

## PUBLISHED VERSION

Maree O'Keefe, Amanda Henderson, Rachael Pitt

### Health, Medicine and Veterinary Science: Learning and Teaching Academic Standards Statement

Australian Learning and Teaching Council, 2011; 1-92

Support for the original work was provided by the Australian Learning and Teaching Council Ltd, an initiative of the Australian Government

This work is published under the terms of the Creative Commons Attribution- Noncommercial- ShareAlike 3.0 Australia Licence. Under this Licence you are free to copy, distribute, display and perform the work and to make derivative works

#### PERMISSIONS

<https://creativecommons.org/licenses/by-nc-sa/3.0/au/>



This is a human-readable summary of (and not a substitute for) the [license](#).

[Disclaimer](#)

#### You are free to:



**Share** — copy and redistribute the material in any medium or format

**Adapt** — remix, transform, and build upon the material

The licensor cannot revoke these freedoms as long as you follow the license terms.

#### Under the following terms:



**Attribution** — You must give **appropriate credit**, provide a link to the license, and **indicate if changes were made**. You may do so in any reasonable manner, but not in any way that suggests the licensor endorses you or your use.



**Non-Commercial** — You may not use the material for **commercial purposes**.



**ShareAlike** — If you remix, transform, or build upon the material, you must distribute your contributions under the **same license** as the original.

**No additional restrictions** — You may not apply legal terms or **technological measures** that legally restrict others from doing anything the license permits.

**11 September 2015**

<http://hdl.handle.net/2440/94322>

# Learning and Teaching Academic Standards Project

## HEALTH, MEDICINE AND VETERINARY SCIENCE

### Learning and Teaching Academic Standards Statement June 2011



AUSTRALIAN  
LEARNING  
& TEACHING  
COUNCIL

Promoting excellence in higher education

An initiative of the Australian Government Department of Education, Employment and Workplace Relations

## CONTENTS

Executive Summary	01
1. Learning and Teaching Academic Standards Project Background	03
1.1 Discipline areas encompassed in the demonstration project	03
2. Health, Medicine and Veterinary Science in the Learning and Teaching Academic Standards Project	04
2.1 Scope	04
2.2 Rationale	04
2.3 Consultation and development process	05
3. Learning and Teaching Academic Standards Statement for Health, Medicine and Veterinary Science	07
3.1 Nature and extent of Health, Medicine and Veterinary Science	07
3.2 Threshold Learning Outcomes for Health, Medicine and Veterinary Science	10
4. Notes on Threshold Learning Outcomes for Health, Medicine and Veterinary Science	11
5. Appendices	12
Appendix 1: Terms of reference and membership of advisory panel	12
Appendix 2: Consultation and document review	17
Appendix 3: Abbreviations	86



# HEALTH, MEDICINE AND VETERINARY SCIENCE STANDARDS

Learning and Teaching  
Academic Standards Project

Health, Medicine and Veterinary Science  
Academic Standards Statement

June 2011

## EXECUTIVE SUMMARY

Healthcare is a complex multi-professional discipline with a longstanding history of quality and safety standards monitoring. There is, however, currently no overarching statement of healthcare professional entry-level threshold learning outcomes (TLOs).

In keeping with the interrelated nature of healthcare disciplines, it was determined that the TLOs for Health, Medicine and Veterinary Science would encompass the full range of Australian healthcare disciplines.

A comprehensive listing was developed of healthcare qualifications offered by Australian higher education providers, together with relevant professional standards related documentation. Draft threshold learning outcomes were then developed through a process of grouping existing professional accreditation standards/competencies for individual healthcare disciplines into common content domains. Where relevant, international accreditation standards for individual disciplines were also reviewed.

A discussion document with the Draft Threshold Learning Outcomes in Health, Medicine and Veterinary Science was circulated nationally to over 70 Australian healthcare Councils of Deans and professional and accreditation bodies. In addition, information about the project was sent to over 950 academics. The Discipline Scholars also undertook a national program of workshops and meetings.

Following the sector wide consultation phase, the draft TLOs were revised and refined in light of the feedback received, including a final round of consultation with key academic and professional groups.

The outcomes of this project have, for the first time, enabled a process whereby common draft TLOs have been identified for the full range of Australian healthcare disciplines at professional entry-level. In addition, these TLOs have been successfully mapped to the external professional accreditation standards/competencies of each individual discipline. The Project Advisory Panel has formally endorsed these TLOs.

The Discipline Scholars for Health, Medicine and Veterinary Science, Amanda Henderson and Maree O'Keefe acknowledge the contributions of their disciplinary colleagues in supporting this project. In particular they

extend their thanks members of the Project Advisory Committee and the Australian Learning and Teaching Council (ALTC).

