



# Review of the Osteopathic Accreditation Standards Consultation paper 1

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# Executive summary

The Australian Osteopathic Accreditation Council (AOAC) is appointed by the Osteopathy Board of Australia (OBA) as the external accreditation entity to exercise one or more accreditation functions under the *Health Practitioner Regulation National Law (2009)* for Osteopathy programs of study. The key purpose of accreditation is safety of the public and AOAC is responsible for reviewing and developing accreditation standards for osteopathy education programs which are then approved by the OBA. AOAC is also responsible for monitoring of OBA approved Osteopathy programs leading to registration as an osteopath to ensure programs continue to meet the accreditation standards over the accreditation period.

In developing accreditation standards, the AOAC is required to ensure there is wide ranging consultation from a broad range of stakeholders. The AOAC works in collaboration with the OBA in planning the cyclical review of Accreditation Standards which follows the release of the Capabilities for Osteopathic Practice in 2019. It is important to note that the AOAC has a responsibility to ensure education programs enable students to meet the Capabilities for Osteopathic Practice and become eligible to register as an Osteopath in Australia. The accreditation standards will also be developed and revised to support innovative, future focused, entry-to-practice Osteopathy programs. The Coronavirus Pandemic is creating several challenges for the Australian community at large and has impacted on the education sector and the ability to continue programs for health professional entry to practice. Many Universities have moved to online learning and looking at innovative ways to include clinical practice. Questions we would ask are whether this provides an impetus for change, and should this be reflected in the new standards?

This paper contributes to Stage 1 of the consultation process undertaken by the AOAC to gather feedback from stakeholders to ensure the accreditation standards meet future osteopathic workforce challenges. A review of the literature regarding Osteopathy practice, standard development, education, policy and regulation identified key issues for consideration:

- collaboration is not specifically identified within undergraduate university curricula and between professions
- evidence based practice was not reflected in all undergraduate university programs linked to contemporary osteopathic practice
- the undergraduate curriculum did not introduce students in Osteopathy to pathways in specialised areas of Osteopathy

The review of national registration and accreditation (2014) led to a national independent accreditation systems review of accreditation (2017) (Australian Health Minister's Advisory Council, 2014; Australian Health Minister's Advisory Council, 2017). This review highlighted some key changes that accreditation councils should implement to reduce the regulatory burden on education providers including.

- Using an outcomes-based approach when developing new or revising existing accreditation standards.
- Accreditation standards based on common domains and consistent assessment approaches should include interprofessional education as a mandatory requirement.
- Clinical placements should occur in a variety of settings.

Each of these issues are briefly outlined below and further expanded upon later in the paper.

Interdisciplinary learning increases the development of trusting and respectful partnerships which establishes and sustains a growing professional referral network (Morin, Desrosiers, & Gaboury, 2017, 2018). Interdisciplinary learning also needs to begin within the undergraduate program to support

interprofessional learning (Vaughan, Moore, Macfarlane, & Grace, 2017). Understanding the role, qualifications and expertise of each other's profession establishes and promotes a stronger and more resilient multidisciplinary framework (Engel, Beirman, & Grace, 2016; Gray, Steel, & Adams, 2019).

Evidence-based practice also needs to be embedded within pre-registration healthcare programs within the higher education sector (Vaughan et al., 2017) to ensure that graduates can reflect evidence-based care within their practice. The profession also needs to publish their research findings within their research and peer reviewed literature (Gray et al., 2019). This assures the profession is promoted and recognised by other mainstream health professions (Gray et al., 2019; Osteopathy Australia, 2018; Ryan, Too, & Bismark, 2018)

This consultation paper is not concerned with the credentialing of advanced practice. Instead focus is placed on the core curriculum competencies, and subsequent pathways for career development in Osteopathy, including the fields of paediatrics, gerontology, and sports medicine.

Finally, considering the current regulatory environment and scope of the Accreditation Systems Review within the National Registration and Accreditation Scheme for health professions, the AOAC needs to explore further opportunities to create consistency and collaboration across health professions for the accreditation of education programs (Australian Health Minister's Advisory Council, 2014) Recently, the five Domain-standard accreditation framework used in the Australian Dental Council/Dental Council (New Zealand) (DC(NZ)) Accreditation Standards for Dental Practitioner Programs (December 2014) was adopted by other professional groups including the Australian Physiotherapy Council, the Council on Chiropractic Education Australasia and the Australian Nursing and Midwifery Accreditation Council.

