be required.

The annual report ensures the PAC is able to:

- be assured the program continues to meet the Accreditation Standards;
- monitor progress on conditions and recommendations made in the previous accreditation assessment;

Should there be concerns about the program's capacity to continue to meet the Accreditation Standards or progress being made on any conditions, the PAC may:

- reduce the current period of accreditation;
- impose new conditions; or
- withdraw accreditation.

The PAC will inform the Education Provider of its concerns and the grounds on which they are based. The Education Provider will be given an opportunity to respond to the statement of concerns. The PAC informs OTC directors of these decisions.

Report of major change

It is expected all programs will undergo ongoing change and development. Major change in a program must be reported to OTC, usually via the annual report. Academic leaders can also initiate reports of

major change to the OTC when these are proposed, preferably well in advance of the change, to enable timely review of the change for accreditation purposes.

Major changes include:

- suspension or discontinuation of a program;
- significant change to program objectives and philosophy;
- major curriculum restructure;
- significant change to teaching and learning approaches;
- change to the name or code of the program;
- change to AQF level;
- change to name of qualification;
- introduction of a new stream, e.g. honours;
- change or addition of campus;
- major increase or decrease in student intake relative to resources;
- major change in resources, including staffing, that impact on the capacity of the program to meet its objectives;
- change to the length of program.

Reports of major change should provide a:

- Description of each change.
- Rationale and consultation undertaken with stakeholders.
- Time-frame, likely impact, transition arrangements where change impacts on a student cohort.
- Follow-up action requested from the OTC.

Note: where a program is being discontinued, an Education Provider must indicate:

- year of last delivery;
- likely month/year when final students will complete;
- anticipated last month/year when the award will be conferred.

The PAC will review the report of major change to determine if the change:

- will impact on the current accreditation status and therefore requires an additional accreditation assessment of the program;
- has no impact on the current accreditation status and can be considered within the current period of accreditation.

In either case the OTC Professional Adviser - Program Accreditation may seek additional detail from the Education Provider to assist the decision.

Confidentiality and Conflict of Interest

Confidentiality

The accreditation process requires a substantial amount of information to be provided by Education Providers in accreditation applications, annual reports as well as during site visits. This may include information that is considered sensitive or commercial-in-confidence. Strict confidentiality is observed at all times by assessors, PAC members, directors of the OTC, the OTC Professional Adviser - Program Accreditation and other OTC staff.

Material provided by Education Providers for the accreditation of the programs will be used only for the purpose for which it was obtained. Aside from the provision of the accreditation report to the OTBA and OTA for their respective approval processes, no material gained from an accreditation assessment will be provided to any other party by the OTC without the written consent of the Education Provider, except where required by law.

On completion of the accreditation process, a copy of the self-study document will be stored confidentially by the OTC for seven years to ensure its availability as a comparison reference. All other electronic and/or hard copy documents containing information pertaining to a specific review will be permanently deleted after the assessment is completed.

All assessors sign a confidentiality agreement with the OTC prior to commencement in their role. The confidentiality agreement covers all aspects related to the accreditation of a program, including not discussing any aspect of a program's accreditation outside of the OTC PAC, OTC staff, and not copying or keeping any materials obtained or provided as part of an accreditation process including the site visit.

Conflict of Interest

Decisions made by the OTC are based on consistent application of rigorous processes.

The potential for conflict of interest exists in many OTC program accreditation activities. Conflict of interest refers to the conflict that may arise when an individual has duties, roles or relationships that may improperly influence their performance of their role in program accreditation. Conflicts may be actual (existing in fact), perceived (a conflict that could be inferred) or potential (a conflict that might arise in the future). Conflicts of interest may compromise the integrity of these decisions if a conflicted party can be perceived to have unduly influenced a decision.

Interests may be pecuniary or non-pecuniary:

Pecuniary conflicts of interest are those that involve an actual, potential or perceived financial gain or loss. A person has a pecuniary interest if they, or a relative or close associate, own property, hold shares, or receive benefits such as concessions or gifts from a particular source.

Non-pecuniary – conflicts of interest do not involve a financial component. They may arise from personal or family relationships or involvement in social or cultural activities. Conflicts may also arise from other professional roles or affiliations held by an OTC director, committee member or staff member.

All members of the assessor panel, the PAC and OTC staff must formally declare any issues that might influence or be perceived to influence their ability to serve effectively as an assessor, administrator or committee member for a specific accreditation. All meetings of the PAC and the OTC have 'Conflict of Interest' declarations as a standing agenda item. Directors, committee members and all employees are required to declare any actual, perceived or potential conflict of interest.

Assessors are not permitted to hold an appointment with the Education Provider or have any strong connection to the program being reviewed. Members of assessor teams are usually drawn from states/territories outside the state where the program is offered.

The academic leader of the occupational therapy program being assessed is provided the names and relevant professional background of proposed assessors and any other person involved in an accreditation assessment, prior to their appointments, to determine if there is an actual, perceived or potential conflict of interest, and if the academic leader objects to a specific person's involvement in the accreditation team. If the latter, alternate assessors will be identified and the academic leader's agreement sought and obtained.

