Australian Statement of Scope of Practice in Osteopathy

Australian Osteopathy Association Antony Nicholas, Chief Executive Officer



Scope of Practice in Australia

- *Can be defined by the regulator under the National Law [Div. 3 Section 38(2)b].
- *It is not a requirement and the regulator has chosen not to define.
- *The AOA is pleased the OBA have not, as the profession should lead and define itself.
- *Scope is also defined by the core competencies outlined in University accreditation standards that all graduates must meet.
- *Those against Scope development, fail to understand that the osteopathic scope already exists, just not in one document.

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Development process

- *Over the last two plus years the AOA has been undertaking a wide range of consultations.
- *Discussion with our members and held meetings with key stakeholders both within Australia and abroad regarding scope of practice.
- *We also undertook a review of Scopes from abroad and in other professions
- *Discussed in many meetings, telephone calls and debates across the country and via conferences, webinar and we want to thank the hundreds of members who have engaged.
- *The scope of practice statement was launched at at our 2013 Annual General Meeting on the Gold Coast.



Development process

- *This well-known phrase of a sometimes intangible concept can be confusing, confronting and is downright challenging too many osteopaths.
- *The AOA firmly believes that the profession should own and lead the development of its scope of practice statement.
- *This is an important development for the profession and helps osteopathy to define itself, not letting others do it for us.
- *It is important to remember; however, that scope documents are not for osteopaths but for others to conceptualise osteopathy within healthcare.



"A comfort zone is a beautiful place, but nothing ever grows there."

Scope Debate in Australia

- *Osteopathy is a weak brand we need a USP
- *Osteopathic skills set is poorly defined or understood
- *Need to stake a claim for Osteopaths and their role in the healthcare system.
- *Field of manual medicine is already crowded.
- *Osteopathy is defined by its philosophy not technique.
- *The formless *no scope* scope of practice is <u>not</u> serving us well.
- *The formless scope or a restricted scope statement is a form of prohibition.

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Scope Debate in Australia

- *Techniques vs philosophy
- *Evidenced based vs Belief based / experiential
- *Structural vs Cranial
- *Totality belief system vs healthcare profession
- *CAM vs Manual Medicine
- *Personal / Professional SoP Differentiated
- *Evolution or Extinction?
- *Modernising = Medicalising?



Professions perspective

- *Osteopathic invisibility / Professional Identity
- *ACCORB / ANZOC accreditation standards focused on educational inputs not outcomes. What are we training people to do?
- *Osteopathy is a maturing and diversified profession
- *No clear relationship between training pathways and clinical interest in practice
- *Lack of career pathways
- *How would a patient / referring healthcare professional find a paediatric osteopath? Sports osteopath?

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Professions perspective

- *40% of AOA members are using needling techniques in practice without standards / minimum training requirements being determined
- *Credentialling / Clinical Interest Groups
- *Clinical complexity
- *Generational Change
- *Osteopathy at a junctional point where to next?
- *AOA-USA Manual Therapy SoP Plus?



AOA Scope Framework

- *Patient centred
- *Credentialling processes / Clinical Interest Groups
- *Personal / Professional SoP
- *Title / Recognition of Advanced Standing
- *Informative to other Healthcare Professionals
- *Broadly defined Osteopathic Scope
- *Allows acquisition / incorporation of PG learning
- *Inclusive but





Statement of Scope of Practice in Osteopathy

Osteopaths are committed to effective, patient-centred healthcare. As the scientific understanding of health and disease evolves, this Scope of Practice Statement will require ongoing revision.

This statement is for health professionals, third party funders and policy makers, it gives an overview of osteopathic practice and its place within the Australian healthcare system.

This statement has been developed by the Australian Osteopathic Association (AOA) in alignment with The Oseopathic Service Descriptors," The Capabilities for Osteopathic Practice, "the Code of Conduct for Registered Health Practitioners," and the World Health Organization Benchmark Statement on Osteopathic Education." The statement is further influenced by broader health policies legislation, regulation and health worldrore debase.

Osteopaths are committed to effective, patient-centred healthcare. As the scientific understanding of health and disease evolves, this Scope of Practice Statement will require on-going revision.

An Overview of Osteopathy

Osteopaths are autonomous primary contact practitioners who treat patients from across the life span, 90% of patients access onteropathic care without a referral. Osteopaths have a professional focus on conditions affecting the neuro-municulosketical system and the management of pain.