Revision of the current osteopathic accreditation standards provides an opportunity to improve effectiveness while reducing the repetition of evidence required in the current standards framework.

Stakeholders can provide feedback by completing the survey or providing a written submission to the AOAC. Further information on how to respond is outlined on page 9.

# Consultation questions

## Interprofessional learning and collaboration in pre-registration programs of study in Osteopathy and across health disciplines

Interprofessional learning and collaboration is now a mandatory requirement in pre-registration courses.

### Question 1

How important is it that pre-registration programs of study in Osteopathy have learning objectives that relate to interprofessional learning?

### Question 2

How can interdisciplinary collaboration be improved between Osteopathy and other health disciplines at the entry program level?

## Evidence-based curriculum included within undergraduate education and within osteopathic practice

### Question 3

How can evidence-based practice be further developed and expanded within the pre-registration curriculum?

## Professional scope and pathways to advanced practice

### Question 4

To what extent should educational pathways be included in pre-registration programs of study in preparation for areas of advanced practice?

### Question 5

What are the key areas of advanced practice relevant to the profession?

## Guidance on the use of evidence

### Question 6

AOAC is considering the introduction of an evidence guide to assist education providers to supply the necessary documentation required for the accreditation assessment; would this be useful to education providers?

## The Accreditation Standards Framework

The osteopathic standards are transitioning to the new Accreditation Standards Framework with five standards in line with the accreditation standards of many other registered health professions.

### Question 7

Please briefly give any feedback regarding the five-standard structure for the future accreditation standards.

## Aboriginal and Torres Strait Islander Health and Cultural Safety

The Australian Health Practitioner Regulation Agency require all Accreditation Authorities to incorporate Aboriginal and Torres Strait Islander health and cultural safety in education and training standards and accreditation guidelines.

### Question 8

Is the cultural safety of Aboriginal and Torres Strait Islander peoples embedded within pre-registration programs and practices of osteopaths?

### Question 9

How should the cultural safety of Aboriginal and Torres Strait Islander students within educational programs be supported?

### Question 10

How should the new accreditation standards demonstrate the inclusion of Aboriginals and Torres Strait Islander's history, culture, and health within the curriculum?

## Impact of COVID-19 pandemic within undergraduate education, clinical placements, and within osteopathic practice

### Question 11

To what extent should other skills for non-contact care be included in the curricula (e.g. infection control)?

### Question 12

How should clinical placement and clinical hour attainment issues be overcome?

### Question 13

What are the long-term consequences of the pandemic influencing osteopathic practice?

### Question 14

Has COVID 19 influenced osteopathic practice in other ways that should be addresses in undergraduate curricula?

## Future directions

**Question 15**

What changes are likely to impact the osteopathic profession in the future?

**Question 16**

How can the accreditation standards guide the graduate osteopath and the broader profession of Osteopathy to meet the future health care requirements of individuals and communities?

**Question 17**

Are there any other issues involving the accreditation standards that you would like to be considered and that have not been presented in this consultation paper?

# Introduction

In 2010, the Australian Osteopathic Accreditation Council (AOAC) was appointed by the Osteopathy Board of Australia (OBA) as the external accreditation entity to exercise the accreditation functions under *the Health Practitioner Regulation National Law (2009 (National Law (2009)))*.

The AOAC will perform the following Accreditation Functions during the term of the current agreement (2019-2024)

1. Development and review of accreditation standards
2. Accreditation of programs of study and education programs
3. Assessment of overseas assessing authorities
4. Assessment of overseas qualified health practitioners.

The Osteopathy Board of Australia (OBA) approved the current osteopathic accreditation standards (the standards) in 2016. Following the release of the revised Capabilities for Osteopathy Practice in 2019, the OBA requested the AOAC to review the accreditation standards to ensure they are contemporary, meet the capabilities and ensure entry to practice programs continue to prepare osteopaths for registration.