Review of an Accreditation decision

The OTC is required by section 48(4) of the National Law to have a process for internal review of certain accreditation decisions.

There are two grounds for an Education Provider to apply for a review of a decision:

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

This may include, but is not limited to, the sequence and timing of the accreditation process, the process of assessment and evaluation of documentation, and the conduct of the site visit.

or

- ii) The decision of the OTC was unjustified or not reasonable i.e. the decision was not supported by substantial evidence or it was made on capricious or arbitrary grounds.

The internal review process

The Education Provider is required to lodge the application for review with the Chief Executive Officer (CEO) of the OTC in writing, either

- on receiving the final report; or
- within 30 days of the date of the OTC letter advising the education provider of the accreditation decision.

The application for review must clearly state the reasons for seeking the review of the decision and provide evidence to support these reasons.

The CEO will acknowledge receipt of the application, and will convene an internal review panel within 30 days of the receipt of the appeal. The panel will comprise three members, and be agreed by the Education Provider. Members will include:

- a person nominated by the OTC directors with experience in investigation of complaints who is not an occupational therapist;
- a nominee of OTA;
- a nominee of the Australia and New Zealand Council of Occupational Therapy Education (ANZCOTE).

The members of the internal review panel must be familiar with the accreditation processes, and must not have been involved in the accreditation of the program that is the subject of the review, nor have any perceived, actual or potential conflict with the Education Provider or its personnel, in accordance with procedural fairness.

The scope of the internal review will be limited to the grounds stated by the Education Provider in the application for review of the decision. The panel will receive the documents provided by the Education Provider, a copy of the accreditation decision letter, the accreditation report and any other documentation from the accreditation process as requested. Although the internal review panel will predominantly make its decision based on documentary material, it has the discretion to make any inquiries it deems necessary to inform its deliberations before coming to its conclusion.

The OTC will charge the Education Provider a fee for the internal review, on a cost recovery basis. The fee will be refunded in part or full if the outcome of the review is in favour of the Education Provider.

The internal review panel is entitled to obtain independent legal advice if a question of law arises during the review. The OTC is responsible for the cost of its independent legal advice.

The decision of the internal review panel will be taken to be the decision of the OTC and supersedes any prior decision made by the OTC. The decision by the internal review panel is final.

The Education Provider will be notified of the outcome of the review by the internal review panel no later than 90 days from date of lodgement of the application with the OTC. A statement clearly outlining the reason for the decision of the internal review panel will be provided. The CEO will also provide a notification of the outcome to the OTC directors and the OTBA.

Complaints from members of the public

The OTC may receive complaints from members of the public or other stakeholders about accredited occupational therapy programs.

Complaints related to accreditation must be submitted in writing and addressed “in confidence” to the CEO of the OTC. Complaints not received in writing and complaints of a personal nature will not be considered.

The accreditation matter(s) outlined in the complaint will be considered by the OTC CEO, OTC Professional Adviser - Program Accreditation, chair OTC PAC and others as relevant to agree on action required. Should this process resolve the matter, or find the complaint is not sustained, the matter will be considered to be resolved and all parties to the complaint will be notified. If the complaint is sustained, the Education Provider will be provided with an opportunity to respond to the claims made in the complaint. Should an unsatisfactory response ensue from the Education Provider, further action may be taken, including placement of conditions on the accreditation status, until the OTC is satisfied all claims have been addressed.

Evaluation of the Accreditation Program

Following the completion of a Stage 3 or five-yearly accreditation assessment, the OTC Professional Adviser - Program Accreditation will seek feedback from the Education Provider about the performance of the assessors and the process of accreditation assessment, to identify opportunities for improvement.

Contacting the OTC

Education Providers can contact the OTC with any queries about the program accreditation process at:

Occupational Therapy Council (Australia & New Zealand) Ltd
PO Box 959
South Perth WA 6951

Phone: [+61-8-9368 2655](tel:+61-8-9368-2655)

Fax: [+61-8-9368 2677](tel:+61-8-9368-2677)

E-mail:

Julia Fenton, Executive Officer: admin@otcouncil.com.au

Rebecca Allen, Manager/Professional Adviser, Program Accreditation: Rebecca@otcouncil.com.au

References and resources

Australian Health Practitioner Regulation Agency & Forum of Australian Health Professions Council (July, 2013). Quality framework for the accreditation function. Victoria: AHPRA. (Access at <http://www.ahpra.gov.au/Publications/Accreditation-publications.aspx>)

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List of Appendices

- Appendix 1: Entry level competency standards grid template
- Appendix 2: Development of entry level competencies across the curriculum template
- Appendix 3: Example of site visit timetable for single program accreditation