### **Project Leaders**

**Discipline Scholars:** Professor Amanda Henderson and Associate Professor Maree O'Keefe

**Project Officer:** Dr Rachael Pitt

# 1. Learning and Teaching Academic Standards Project Background

The Australian Government is developing a new Higher Education Quality and Regulatory Framework which includes the establishment of the Tertiary Education Quality and Standards Agency (TEQSA).

TEQSA will be a national body for regulation and quality assurance of tertiary education against agreed standards. In developing the standards, the Australian Government is committed to the active involvement of the academic community. The Australian Government has commissioned the ALTC to manage aspects of the Learning and Teaching Academic Standards component of the framework. The approach was designed to ensure that discipline communities would define and take responsibility for implementing academic standards within the academic traditions of collegiality, peer review, pre-eminence of disciplines and academic autonomy.

In 2010, both directly through a specific contract and indirectly through base funding of the ALTC, the Australian Government funded a one-year demonstration project to define minimum discipline-based learning outcomes as part of the development of Learning and Teaching Academic Standards.

The project took as its starting point the award level descriptors defined in the Australian Qualifications Framework (AQF). Threshold learning outcomes (TLOs) were defined in terms of minimum discipline knowledge, discipline specific skills and professional capabilities including attitudes and professional values that are expected of a graduate from a specified level of program in a specified discipline area. The process took account of and involved the participation of professional bodies, accreditation bodies, employers and graduates as well as academic institutions and teachers. These representatives of the discipline communities were encouraged to take responsibility for the project and the outcomes within broad common parameters. Some disciplines extended the brief to begin consideration of the implications of implementing standards at institutional level.

## 1.1 Discipline Areas encompassed in the demonstration project

Broad discipline areas were defined according to Australian definitions of Field of Education from the Australian Standard Classification of Education. They correspond to the most common broad structural arrangements of faculties or aggregates of departments within Australian universities.

Eight broad discipline groups participated in 2010:

- architecture and building
- arts, social sciences and humanities
- business, management and economics
- creative and performing arts
- engineering and ICT
- health, medicine and veterinary science
- law
- science.

Discipline Scholars were appointed to lead each discipline area. The key deliverable for each Discipline Scholar was the production of a document of minimum learning outcomes for a specified discipline at an agreed Australian Qualifications Framework (AQF) level or levels. This booklet represents that outcome for this discipline.

# 2. Health, Medicine and Veterinary Science in the Learning and Teaching Academic Standards Project

## 2.1 Scope

This statement describes TLOs that are common across healthcare at professional entry-level.

This statement covers coursework programs of study in healthcare that are offered by Australian higher education institutions, and that meet the professional and/or accreditation requirements of each individual discipline.

This statement covers coursework programs of study in healthcare for which there is a minimum professional entry-level qualification of a bachelor degree.

This statement should be read in conjunction with the relevant contemporaneous professional and/or accreditation requirements of each individual discipline. Specific individual health discipline standards mapping within this statement are included for the purposes of demonstrating the project methodology.

Where a healthcare program is studied as part of a joint program or double degree, then this statement should be applied in conjunction with other relevant standards statements.

This statement does not cover disciplines that are related to Health, Medicine and/or Veterinary Science that do not include some component of healthcare delivery.

This statement makes no prescription about academic standards or learning outcomes other than those relating to threshold levels of academic achievement.

This statement does not cover qualifications in healthcare beyond professional entry-level, including research degrees.

This statement does not distinguish between qualification levels at professional entry and this statement should be applied in conjunction with other relevant standards documents and frameworks.

This statement makes no prescription about the suitability of any particular teaching and learning approaches.

This statement makes no prescription about the suitability of any particular assessment activities.

This statement makes no prescription about the suitability of any set of criteria or decisions relating to student admission.

## 2.2 Rationale

The broad area of Health, Medicine and Veterinary Science encompasses a complex, inter-related, range of disciplines concerned with the identification, management, and amelioration of factors that impact upon the health and general wellbeing of the living, be it human or animal. This includes an understanding of, and ability to identify and act upon, the social, cultural, physical, biological, environmental, and psychological factors that impact both positively and negatively on the attainment and maintenance of health, its treatment, and monitoring.

Healthcare is a complex multi-professional discipline with a longstanding history of quality and safety standards monitoring. Although many healthcare disciplines already have well articulated learning outcomes with comprehensive professional accreditation, there is, however, currently no overarching statement of healthcare professional entry-level threshold learning outcomes.