The previous work in developing these standards is recognised and valued. This review seeks to refine and improve them through constructive and respectful engagement with stakeholders, so they continue to meet this National Law objective:

*... to provide for the protection of the public by ensuring that only health practitioners who are suitably trained and qualified to practice in a competent and ethical manner are registered*

## Aim of the review

The aim of this review is to develop a revised set of standards that are:

- contemporary and aligned with emerging research, policy, and relevant industry guidance
- able to ensure osteopaths are educated and qualified to practice in a competent and ethical manner to the required OBA standards for practice
- acceptable to the profession and relevant stakeholders
- able to support continuous development of a flexible, responsive, and sustainable Australian health workforce
- supportive of innovation in the education of health practitioners
- acceptable to the community in supporting safe, accessible, quality care

## Review process

The AOAC, as the external accreditation entity, must comply with the National Law (2009) when reviewing and developing accreditation standards. The National Law (2009) states that:

*In developing an accreditation standard for a health profession, an accreditation authority must undertake wide-ranging consultation about the content for the standard.*

The AOAC's review process ensures stakeholder feedback, expert opinion, relevant national or international benchmarks and that the best available evidence is used in developing standard content. The iterative process for stakeholder consultation provides the AOAC with an opportunity to:

- validate whether revised accreditation standards are accurate and relevant for a contemporary Australian health care system and education environment



- evaluate whether the expectations upon education providers to meet revised standards are reasonable in terms of benefits and burdens.

Stakeholder-identified benefits and burdens are considered by the Office of Best Practice Regulation, Department of Prime Minister and Cabinet, during the preliminary assessment of the regulatory impact of the revised standards.

A robust review process is essential if the AOAC is to assure the OBA and community that a graduate of an accredited Osteopathy program is eligible for registration and can practice in a safe and competent manner.

## Purpose of the consultation paper

This consultation paper identifies how the National Law underpins the aim of this review. It describes the consultation process, including how feedback is to be provided and offers context to promote stakeholder understanding of key issues relating to and engagement with the review process. This paper presents the key issues identified and explored in the literature search relevant to the review and development of the standards. It also evaluates the current accreditation standard framework and transcribes online survey questions for stakeholder comment.

For the review to achieve its aim, it is important that organisations and individuals with an interest in Osteopathy practice education provide critical input. This paper has been distributed to such organisations and individuals, inviting them to write a submission or answer the online survey.

## Literature search

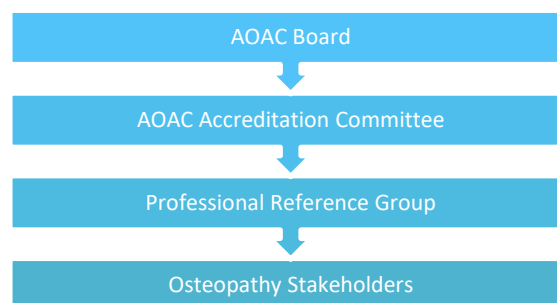
AOAC conducted a literature search for relevant policy, standards or discussion documents on Australian Government and other websites relating to Osteopathy practice, standard development, education, policy, and regulation. Through database searches and a search of reference lists of selected articles, the AOAC identified published research on a range of issues. Professional networks provided further literature.

The literature search identified and explored these issues:

- regulation of Osteopathy
- evidence based practice
- clinical placements
- areas of advanced clinical practice within Osteopathy

## Governance

The AOAC Board has established a Professional Reference Group (PRG) to advise the AOAC Accreditation Committee on the review of the accreditation standards. Membership comprises key stakeholders and Osteopathy professionals who could share insights into regulation, education, and health policy. Members were selected after the EO and Chair of the Accreditation Committee reviewed the expressions of interest. The AOAC Accreditation Committee will report to the Board on the progress of the review.



Members of the PRG are:

