

Question 1

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

Very important. IPL helps develop more work-ready new graduates who are prepared to collaborate with colleagues to deliver broader benefits to clients. IPL improves student understanding of roles of different health professions and prepare graduates for multidisciplinary work environments and potential referral pathways.

Osteopaths often work as sole practitioners, with a patient population that will be likely to increasingly suffer with multiple co-morbidities, IPL will improve co-ordinated care and better understanding of the goals of different health service providers.

Question 2 How can interdisciplinary collaboration be improved between Osteopathy and other health disciplines at the entry program level?

More collaboration between different disciplines during interprofessional learning simulation, together with the patient, to undertake assessment, diagnosis, intervention, goal-setting and the creation of a care plan.

Collaboration and teamwork is a core element of the National Safety and Quality Health Service Standards for health service organisations, particularly 'Comprehensive Care Standard'. Shared foundation subjects in entry level programs through education providers with other health disciplines, particularly allied health disciplines, could assist collaboration and broad health context understanding from an early stage.

Question 3

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

Student access to relevant peer reviewed literature and online databases in the domain of health, eg <https://www.unisa.edu.au/cahe> , NHMRC guidelines. Opportunities to participate in undergraduate research projects and ability to progress to research post graduate programs upon graduation if desired.

Question 4

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

Few students have a clear understanding of areas of specialised practice when undertaking pre-registration study. Interests in advanced areas of practice usually develop over time. In a pre-registration program of study overviews of educational pathways or pathways to specialisation would be useful to guide future planning, but there is a risk that over emphasis on advanced practice could limit future career opportunities and breadth of experience

Question 5

What are the key areas of advanced practice relevant to the profession? Aged care/gerontology advanced practitioners are likely to be in high demand with the growing aged population in Australia.

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?

Whilst not an education provider, it would seem to be essential.

Question 7

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

Support this 5 domain standard framework.

Question 8

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

Support that cultural safety training should be made a priority in the training of osteopaths, in line with other health disciplines, as required by AHPRA, and NSQHS standards.

Question 9

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

Allocation of designated support roles, staffed by Aboriginal and Torres Strait Islander peoples, for Aboriginal and Torres Strait Islander students

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?

Acknowledgement imbedded within the preamble.

Question 11

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

Infection prevention and control should be standard inclusion to ensure practitioners understand risk assessment and management, as well as standard precautions.

Skills in technology required for non-contact care should be included. Cannot assume students have skills in administering care using technology, just because they are adept at using smart phones. Also requires development of skills in social interaction via various platforms.

Question 12

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

Placements may need incentives, and also expert support (eg Clinical Educators/ networks and forms) to assure consistency across large and small practices.

Question 13

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

Increased importance of infection control; need for increased appreciation of social impacts of the pandemic on emotional wellbeing, including longer term impacts, and the effect on physical health; increased need for skills in health care delivery using technology, eg. telehealth.

Question 14

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

Suggest that undergraduates gain confidence and skills in mental health first aid/ monitoring psychological wellbeing would be relevant, with knowledge of referral pathways as required.

Question 15

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

Ongoing uptake of telehealth. Greater call for assessment and treatment to be evidence based and add value.

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?

Standards do not outline what the process is or how frequently education providers are required to provide evidence of things like resource allocation (std 1.3) or assessment (std 2.1). I also wondered if there were any requirements for the number of teaching staff per head in different professions?