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Dr Cathy Woodward
Executive Officer
Osteopathy Board of Australia

Dear Dr Woodward,

Re: Draft Guidelines for Supervision of Osteopaths

The Osteopathy Council of New South Wales (OC NSW) appreciates the opportunity to comment on the OBA's proposed draft guidelines. However the OC NSW feels that, in their current form, the draft guidelines offer insufficient protection for practitioners and the public.

It is our impression that the OBA is advocating the adoption of a generic model of supervision that may well be suited to employment within public health facilities or large private healthcare providers, where line management arrangements, team-based working and human resources advice and support may be relied upon to deliver such supervision. However, these factors or arrangements are uncommonly found in the vast majority of osteopathic workplaces, where self-employment in sole practice, or small group practice, is the norm.

The approach being advocated lacks an objective assessment of competence. In our opinion it is not acceptable for any regulatory board, in the absence of a transparent and robust assessment methodology, to be making assumptions and judgments with regard to a practitioner's competence. The supervision policy contains a recency of practice policy with no algorithm or assessment component. This places the public at considerable risk, as self-assessment is clearly inappropriate and inadequate for determining competence. As well, it exposes the regulatory authority to accusations of subjectivity and injustice.

Capabilities Framework

The policy does not reference a capabilities framework. An individual osteopath working under a supervision order would have no objective frame of reference for what constituted competence in practice.

How could the Board, in the absence of such a framework, ensure an acceptable and defensible consistency in standards?

Would the Board be able to defend itself against allegations of bias where individual supervisors are perhaps accused of imposing personal approaches to practice as being the required standards? This clearly leaves supervisees and the whole process vulnerable.

The OC NSW suggests that the Capabilities for Osteopathic practice based on research funded by the Osteopaths Registration Board of New South Wales would form a suitable capabilities framework. Last year the Osteopathy Board of Australia funded research by Victoria University to produce evidence and performance indicators to complement the capabilities framework. It would seem appropriate to put this work forward as a reference.

Supervisors

Clinical supervision and mentoring skills are required to competently carry out a supervisory role. It is our concern any osteopath with 5 years registration may be eligible to supervise another in the absence of training programme to equip the supervisor with the necessary knowledge, skills and attitudes. However, merely being in practice for 5 years is not an indication that an individual registrant will have supervisory skills. In the absence of a capabilities framework this clearly increases further the risk that a supervisor's judgment could lead to allegations that personal and subjective determinations of what constitutes competence in practice are being imposed. As well, we are concerned at the cost to the applicant of a supervisor, and therefore the fact that supervisors are benefitting financially from the process, which is therefore open to abuse. We see these factors as a major weakness in the proposal.

The Australian and New Zealand Osteopathic Council (ANZOC) used the services of some of Australia's leading experts in clinical assessment in developing their overseas assessment process. The proposed scheme is clearly divergent from the ANZOC methodology. The OC NSW has sought an opinion from faculty at Southern Cross University with expertise in clinical assessment and the consensus is that the proposed Supervisory scheme does not meet current best practice.

Conflict of Interest

Given that osteopaths are almost exclusively employed in small private practices we are concerned that having a supervisor who works in the same practice is an unacceptable conflict of interest. The supervisor will very likely have a pecuniary interest in the supervisee successfully completing their programme, or indeed in not completing the programme. In either scenario the quality of supervision is affected and the result may well weaken the protection of the public. The OC NSW believes that only within university teaching clinics could the levels of supervision required for levels 1 & 2 be safely and fairly delivered.

Algorithm for Recency of Practice Supervisory Relationships

We suggest the OBA could outline a general schema for recency of practice that outlines the general principles. This will also ensure that the prerogative of public protection is being seen to be met.

Professional Indemnity Insurance

Has it been determined that sufficient professional indemnity insurance will be available to all participants within the supervisory process?