In keeping with the interrelated nature of healthcare disciplines, a broad based disciplinary approach was selected. All coursework programs in Health, Medicine and Veterinary Science that met the criteria set out in Section 3.1 were included in this project.

## 2.3 Consultation and development process

To identify common TLOs for healthcare professional entry-level qualifications across all healthcare disciplines, a comprehensive stakeholder consultation and engagement plan was implemented. The Discipline Scholars in Health, Medicine and Veterinary Science, together with representatives of key academic, professional, accreditation and government bodies, undertook development of this plan as part of the National Forum on Academic Standards held in Melbourne, February 2010. At this forum collaborative agreement regarding key project processes and outcomes was achieved including the project parameters described in Section 2.1. A project advisory committee was established.

There was agreement that the approach used to develop the TLOs for Health, Medicine and Veterinary Science would include all healthcare disciplines and that processes would be based on existing standards and frameworks. In working to establish TLOs, the Discipline Scholars worked closely with councils of deans, accreditation councils, professional bodies and government health agencies.

A comprehensive listing was developed of healthcare qualifications offered by Australian higher education providers, together with relevant professional standards related documentation. Compilation of this listing was informed by a systematic search of higher education provider websites (including universities, technical and further education colleges and private colleges and institutions), and web searches for professional bodies, including, but not limited to, councils of deans and registration and accreditation councils. Snowballing techniques were used to ensure full coverage of all relevant organisations, including making contact with individual organisations.

Twenty-six disciplines were identified that met the criteria for inclusion in the Health, Medicine and Veterinary Science discipline group (Section 3.1). Published professional accreditation standards/competency documents were obtained for each of these 26 disciplines.

The published professional accreditation standards/competencies documentation of a sample group of six healthcare disciplines (Nursing, Medicine, Dentistry, Veterinary Science, Pharmacy and Physiotherapy) was compared to identify levels of congruence and divergence between existing standards. Six common content domains were identified. Draft TLOs were derived from these common content domains.

To test the appropriateness of these draft TLOs, the professional accreditation standards/competencies for each of the 26 disciplines were mapped against them. Mapping of existing professional/accreditation standards against the draft TLOs revealed an easy and logical 'fit'. All standards/competencies could be mapped to one of the six draft TLOs, and no additional learning outcome categories were required.

A discussion document with the draft TLOs in Health, Medicine and Veterinary Science was circulated nationally to over 70 Australian healthcare councils of deans and professional and accreditation bodies. In addition, information about the project was sent to over 950 academics across all 39 Australian universities (including pro-vice chancellors and deputy-vice chancellors of quality, teaching and learning; health, medicine and veterinary science-related faculty deans, deans of teaching and learning; chairs of teaching and learning committees; heads of school; and discipline and program directors), representatives of five non-university higher education providers, and individual stakeholders who had registered an interest. The Discipline Scholars also undertook a national program of workshops and meetings.

Key stakeholder groups were invited to provide formal feedback submissions on the draft TLOs. Feedback was sought also via a web-based survey.

By way of supporting this broad based consultation process, the Discipline Scholars also met with councils of deans and other stakeholder groups as appropriate such as accreditation and professional bodies, to present and discuss the draft TLOs. These presentations also provided the opportunity to discuss the rationale of the project in more detail and in a discipline specific context for each of these groups.



Recommendations arising from the feedback received reinforced the importance of ensuring ongoing alignment between TLOs and professional accreditation standards, and of developing and implementing processes for periodic disciplinary review of the TLOs.

Following the sector wide consultation phase the draft TLOs were revised and refined in light of the feedback received.

A final round of consultation with key academic and professional groups was conducted. In this consultation round, councils of deans (or equivalent) and the relevant accreditation body of each discipline were sent the revised TLOs together with the mapping of that specific discipline group's accreditation and/or competency and/or professional standards against these TLOs (Appendix 3) for final comment.

Concurrently the Discipline Scholars conducted a series of state-based workshops. These workshops gave deans, associate deans, program directors, course coordinators and other academic staff the opportunity to learn about the project and to provide their own feedback on how the TLOs might be embedded in day-to-day teaching activities. In addition, fine-tuning and refinement of the revised TLOs continued until consensus was reached across the broad discipline group.

# 3. Learning and Teaching Academic Standards Statement for Health, Medicine and Veterinary Science

## 3.1 Nature and extent of Health, Medicine and Veterinary Science

The process of scoping which disciplines were to be included within the Health, Medicine and Veterinary Science group for the purposes of identifying common threshold learning outcomes (TLOs) involved the examination and comparison of multiple information sources.

