



## *Osteopathy Council of New South Wales*

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Dr Cathy Woodward  
Executive Officer  
Osteopathy Board of Australia

Dear Dr Woodward

### **Revised Draft Framework: pathways for registration of overseas trained osteopaths**

The Osteopathy Council of New South Wales (OC NSW) is grateful for the opportunity to submit on this proposal.

Insofar as we are able to comment on the proposal we have attempted to do so. Many of our concerns relate to detail on the assessment processes that have not been supplied.

#### **Best Practice in Competence Assessment**

The OC NSW is pleased that in its latest proposal the Osteopathy Board of Australia (OBA) has accepted the principle that an element of assessment is required for overseas trained osteopaths on the competent authority pathway.

The current proposal differs greatly from the original schema developed by the Australian and New Zealand Osteopathic Council (ANZOC). This was based on advice from leading experts in the assessment of clinical competence and incorporated the Capabilities for Osteopathic Practice that were developed by the New South Wales Osteopaths Registration Board [1].

The OC NSW supports an evidence-based approach to policy development and so would expect that if the previous work is being set aside, there would be details of the process that has informed this change of direction. The current proposal is silent on the provenance of the advice that was taken by the OBA which supported this change, and we would be reassured if you could provide details. Consequently, we are unable to form an opinion as to how this proposal compares with current best practice in competence assessment.

#### **Australian Healthcare System - ANZOC Module and Assessment**

We strongly suggest that the nature of the material in the module and assessment approach should be made public, enabling all stakeholders to become familiar with and comment on its utility. We are unable to form any opinion on this matter. As we are concerned with public safety it is important the detail of this element is made public so we might make comment.

#### **Conflict of interest in Supervisory Relationships**

The OC NSW feels that the arrangements for supervision offer inadequate protection for the public. In addition to our concerns on the lack of transparency on assessment methodology and capabilities framework, it is not acceptable for supervisors to be employers or

employees of the supervisee or in close personal relationships, or to have any direct financial or economic relationship. It is conceivable that unscrupulous employers could choose to either delay or accelerate the registration process in order to gain financial benefit. This can only serve to undermine public confidence in the objectivity of the supervisor and the veracity of the assessment process.

### **Supervision Plan / Level of Supervision**

In the absence of an assessment methodology or a practice framework, how will a supervision plan be constructed? How will the full range of capabilities required for competent practice be included and assessed? We can not see how the prerogative of public protection can be met unless the supervision plan is robust. The current proposal is silent on two crucial areas - standard setting to ensure consistency between supervisors, and how the supervision and assessments of overseas trained osteopaths will be comparable with graduates from accredited Australian programs of study.

### **Governance and Management Arrangements**

The quality of supervision is key to ensuring public protection. We do not accept that the process is viable if it is dependent on untrained, volunteer supervisors, who receive no or inadequate training, on-going assessment, mentorship or support.

### **Standard vs Competent Authority Pathways**

We are confused by the lack of a supervised period of practice in the standard pathway. It is generally accepted that the highest level of evidence in competence assessment is performance in practice. It is therefore counter-intuitive that those candidates who have been deemed to be more likely to pose a risk to the public are not to be subject to a period of supervised practice, whereas those that are deemed less likely to pose a risk in practice will be subjected to a period of supervision.

### **In conclusion:**

We feel the current proposed scheme offers insufficient detail on key areas of assessment methodology and operational arrangements. It is difficult to understand how a scheme designed within this proposal might operate and be concordant with best practice. Given the relatively short period allowed for the consultation (some 3 weeks) we suggest that the proposal is re-issued with sufficient detail to allow a more considered appraisal by the various stakeholders.

Yours faithfully

Anne Cooper  
**President**

1. Stone, C., D. Boud, and P. Hager. *Capabilities for Osteopathic Practice*. 2009; Available from: <http://www.hpca.nsw.gov.au/Osteopathy-Council/Publications-and-Policies/Archived-Publications/Capabilities-for-Osteopathic-Practice/default.aspx>.