9 August 2013

Mr Robert Fendall Chair Osteopathic Board of Australia National Board Services Australian Health Practitioners Regulation Agency 111 Bourke Street GPO Box 9958 Melbourne VIC 3000



Via email: Cathy.Woodward@ahpra.gov.au and osteoboardconsultation@ahpra.gov.au

Dear Robert,

Revised Draft Framework: pathways for registration of overseas trained osteopaths

The Osteopathic Council of New Zealand (OCNZ) appreciates the opportunity to comment on your revised proposal.

We note that the Osteopathy Board of Australia (OBA) has now accepted the principle that assessment and a period of supervised practice of international osteopathic graduates on the competent authority pathway is warranted.

Whilst this is progress we feel that the details provided of the proposed scheme are rather scant. We are not confident that the assessment proposed is sufficiently robust to allay our concerns.

The revised proposal differs greatly from the original overseas assessment process developed jointly by the OCNZ and the Australian and New Zealand Osteopathic Council (ANZOC). Some of the leading New Zealand and Australian academic authorities on the assessment of clinical competence were used as advisors in the design of the original process.

Given the departure from the best practice approaches they identified we would welcome further information on the rationale of your revised proposal.

ANZOC Assessment

No information has been provided on the nature of the ANZOC assessment that is referred to in the document. This would seem to be an oversight and it does not allow us to form a view on its worth.

For example, how does this relate to the supervision plan? Is the ANZOC assessment designed to identify weaknesses that are addressed during the supervised period of practice? If so, how will competence by demonstrated / assessed in practice?

Supervisory Relationship and Conflict of Interest

It is not acceptable that a supervisor may be the business owner, an employer of the supervisee or in a close personal relationship. Such a conflict of interest could not be

adequately managed. The quality of the supervision is of central importance in ensuring the process is able to identify and remedy shortcomings in practice.

Standard Setting and Supervisor Training

The process as originally conceived, as you are aware, has been fully implemented in New Zealand. We cannot overstate the importance of adequate training and support for the supervisors. We feel your scheme is undermined further by the intention to use volunteer supervisors. The role is demanding and we think that it is naïve to believe that a supervisory workforce will provide the service without remuneration.

How will the OBA ensure consistent approaches to supervision? What standards or capability framework will be used as a benchmark? How will the OBA ensure that the standards expected in practice from international osteopathic graduates are comparable to graduates from accredited programmes in New Zealand or Australia?

Lack of Supervised Practice on the Standard Pathway

In the original process the concepts of standard and competent authority pathways were taken from the model of assessment used by the Australian Medical Council. It is accepted that the highest level of evidence of competence is performance in practice. Therefore we do not understand the rationale that candidates on the standard pathway will not be subject to a period of supervised practice, whereas those that are eligible for competent authority will. We are also confused that competent authority candidates can elect to be assessed on the standard pathway. What purpose does that serve?

In summary:

It would be helpful if more details on assessment methodology were made available and the framework the OBA is intending to use as a reference for competence in practice were made explicit. As it currently stands we cannot be satisfied that the proposed assessment is comparable to that in place in New Zealand.

Yours sincerely,

Emma Fairs Chairperson

Osteopathic Council of New Zealand