As is described in Section 2.3 above, a comprehensive listing of healthcare related program offerings and qualifications was developed. Relevant Australian professional, registration and accreditation bodies associated with each of these qualifications were then identified through further web-based searches and contact with key stakeholders. Documentation relating to academic standards in each discipline was sought. Types of documents sourced in this exercise included:

- professional competency standards
- accreditation standards for educational programs
- graduate standards
- professional codes of ethics/conduct.

In this statement, the following healthcare disciplines<sup>1</sup> have been included in the development of this statement. Links to current professional accreditation and/or standards documentation are also included:

<b>Audiology:</b>	the study of assessing and treating hearing disorders Audiological Society of Australia Inc. (ASA) (1997). <i>The ASA professional standards of practice for audiologists</i> . <a href="http://www.audiology.asn.au">http://www.audiology.asn.au</a>
<b>Chiropractic:</b>	the study of assessing and relieving disorders of the body through manipulating and treating the musculoskeletal system Council on Chiropractic Education Australasia Inc. (2008). <i>Competency based standards for entry level chiropractors</i> . <a href="http://www.ccea.com.au">http://www.ccea.com.au</a>
<b>Clinical myotherapy:</b>	the study of the treatment and management of musculoskeletal pain Professional Clinical Myotherapists of Australia (2010). <i>Australian Standards for clinical myotherapists</i> . <a href="http://www.clinicalmyotherapy.com.au">http://www.clinicalmyotherapy.com.au</a>
<b>Dentistry:</b>	the study of diagnosing, treating and preventing diseases of the teeth and adjacent tissues. It includes correcting malocclusion and restoring and replacing missing dental and oral structures Australian Dental Council (2010). <i>Professional attributes and competencies of the newly qualified dentist, V.1.0</i> . <a href="http://www.adc.org.au">http://www.adc.org.au</a>

---

1. Discipline definitions based on Australian Bureau of Statistics Standard Classification of Education and/or Occupation.

Exercise physiology:	<p>the study of how bodies respond to physical activity</p> <p>Exercise and Sports Science Australia (2010). NUCAP: National university course accreditation program: <i>Guidelines and application form for academic units applying for full accreditation of a course with Exercise and Sports Science Australia (ESSA), V.3.0.</i> <a href="http://www.essa.org.au">http://www.essa.org.au</a></p>
Medicine:	<p>the clinical presentation and treatment of diseases</p> <p>Australian Medical Council (2009). <i>Assessment and accreditation of medical schools: standards and procedures, 2009.</i> <a href="http://www.amc.org.au">http://www.amc.org.au</a></p>
Midwifery:	<p>the study of the principles and practices of providing care for women during pregnancy, birthing and after childbirth and for caring for the new-born</p> <p>Australian Nursing &amp; Midwifery Council (2006). <i>National competency standards for the midwife.</i> <a href="http://www.nursingmidwiferyboard.gov.au/Codes-and-Guidelines.aspx">http://www.nursingmidwiferyboard.gov.au/Codes-and-Guidelines.aspx</a></p>
Naturopathy (including Western herbal medicine):	<p>the study of treating diseases using natural therapies</p> <p>Australian Natural Therapists Association Limited (2007). <i>Scope and standards of practice.</i> &lt;<a href="http://www.australiannaturaltherapistsassociation.com.au">http://www.australiannaturaltherapistsassociation.com.au</a></p>
Nursing:	<p>the study of the principles and practices of providing preventative, curative and rehabilitative care to individuals and groups</p> <p>Australian Nursing &amp; Midwifery Council (2006). <i>National competency standards for the registered nurse.</i> <a href="http://www.nursingmidwiferyboard.gov.au/Codes-and-Guidelines.aspx">http://www.nursingmidwiferyboard.gov.au/Codes-and-Guidelines.aspx</a></p>
Nutrition and dietetics:	<p>the study of the nutritional and dietary needs of humans</p> <p>Dietitians Association of Australia (2009). <i>National competency standards for entry level dietitians in Australia.</i> <a href="http://www.daa.asn.au">http://www.daa.asn.au</a></p>
Occupational therapy:	<p>the study of treating physical, cognitive and psychiatric conditions through activities in order to optimise functioning and independence in daily life</p> <p>Occupational Therapy Australia Limited (2010). <i>Australian minimum competency standards for new graduate occupational therapists (ASCOT) 2010.</i> <a href="http://www.ausot.com.au">http://www.ausot.com.au</a></p>
Optometry:	<p>the study of measuring and assessing vision, and prescribing lenses for visual correction</p> <p>Optometry Council of Australia and New Zealand (2006). <i>Accreditation manual for optometry courses in Australia and New Zealand: Part 2 Guidelines.</i> <a href="http://www.ocanz.org">http://www.ocanz.org</a></p>
Oral health (including dental hygiene and dental therapy):	<p>the study of preventive, educational and therapeutic methods for controlling oral diseases to help individual patients and groups achieve and maintain oral health</p> <p>Australian Dental Council (2010). <a href="http://www.adc.org.au">http://www.adc.org.au</a></p>
Orthoptics:	<p>the study of eye movement disorders and associated sensory deficiencies</p> <p>Australian Orthoptic Board (2009). <i>Clinical competencies expected of a beginning orthoptic practitioner.</i> <a href="http://www.australianorthopticboard.org.au">http://www.australianorthopticboard.org.au</a></p>