Osteopathy is a system of diagnosis and treatment that recognises the following principles:

- the body is one unit of function
- the body has self-regulating mechanisms
- structure and function are reciprocally inter-related
- therapeutic management is applied with an understanding of these principles and a thorough knowledge of clinical sciences.

These esteopathic principles, in conjunction with current medical knowledge, inform the care given to patients. Scientific plausibility and evidence-informed reasoning are fundamental to diagnosis, treatment and case management.

Osteopaths follow these principles of patient care:

- 1. The patient is the focus for healthcare
- 2. The patient has the primary responsibility for their own health.
- 3. Effective treatment is founded on these principles and.
 - incorporates evidence informed guidelines
 - optimises the patients natural healing capacity
 seeks to address the primary cause of disease, and
 - mphasizes health maintenance and disease prevention.

australian osteopathic association

www.osteopathy.org.au | 1800 467 836.



Our document covers:

- *A preamble on how the document sits with a range of regulatory frameworks, clinical or funding guidelines.
- *An overview of osteopathy principles and clinical practice.
- *A brief overview of regulation, education and continuing professional developments.
- *Advanced Clinical Standing and further credentialing
- *Osteopathy within the Australian healthcare systems and more broadly globally.



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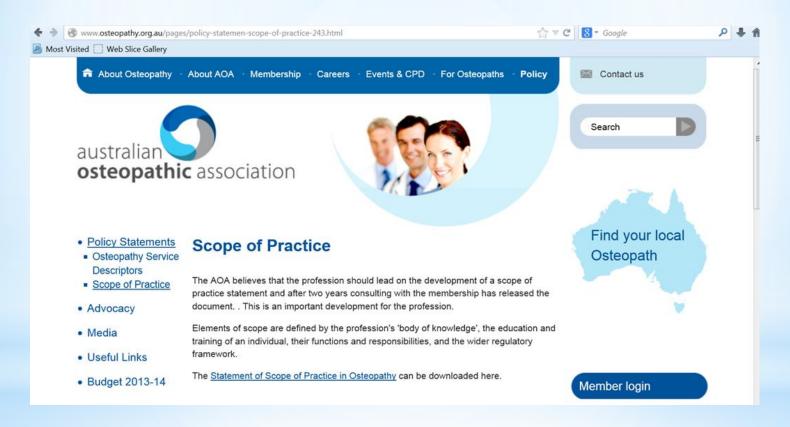
The emphasis on the neuromusculoskeletal system as integral to the body's function, a person's health and to patient care is a defining characteristic of osteopathy.



Osteopaths understand the wider healthcare environment and the role of the primary care practitioner within the healthcare system.



http://www.osteopathy.org.au/pages/policy-statemen-scope-of-practice-243.html





The aim of CIG

The purpose of the clinical interest groups (CIG) is to support members' CPD needs; career development aspirations; provide a mechanism for osteopaths to 'credential' their skills sets and to complement the scope of practice advanced standing objectives.



The aim of CIG

In the foreseeable future it is unlikely that osteopathy will have endorsements or specialist registration in Australia.

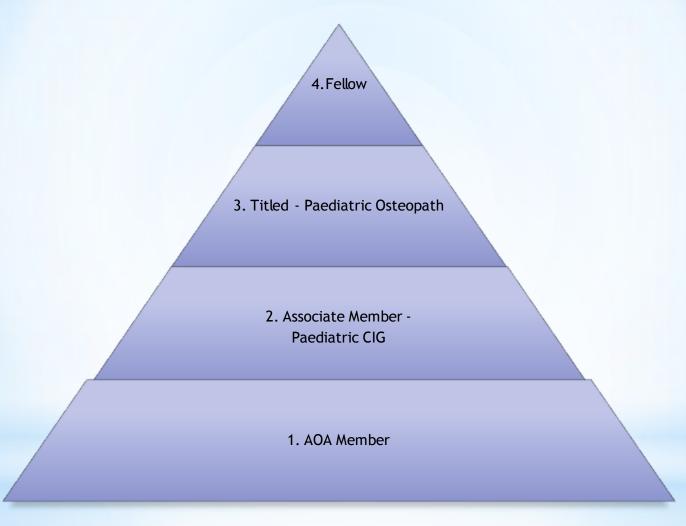
The CIG are the first step on the path to developing sufficient differentiation and/or specialisation in practice to merit endorsements on osteopathic registration.



AOA Clinical Interest Groups

- *Needling techniques in Osteopathic Practice
- *Child / Infant Health
- *Gerontology
- *Occupational Health / Rehabilitation
- *Pain Management
- *Sports Medicine







Questions?

Australian Osteopathy Association

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