

Standards review
Australian Osteopathic Accreditation Council
GPO Box 400
Canberra ACT 2601
e: standardsreview@osteopathiccouncil.org.au

19 November 2020

To whomever it may concern

Re: Australian Osteopathic Accreditation Council (AOAC) Standards

Painaustralia is pleased to provide input to inform the Review of the Osteopathic Accreditation Standards Consultation paper.

Painaustralia is the national peak body working to improve the quality of life of people living with pain, their families and carers, and to minimise the social and economic burden of pain in Australia. Painaustralia recognises the significant challenge that most health practitioners in Australia face in managing both the increasing prevalence of chronic pain as well as the current public health crises that have emerged from an over-reliance on pharmacological pathways to manage this complex chronic condition.

The evidence demonstrates that chronic pain constitutes a significant burden of disease. This knowledge, together with a blueprint for action in the form of Australia's National Strategic Action Plan for Pain Management, has set in train the path to best practice pain care and management, which is currently being considered by Australia's National Cabinet and all state and territories for national implementation.

The National Action Plan lists several items that have been developed in collaboration with the broader pain management sector. An important objective is to ensure that health practitioners are well-informed on best-practice, evidence-based pain assessment and care and are supported to deliver this care.

Under this objective, the Action Plan outlines the development of an overarching education strategy to promote evidence-based pain management education across health practitioner disciplines, through undergraduate, postgraduate, vocational training and continuing education.

This should include, among other things, standardisation among universities in their teaching curricula with regard to pain management; and a focus on value-based healthcare as well as quality use of non-pharmacological approaches to pain management such as exercise, diet etc. The development of this strategy should also consider the National Registration and Accreditation System review recommendations; and self-regulated allied health professionals are among the groups that the Action Plan flags as disciplines engaged in the education strategy.

The issue: embedding interdisciplinary care in curriculum

There is a growing consensus and research base that supports the importance of coordinated interdisciplinary management strategies to address pain. This approach is endorsed in the 2010 National Pain Strategy and by the International Association for the Study of Pain. This requires coordinated interdisciplinary assessment and management involving, at a minimum, physical, psychological, and social/environmental risk factors in each patient.

This is known as the biopsychosocial (or more recently sociopsychobiomedical) prism from which to view a complex health issue like pain from different angles. Treatment is not 'one-size-fits-all' but needs to be person-specific.

A multidisciplinary team is likely to include a physician, clinical psychologist or psychiatrist, physiotherapist or other allied health professional such as an osteopath, pharmacist and may include a dietician and social worker or counsellor. Nurses are also an important part of the multidisciplinary team. A critical step in the development of an effective pain management plan is face-to-face discussion with consumers and team members on the relative importance of factors identified in the patient, and ongoing communication between team members and patients on the progress of the pain management strategy.

Interdisciplinary pain management can be provided in specialist pain clinics. However, the National Pain Strategy recommends that in most cases, people living with pain can be best supported in primary care, with only a small proportion requiring tertiary care.

Interdisciplinary collaboration

Embedding interdisciplinary collaboration improvements between osteopathy and other health disciplines at the entry program level is a laudable objective of the new standards. However, implementation depends on the institutions where the undergraduate training programs are based; opportunities for integration are typically sought early in training (horizontal integration) and longitudinally across the program (vertical integration).

Painaustralia also notes that evidence-based practice can be further developed and expanded within the pre-registration curriculum by initiating a review of current curricula and recommendations made to address any specific evidence-based gaps. Specifically, regarding pain management, there is good evidence to guide knowledge and skills training throughout the curriculum. Where possible, a minimum level of contemporary evidence-based pain knowledge and core skills are recommended in line with curriculum from the International Association for the Study of Pain.

Painaustralia also agrees with and supports the Agreed 5 domains included in the consultation paper which are consistent with those adopted by other registered health professionals. Consistency is important and it will be critical to have clear guidance on how the suggested objectives of the Standards can be operationalised.

Cultural safety of Aboriginal and Torres Strait Islander students within educational programs should be supported by a collaboration with Indigenous bodies who can provide culturally appropriate input into the operationalisation of the five standards.

Pathways should also be developed which enable practitioners to gain advanced training across pain management.

Given the Impact of COVID-19 pandemic within undergraduate education, clinical placements, and within osteopathic practice, skills for non-contact care should be mandated in accreditation as standard practice in the curricula (e.g. infection control).

Conclusion

As noted in the consultation paper for the AOAC Standards, inter-professional learning and collaboration is now a mandatory requirement in pre-registration courses. However, without action, the translation of interdisciplinary chronic pain assessment and care into time-poor primary care settings will remain out of reach. Embedding patient-based care around this in primary care is vital to improve health outcomes for people living with pain. Allied health practitioners are an important part of the healthcare system and osteopaths will play an essential role to bridge these existing gaps.

Painaustralia thanks the Australian Osteopathic Accreditation Council for giving us the opportunity to share our views on this issue. Please do not hesitate to contact us should you need more information.

Yours sincerely



Carol Bennett
Chief Executive Officer