Appendix 1: Entry level competency standards grid template

		Year 1				Year 2				Year 3				Year 4			
		Subject name	Subject name	Subject name	Subject name	Subject name	Subject name	Subject name	Subject name	Subject name	Subject name	Subject name	Subject name	Subject name	Subject name	Subject name	
UNIT OF COMPETENCY																	
Unit 1	Occupational therapy professional attitudes and behaviour																
1.1	Adopts a client-focused approach to practise.																
1.2	Practices in a culturally safe professional manner.																
1.3	Practices in a professional manner that meets ethical and legal responsibilities.																
1.4	Promotes and facilitates occupation through the application of professional knowledge, skills, attitudes and evidence appropriate to the practice context.																
1.5	Incorporates best available research evidence and professional reasoning into occupational therapy practice.																
1.6	Maintains and enhances competence through lifelong learning and continuing professional development activities.																
1.7	Demonstrates professional knowledge, skills, and attitudes appropriate for the working environment																
1.8	Contributes to the promotion and advancement of occupational therapy.																
Unit 2	Occupational therapy information gathering and collaborative goal-setting																
2.1	Performs a relevant, comprehensive assessment of occupational performance.																
2.2	Engages in critical, collaborative professional reasoning processes to determine priorities for intervention.																
2.3	Develops, communicates and implements an effective, efficient plan for occupational therapy intervention.																

Unit 3 Occupational therapy intervention and service implementation	
3.1	Demonstrates client focus during intervention.
3.2	Promotes client occupational performance and participation.
3.3	Selects and implements intervention strategies and methods appropriate to the client.
3.4	Selects and implements intervention strategies and methods appropriate to the working environment.
3.5	Utilises available community resources, facilities and services.
3.6	Respects and supports the role(s) of significant others.
3.7	Plans cessation/completion of services/effective handover.
Unit 4 Occupational therapy service evaluation	
4.1	Incorporates perspectives of multiple stakeholders in evaluation of occupational therapy service provision.
4.2	Demonstrates ability to understand and conduct multiple evaluation methods and techniques.
4.3	Demonstrates an understanding of and commitment to principles and methods of quality improvement.
4.4	Utilises evaluation outcomes to make recommendations for future practice.
Unit 5 Occupational therapy professional communication	
5.1	Facilitates active participation of the client in service provision.
5.2	Adopts a communication approach appropriate to the working environment.
5.3	Documents and reports relevant aspects of service provision.
5.4	Shares professional information responsibly.
Unit 6 Occupational therapy professional education and development	
6.1	Engages in lifelong learning processes and activities to maintain professional competence.
6.2	Contributes to education and professional practices of students.
Unit 7 Occupational therapy professional practice responsibilities	

7.1	Adopts an efficient, effective and systematic approach to daily workload management.			
7.2	Works effectively within the structure of the workplace environment.			
7.3	Contributes to quality assurance and service development.			

Appendix 2: Development of entry-level competencies across the curriculum template

Unit		Addressed and developed primarily in these subjects	Example/Comment
1	Occupational therapy professional attitudes and behavior.		
2	Occupational therapy information gathering and collaborative goal setting.		
3	Occupational therapy intervention and service implementation.		
4	Occupational therapy service evaluation.		
5	Occupational therapy professional communication.		
6	Occupational therapy professional education and development.		
7	Occupational therapy professional practice responsibilities.		

Appendix 3: Example of site visit timetable

Day 1	Venue	Activity
8.30-9.00		Panel arrives and sets up.
9.00 – 10.15		Panel welcomed by academic leader and program leaders. Overview of program/s.
<i>10.15 -10.45</i>		<i>Morning tea with Occupational Therapy and Health Science staff.</i>
10.45 -11.45		Meeting with occupational therapy academic staff.
11.45-1		Meeting with faculty head, dean, and campus manager.
<i>1-2</i>		<i>Lunch and panel discretionary time.</i>
2.00-2.30		Meeting with biomedical science staff.
2.30-3.15		Meeting with behavioral health science and inter-professional education staff.
<i>3.15-3.45</i>		<i>Afternoon tea and panel discretionary time.</i>
3.45-4.45		Meet with students – Years 1 and 2.
4.45-5.15		Meet with honours students.
5.15-6.00		Panel review of examples of written work.
Day 2		
9.00 – 10.00		Meeting with External Advisory Committee members.
10.00 -11.00		Meeting with fieldwork supervisors.
<i>11.00 – 11.45</i>		<i>Morning tea meeting with administrative team members.</i>
11.45 -12.30		Tour of facilities.
<i>12.30-1.30</i>		<i>Lunch and panel discretionary time.</i>
1.30-2.15		Meeting with recent graduates.
2.15– 3.15		Meeting with managers/employers.
<i>3.15 – 4.00</i>		<i>Panel discretionary time.</i>
4.00 – 5.00		Meet with students – Years 3 and 4.
Day 3		
9.00 -9.30		Meeting with faculty learning advisor.
9.30 – 10.30		Meeting with postgraduate coordinators.
<i>10.45-12.30</i>		<i>Panel discretionary time.</i>
12.30-1.30		Final meeting with academic leader and program leaders.

NB: Meetings with key external stakeholders can be conducted face to face or via teleconference. The assessor team may also organize meetings with key stakeholders outside the times scheduled by the Education Provider.