- Ms Melanie Hunt, M.H.SC.(Osteo); B.Sc. (Clin.Sc.); Grad.Cert.Tert.Ed. Registered Practising Osteopath. Member of Qualification and Skills Assessment Committee (QSAC) as part of AOAC. AHPRA Panel Member.
- Professor Brian Jolly, BSc(Hons), MA(Ed), PhD. Conjoint Professor of Medical Education, School of Medicine & Public Health, Faculty of Health and Medicine, University of Newcastle, Australia and Adjunct Professor, School of Rural Medicine, University of New England. Previously Founding Chair Education Committee, and Founding Member, General Osteopathic Council, UK (1996-2002). Chair: Medical Radiation Practice Accreditation Committee (AHPRA)
- Ms Bimbi Gray, BNat BClinSci MOstMed Grad Cert Academic Practice. Course Coordinator, Lecturer Practitioner- Osteopathy, School of Health and Human Sciences, Southern Cross University
- Emily Jones, BSc (Clin Sci), MHS (Osteo), Grad Cert Neonatal & Infant Paed Man Thrpy, Grad Cert Tert Ed. Advanced Paediatric Osteopath in private practice, Member of the Osteopathy Australia Paediatric Clinical Interest Group Leadership Committee
- Clinical Professor Fiona Stoker, RN; BBUS Grad Dip (Public Sector Management), MBA Executive Officer, AOAC (Chair)

### How stakeholders can participate

In stage 1 of consultation, stakeholders can provide feedback by:

1. Completing an online survey  
The questions in this consultation paper are reproduced in the online survey, which is accessible via this [link](#).
2. Preparing a written submission  
Written submissions must include the stakeholder's name and contact details (phone number, email, address). They can be emailed to AOAC: [standardsreview@osteopathiccouncil.org.au](mailto:standardsreview@osteopathiccouncil.org.au)

Or posted to:

Standards review  
Australian Osteopathic Accreditation Council  
GPO Box 400  
Canberra City ACT 2601

In the interest of transparency, all written submissions will be published on the AOAC's website, unless the stakeholder has asked for their submission to remain confidential.

Material supplied in confidence, should be clearly marked 'In Confidence' and be provided as a separate attachment to non-confidential material. Information that is confidential or submitted in confidence will be treated as such, if the stakeholder explains why such treatment is necessary.

The Stakeholders may be asked to provide an open summary of confidential material or explain why such a summary cannot be provided.

The AOAC will publish a summary of survey results on its website.

**Survey responses or written submissions are requested by Wednesday 18 November 2020**

The AOAC's website will be updated to reflect each review stage. The date for the stage 2 of the consultation is yet to be advised.

The AOAC date of release for the revised osteopathic accreditation standards, subject to OBA approval, is yet to be advised.

## Background

### Workforce characteristics

Workforce survey data is required to be collected by the Australian Health Minister's Advisory Council for workforce planning undertaken by the Department of Health and State/Territory Health Departments. This data set is kept as consistent as possible each year to allow for longitudinal workforce planning and modelling. The last workforce survey data was done in 2017 and showed that the number of registered osteopaths increased by 17.1% from 1,968 in 2014 to 2,304 in 2017 (average annual increase of 5.4%). The number of employed osteopaths ('workforce') increased by 16.5% from 1,737 to 2,023 over the same period (an average annual increase of 5.2%). 53.4% of the Osteopathy workforce in 2017 comprised of women, an increase of 2.4% from 2014.

The 2017 Health Workforce Data records indicated that Osteopaths predominantly worked work full time, within the private sector and within the major cities of Australia. The average age of the workforce was 38.8 years, an increase from 38.5 years in 2014. The proportion of female osteopaths aged 35-44 years increased from 15.4% of the workforce in 2014 to 18.4% in 2017. More information can be found on the following website. (Department of Health, 2017). <https://hwd.health.gov.au/publications.html>

The Osteopathy Board of Australia also provide workforce data linked to workforce surveys completed each year through registrations. 31 December 2019, 2,599 osteopaths were practicing in Australia, predominantly working in Victoria (59%) and New South Wales (22%), with 65% of osteopaths being aged between 25-44 years (Osteopathy Board of Australia, 2019a). There has been an increase of 6.6% of osteopath registrants with the OBA since 2017/18. There is also a relative balance between female and male registrants with 54.7% identified as female (Australian Health Professional Regulation Agency, 2019; Osteopathy Board of Australia, 2019a). In an older publication by the Australian Institute of Health Welfare (AIHW), osteopaths predominantly work full time, in private practice, within the private sector in the major cities of Australia (Australian Institute of Health and Welfare, 2012).

### Influences on practice

Globally, health care is changing. An ageing population, a significant increase in chronic disease and co-morbidities, and the diverse needs of multicultural Australians all influence Osteopathy practice. At the same time, health and information technologies are creating flexible options for care provision. Osteopaths play a role in the provision of healthcare and contemporary accreditation standards are key to ensuring that education programs reflect contemporary workforce requirements. Critical appraisal of the standards is required to support the next generation of osteopaths to be well equipped to provide health care and meet future workforce challenges.

