OSTEOPATHY BOARD OF AUSTRALIA

update



Issue 6 - June 2013

Welcome to the Osteopathy Board of Australia's May 2013 newsletter.

New guidelines for all osteopaths

After wide-ranging public consultation, the Osteopathy Board of Australia (the National Board) has recently published three new guidelines on its <u>website</u> which are important reading for all osteopaths.

These guidelines can be used in proceedings under the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law) as evidence of what constitutes professional conduct or practice for osteopathy. The new guidelines complement the existing Code of conduct for registered health professionals (Code of conduct) and Guidelines for clinical records.

Informed consent guidelines

Informed consent is the valid consent of the patient to a proposed examination, treatment or procedure, given after appropriate advice and information has been provided by the practitioner. It is a dynamic, continual two-way process which must be documented in the patient's file.

Gaining a patient's consent to treatment is not a 'oneoff' activity when the patient first visits the osteopath's
practice. It should be repeated when a patient returns after
a period of absence and when their condition or proposed
treatment plan changes. *Informed consent: guidelines for*osteopaths are intended to foster better communication
between osteopath and patient, so that patients are able,
with their osteopath, to make the best decisions about their
osteopathic care.

Patients have a right to know the usual and serious inherent risks of osteopathic treatment and to decide for themselves whether they are prepared to accept those risks. Osteopaths cannot make those decisions for patients or unduly influence their decision.

Careful consideration needs to be given to the way information is communicated in relation to potentially sensitive procedures or treatment. The patient should have an opportunity to ask questions to elicit a better understanding of the treatment or procedure, so that they can make an informed decision on whether to proceed or to refuse a particular course of osteopathic intervention. The guidelines set out practical ways to gain and document the patient's consent to treatment.

Sexual and professional boundaries guidelines

Sexual and professional boundaries: guidelines for osteopaths complement the National Board's Code of

conduct and provide specific guidance on professional boundaries in the osteopath-patient relationship. The types of professional boundaries covered in the guidelines include sexual, physical, emotional and familial.

The guidelines confirm that good osteopathic practice relies on trust between osteopaths and patients and their families. They confirm that it is unethical and unprofessional for an osteopath to breach this trust by entering into a sexual relationship with:

- a patient (regardless of whether the patient has consented to the activity or not)
- a person who is closely related to a patient who is under the osteopath's care, or
- a former patient in some cases.

Mandatory reporting requirements oblige practitioners, employers and education providers to report 'notifiable conduct', which includes engaging in sexual misconduct in connection with the practice of the profession and providing osteopathic care.

The osteopath has a professional responsibility to understand and respond sensitively and respectfully to the needs of each patient in conducting physical examinations and treatment.

Guidelines for supervision of osteopaths

These guidelines set out what the Board considers safe and effective supervision for a range of regulatory needs. Supervision may be required in a range of circumstances including complying with the Board's *Recency of practice registration standard* or in conjunction with a condition or undertaking to address a conduct, performance or health issue

The guidelines apply to the supervisor and the osteopath requiring the supervisor, and outline:

- · principles and levels of supervision
- requirements and responsibilities for supervisors and supervisees, and
- reporting requirements, including the requirements of a supervision report.

When deciding the level of supervision required, the Board will always consider the individual circumstances, including the purpose of the supervision and the associated level of risk. A range of templates have been developed to support these guidelines.



The term 'specialist' cannot be used by osteopaths

Osteopaths cannot use the term 'specialist' in relation to their practice or registration in their advertising or any other materials

Specialist registration applies to some registered health practitioners, and is a protected title under the National Law. However, 'specialist' does not apply to osteopathy in Australia as osteopaths are registered for general registration only.

Under the National Law, it is an offence (with serious penalties) for a person who is not a specialist health practitioner to:

- · take or use the title 'specialist health practitioner'
- take or use a title, name, initial, symbol, word or description that indicates, or could be reasonably understood to indicate, the person is a specialist health practitioner, or is authorised or qualified to practise in a recognised specialty, or
- claim to be registered or qualified to practise in a recognised specialty.

The use of words such as 'specialises in' may be misleading or deceptive as patients can interpret the advertisements as implying that the osteopath is more skilled or has greater experience than is the case; or is more qualified or more competent than a holder of the same registration category.

Words such as 'experienced in' or 'working primarily in' are less likely to be misunderstood as a reference to endorsement or specialist registration.

For further information, see the *Guidelines for advertising* of regulated health services on the Board's website under *Codes and guidelines*.

Community Reference Group: membership finalised

A wide cross-section of individuals with strong links to communities applied to be members of the new national Community Reference Group and the positions have been announced. The group is expected to hold its first meeting in coming months.

The Community Reference Group is designed to advise AHPRA and the National Boards on ways in which community understanding and involvement in our work can be strengthened. This might include:

- strategies for promoting greater community response to consultations
- ways in which the national registers of practitioners can be more accessible and better understood, and
- strategies to build greater community understanding of how practitioner regulation works.

For more information, see the media release on the AHPRA $\underline{\textit{News}}$ page.

Keep up to date with all National Board news by visiting www.osteopathyboard.gov.au

