

Osteopathy Council of New South Wales

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Position Statement on Scope of Practice in Osteopathy

Introduction

The Osteopathy Council of New South Wales (the Council) is responsible for the management of complaints about the conduct, professional performance, health and competence (fitness to practice) of any osteopath practising, or student studying in an approved program leading to registration in NSW.

The Council is established by and functions in accordance with the *Health Practitioner Regulation National Law (NSW)* (the National Law). Council members are appointed by the Governor on the recommendation of the NSW Health Minister and their work is supported by the Health Professional Councils Authority (HPCA). The paramount consideration of the Council is the protection of the health and safety of the public.

This paper seeks to outline some of the challenges that the Council faces with regard to lack of clarity on scope of practice in the Australian osteopathic profession. It is not intended as a definitive statement on what constitutes the osteopathic scope of practice; rather, it is intended to raise awareness amongst NSW registered osteopaths and other interested parties of the practical problems that the current state of affairs presents to those charged with overseeing the management and investigation of complaints under the National Law, the potential confusion amongst patients and other healthcare disciplines as to what health care needs an osteopath may legitimately seek to meet, and the vulnerability of osteopaths who may be accused of acting outside their undefined scope of practice.

Scope of the Problem

If osteopathy is simply that which an osteopath concerns him or herself with in his or her professional life, then the profession is ill defined and osteopathy becomes a free form of practice. For regulators and patients this would pose considerable problems; how would one determine what constituted competence? Which healthcare needs should osteopathy seek to meet? How would one determine training requirements?

Conversely, if osteopathy is framed as a narrowly defined field of interest, how and who would determine what constituted legitimate forms of practice? An overly restricted scope would serve to restrict options for osteopaths and reduce patient choice.

Scope of practice is referred to throughout the National Law and the National Board's guidelines. The National Law contains a number of mechanisms for managing scope of practice issues. National Boards have powers to develop, subject to ministerial approval:

- Registration standards for scopes of practice of health practitioners registered in the profession Part 5 Division 3 Section 38(2).
- Endorsements Part 2, Section 15
- Criteria for general and specialist registration with associated protected titles.

The Council acknowledges that the National Registration and Accreditation Scheme is in its infancy and with regard to scope of practice, it is understandable that thus far the National Board has not determined a registration standard for scope of practice.

However the under-development in this policy space ought to serve as an impetus to initiate debate on matters of scope of practice rather than an assumption that either there is no scope of practice, or the scope is unlimited.

Some of the issues that need to be addressed when discussing scope of practice in osteopathy are outlined below:

Holism and boundaries on practice

The Council understands the difficulty involved in defining and therefore restricting the practice of osteopathy. This difficulty arises because of the broad and holistic understanding of the human body central to osteopathic philosophy and practice, and the reality that osteopathic practice is increasingly diverse in its form. Osteopaths understand that the body is a co-ordinated biological unit, but whilst there may well be a somatic component in many presentations, osteopathic manual therapy may not be appropriate as the principal treatment modality. However, utilizing a holistic approach clearly does not establish that one's scope of practice is unbounded. Osteopathic care should arise from plausible and logical concepts and must be clinically defensible.

Historical perspectives on practice and the advent of evidenced-based practice. In osteopathy, as in all health professions, as the understanding of health and disease causation expands, the re-examination of cherished concepts and treatment becomes imperative. Osteopathic philosophy is a conceptual lens through which osteopaths interpret and apply the developing knowledge on human health and disease. It should not be a fixed canon, and osteopathic treatment must be contemporary, evidenceinformed and biologically plausible.

Adjunctive modalities

As it is commonplace for practitioners to combine OMT with adjunctive modalities such as cranio-sacral techniques and variations, acupuncture and related needling techniques, exercise prescription and nutritional advice, practitioners must take care to ensure they are honest with patients about their level of training and the utility and evidence base of these approaches.

Primary healthcare

Osteopaths are part of the primary healthcare team, and it is therefore important that osteopaths understand the wider healthcare environment and the role of the primary care practitioner within the healthcare system. As it is implicit that the various clinical

disciplines and care pathways function to meet patients' healthcare needs, osteopaths also need to understand their role and boundaries, so they can ensure appropriate care.

With the above in mind, the Council proposes that the following ought to be integral to the legitimate and appropriate practice of osteopathy:

- Osteopathy's principal field of interest is the diagnosis and treatment of conditions of the neuro-musculoskeletal system and the management of pain.
- Osteopathy is primarily a manual therapy modality.
- Osteopathy is a patient-centred approach to healthcare and the healthcare needs of the patient must be paramount in all patient practitioner interactions.
- The competent practice of osteopathy requires broad diagnostic competencies, and a clinical examination and differential diagnosis is required in order to determine if a patient's presentation is suitable for management by an osteopath or if referral to other healthcare providers would best meet the patient's needs.
- Osteopaths must only use techniques and approaches in practice where they are competent to do so.
- Osteopathic treatment must be directed only to those conditions which are amenable to manual therapy.
- Techniques and claims which have been reliably and consistently discredited as ineffective or implausible, as well as claims which are misleading and false and contrary to accepted clinical practice, cannot be considered to be part of the legitimate clinical repertoire.
- Osteopaths and their patients may hold a range of health beliefs, however within the context of osteopathic practice, osteopaths should not counter public health policy positions on vaccination and public health promotion initiatives.