The most recent challenge for osteopathy has been the impact of the COVID 19 global pandemic. This has included the higher education sector and the practice of osteopathy. This has affected changes in the delivery of undergraduate education and the method of providing clinical services by osteopaths. The impact of the pandemic is included within the focus questions of this consultation paper.

# Key areas for consideration

## Interprofessional learning and collaboration in pre-registration programs of study in Osteopathy and across health disciplines

In 2019, Osteopathy education programs leading to registration in Australia were provided through three Universities based in New South Wales, Queensland, and Victoria. These included education programs undertaken over three to five years in length. Subjects included professional communication across disciplines and, referral for co-management with other health professions. Although all subjects offered in the Osteopathy education programs can be viewed and considered on University websites, some institutions did not clearly indicate if such subjects were included.

The AOAC is required to demonstrate to the Osteopathy Board of Australia that the accreditation authority has standards and/or processes that appropriately recognise the relevant National Safety and Quality Health Service Standards, including in relation to collaborative practice and team-based care. Consultation paper 1 will explore interprofessional learning and collaboration needs and Consultation paper 2 will explore further areas of the National Safety and Quality Health Service Standards

Interprofessional learning and collaboration needs to be included within undergraduate studies, to ensure that the graduate osteopath is equipped to promote the profession and ensure that interdisciplinary care is supported through relevant referrals and alliances. This includes developing trustful and respectful professional relationships that reflect the expertise and qualifications of the osteopath. This can also be extended to such clinical workshops as high-fidelity simulation to support experiential learning opportunities. By undertaking such interdisciplinary education, students across the professions can better understand each other's practices, promote a shared language that is not restrictive to one discipline and share the care collaboratively across the multidisciplinary team (O'Keefe, Henderson, & Chick, 2015).

Interprofessional learning and collaboration is required between Osteopathy and other health disciplines through the following measures:

- facilitation of interdisciplinary learning through sharing undergraduate subjects with other health disciplines
- improved understanding of the practice of Osteopathy by other health professions
- the strengthening of the status and role of Osteopathy within mainstream health
- an increase in referrals from other health disciplines

Interprofessional learning and collaboration is now a mandatory requirement in pre- registration courses

### Question 1

How important is it that pre-registration programs of study in Osteopathy have learning objectives that relate to interprofessional learning?

### Question 2

How can interdisciplinary collaboration be improved between Osteopathy and other health disciplines at the entry program level??

## Evidence based curriculum included within undergraduate education and within osteopathic practice

Evidence based practice (EBP) requires research evidence to be integrated within clinical practice (Leach et al., 2019). This includes evidence-based curriculum embedded within education programs leading to registration ensuring the graduate osteopath is equipped to critically integrate research within clinical practice. Various models have been presented that support using EBP within training. Such a model is the Sicily statement which utilises five steps; ask, access, appraise, apply and assess (Dawes et al., 2005). This process includes utilizing a search strategy for the research design, critically appraising and applying this evidence and evaluating and then reflecting on the new practice.

A barrier to integrating evidenced based practice is the tension raised between a traditional knowledge basis that conflicts with changes in practice informed by new research (Leach et al., 2019). Critical to the success of utilising EBP, is the ability and time required to incorporate this research evidence within clinical practice. Also fundamental to EBP is timely access to relevant online databases and peer reviewed literature which are critically analysed.

To achieve recognition and acceptance as a profession, research needs to underpin the education curriculum to equip and inform students' learning and practice. This approach needs to be further developed by the graduate and underpin all osteopathic practice.

### Question 3

How can evidence based practice be further developed and expanded within the pre-registration curriculum?

## Professional scope and pathways to advanced practice

Evidence based practice needs to inform all clinical practice and determine the approaches and choices in osteopathic diagnostic treatment plans. Grace et al., (2016) identifies a multi-stage reasoning process which begins with a biomedical approach to initially identify the underlying pathology. The practitioner then incorporates osteopathic diagnostic techniques, such as complex palpatory examinations, to inform and choose an appropriate management plan (Grace, Orrock, Vaughan, Blaiçh, & Coutts, 2016). The authors promote osteopathic clinical reasoning when working collaboratively across professional boundaries and supporting a multidisciplinary decision-making approach. The traditional scope of practice for the osteopath can then begin to be augmented through defined career pathways in the pre-registration education program, such as paediatrics, gerontology, and sports medicine etc. The use of collaboration and working across disciplines would also enhance the development and extension of referral networks. In education, the sharing of subjects, utilization of common clinical reasoning and assessment rubrics can only further develop the profession (Grace et al., 2016). In the context of linking safety to evidence to effective practice, it is necessary to engage in further osteopathic research to inform the gap in the literature. There is limited research evidence or guidelines to support pathways to advanced practice.

### Question 4

To what extent should educational pathways be included in pre-registration programs of study in preparation for areas of advanced practice?

### Question 5

What are the key areas of advanced practice relevant to the profession?

## Guidance on the use of evidence

The review and development of the osteopathic accreditation standards presents an opportunity to introduce evidence guides to support the accreditation standards. These would be designed to support education providers by providing contemporary and useful guidance on the evidence they need to include in their accreditation application.

Evidence Guides support the accreditation standards of the following Accreditation Councils:

- Australian Dental Council\*
- Australian Nursing and Midwifery Accreditation Council\*
- Australian Physiotherapy Council\*
- Australian Pharmacy Council
- Optometry Council of Australia and New Zealand\*
- Australian and New Zealand Podiatry Accreditation Council
- Australia Psychology Accreditation \*

Accreditation standards based on the ADC/DC(NZ) framework (\*) have developed evidence guides as separate documents. This provides a level of flexibility to review updates and respond to changes in the regulatory, education and health policy environment.

### Question 6

AOAC is considering the introduction of an evidence guide to assist education providers to supply the necessary documentation required for the accreditation assessment; would this be useful to education providers?

## The Accreditation Standards Framework

The *Accreditation Standards for Osteopathic Courses in Australia (Australian Osteopathic Accreditation Council, 2016)* ) were structured around two fields with a focus on the education provider and curriculum. These two fields then included one standard each and were subdivided into multiple criteria:

### Field one: Education provider context and governance.

1. Standard One
  - 1.1. Registration and standing
  - 1.2. Program accreditation
  - 1.3. Resource allocation

### Field Two: Osteopathic curriculum.

2. Standard Two
  - 2.1. Assessment
  - 2.2. Scholarship and research
  - 2.3. Learning outcomes and curriculum content
  - 2.4. Clinical content

The two fields with their two standards also included a set of individual criteria, varying from one to eight. The education provider must address the two standards within their accreditation application leading to a master's or bachelor of Osteopathy.

The recommendations from the Independent Review of the National Registration and Accreditation Scheme for health professions (December 2014) discussed the importance of accreditation authorities standardising accreditation processes and avoiding duplication for education providers with existing education accreditation processes (Australian Health Minister's Advisory Council, 2014).

Considering the Independent Review of the National Registration and Accreditation Scheme within the National Registration and Accreditation Scheme, the AOAC is now required to explore further opportunities to create consistency and collaboration across health professions for the accreditation of education programs for health professions. The current Osteopathy standards have served their purpose. It is time to improve them and shape the role of the osteopath, especially in view of feedback from education providers on the repetition of evidence required in the standards.

Over the past six years other health profession's accreditation councils have adopted the five Domain - standard framework for their accreditation standard framework. This has included the Australian Nursing and Midwifery Accreditation Council, the Council on Chiropractic Education Australasia, and the Australian Dental Council/Dental Council (New Zealand) (DC(NZ)).

These accreditation standards are characterised by five domains, each with a short standard statement (Table 1).

**Table 1 Five Domain standard framework**

NUMBER	DOMAIN	STANDARD STATEMENT
1.	Public safety	Public safety is assured.
2.	Academic governance and quality assurance	Academic governance and quality assurance processes are effective.
3.	Program of study	Program design, delivery and resourcing enable students to achieve the required professional attributes and competencies.
4.	The student experience	Students are provided with equitable and timely access to information and support.
5.	Assessment	Assessment is fair, valid, and reliable.

Each standard statement is underpinned by criteria, varying from six to twelve. The education provider must address 39 criteria in their accreditation application.

The Council of Chiropractic Education Australasia accreditation standards emphasize public safety. Standard 1, for example, is wholly dedicated to public safety, which aligns with these aims of the National Registration and Accreditation Scheme:

- protect the public by ensuring that only suitably trained and qualified practitioners are registered
- facilitate workforce mobility across Australia to enable the continuous development of a flexible, responsive, and sustainable Australian health workforce

The Chiropractic Framework and AOAC's revised accreditation framework reflect a similar structure and content with the five standards.

The osteopathic standards are transitioning to the new Accreditation Standards Framework with five standards in line with the accreditation standards of other registered health professions.

#### **Question 7**

Please briefly give any feedback regarding the five-standard structure for the future accreditation standards.

## Aboriginal and Torres Strait Islander Health and Cultural Safety

As reflected by other health profession accreditation councils, such as the Australian Nursing and Midwifery Accreditation Council, the inclusion of Aboriginal and Torres Strait Islanders within their accreditation standards is a matter of priority and importance. This has also been a requisite for all education providers to ensure that First Australians are incorporated within their educational curriculum, recruitment of staff and active engagement of the local community (Commonwealth of Australia, 2014). Similarly, the Australian Health Practitioner Regulation Agency (Ahpra) requires that Aboriginal and Torres Strait Islander health and cultural safety is embedded within the education, guidelines and training standards. (Australian Health Practitioner Regulation Agency, 2019; Commonwealth of Australia, 2014).

### Question 8

Is the cultural safety of Aboriginal and Torres Strait Islander peoples embedded within pre-registration programs and practices of osteopaths?

### Question 9

How should the cultural safety of Aboriginal and Torres Strait Islander students within educational programs be supported?

### Question 10

How should the new accreditation standards demonstrate the inclusion of Aboriginals and Torres Strait Islander's history, culture, and health within the curriculum?

## Impact of COVID-19 pandemic within undergraduate education, clinical placements and within osteopathic practice

The recent COVID 19, global pandemic has made a significant impact on higher education in Australia (Crawford J et al., 2020). This has included both undergraduate education and osteopathic practice.

Australian universities were initially required to respond to government directives which included physical distancing, responding to bans on public gatherings, and implementing strict infection control protocols. This influenced the Universities to increasing their online learning environments. Student clinical placements have also been affected because of the confined work settings. Consequently, this has negatively affected the fulfillment of their study and course requirements. AHPRA, National Boards and Accreditation Councils have worked closely with education providers regarding accreditation standards and whether education can be delivered through different modes such as online learning, increased simulation and use of technical aides such as video conferencing, telehealth, and smart phones. The National Boards, Ahpra and the Accreditation Councils jointly released [National Principles for Clinical Education](#) during the COVID-19 Pandemic to guide the decisions of professions and others who are involved with Clinical Education.

One of the key areas in education that affect all health professionals is their ability to put theory into practice through clinical experience. This has impacted on students who have not been able to attend student clinics due to the restrictions COVID-19 has placed on public attendance. Some professions have moved to recognising increased simulation or online practical examinations. Although COVID-19 has increased the challenges of providing clinical experience it may encourage more innovative practices particularly in the use of artificial intelligence in education.



**Question 11**

To what extent should other skills for non-contact care be included in the curricula (e.g. infection control)?

**Question 12**

How should clinical placement and clinical hour attainment issues be overcome?

**Question 13**

What are the long-term consequences of the pandemic influencing osteopathic practice?

**Question 14**

Has COVID 19 influenced osteopathic practice in other ways that should be addressed in undergraduate curricula?

**Future directions**

The following questions seek to explore how the standards could support the next generation of osteopaths to be well equipped to provide health care and meet future workforce challenges as well as providing an opportunity for identification of issues not covered in the present consultation paper.

**Question 15**

What changes are likely to impact the osteopathic profession in the future?

**Question 16**

How can the accreditation standards guide the graduate osteopath and the broader profession of Osteopathy to meet the future health care requirements of individuals and communities?

**Question 17**

Are there any other issues involving the accreditation standards that you would like to be considered that have not been presented in this consultation paper?

**Summary**

This consultation paper presents the current evidence on issues relevant to revising the osteopathic accreditation standards. While some issues raised are not new, it is crucial to respond to the challenges of developing accreditation standards for innovative and future directed Osteopathy programs.

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