- Osteopathy:** the study of assessing and relieving disorders of the body through manipulating and treating the musculoskeletal system  
Australian and New Zealand Osteopathic Council Limited (2010). *Accreditation policy: Standards and procedures for the accreditation of osteopathic courses*. <http://www.anzoc.org.au>
- Pharmacy:** the study of the preparation and dispensing of drugs  
Australian Pharmacy Council Limited (2009). *Accreditation standards, Version 1.0*. <http://www.pharmacycouncil.org.au>
- Physiotherapy:** the study of temporary and longer-term physical injuries and movement disorders, and restoring maximum movement and functional ability  
Australian Physiotherapy Council (2006). *Australian standards for physiotherapy*. <http://physiocouncil.com.au>
- Podiatry:** the study of assessing and treating physical ailments of the human foot and lower limb  
Australian & New Zealand Podiatry Accreditation Council Inc. (2009). *Podiatry competency standards for Australia and New Zealand*. <http://anzpac.org.au>
- Psychology:** the study of the science of human nature and of mental states and processes  
Australian Psychology Accreditation Council (2010). *Rules for accreditation and accreditation standards for psychology courses, Version 10*. <http://apac.psychology.org.au>
- Public health:** the study of the principles and practices of protecting, promoting, maintaining and restoring the health of the community  
Australian Network of Academic Public Health Institutions (2009). *Foundation competencies for master of public health graduates in Australia*. <http://www.anaphi.org.au>
- Radiography:** the study of technologies which use ionising radiation for producing diagnostic images and administering radiation therapy  
Australian Institute of Radiography (2005). *Competency based standards for the accredited practitioner*. <http://www.air.asn.au>
- Social work:** the study of promoting, restoring, maintaining and enhancing the functioning of individuals, families, social groups, organisations and communities by the utilisation of resources within individuals and the social environment in order to alleviate social problems  
Australian Association of Social Workers (2003). *Practice standards for social workers: achieving outcomes*. <http://www.aasw.asn.au>
- Sonography:** the study of technologies which use non-ionising, eg ultrasound, radiation for producing diagnostic images and administering radiation therapy  
Australasian Sonographer Accreditation Registry Limited (2010). *Program accreditation guidelines: Of educational programs/qualifications in medical sonography*. <http://www.asar.com.au>
- Speech pathology:** the study of assessing and treating speech and language disorders  
The Speech Pathology Association of Australia Limited (2001). *Competency-based occupational standards (CBOS) for speech pathologists: Entry level*. <http://www.speechpathologyaustralia.org.au>

Traditional Chinese medicine (including acupuncture):

the study of treating diseases through traditional Chinese therapies

Chinese Medicine Registration Board of Victoria (2010). *Guidelines for the approval of courses of study in Chinese medicine as a qualification for registration, Version 3*. <http://www.cmr.vic.gov.au>

Veterinary science:

the study of diagnosing and treating animal diseases, ailments and injuries, and preventing and containing the spread of animal diseases

Australasian Veterinary Boards Council Inc. (2010). *VSAAC policies, procedures and standards*. <http://www.avbc.asn.au>

### 3.2 Threshold Learning Outcomes for Health, Medicine and Veterinary Science

The TLOs developed for Health, Medicine and Veterinary Science are shown below. While there has been an attempt to ensure minimal overlap across the TLOs and, as far as possible, each is listed independently, even at the threshold level of achievement it is expected that graduates would demonstrate a broad and coherent assimilation of the identified TLOs across the various knowledge, skills and attitudinal domains.

#### Health, Medicine and Veterinary Science Threshold Learning Outcomes

Upon completion of their program of study, healthcare graduates at professional entry-level\* will be able to: (\*as defined by each individual discipline)

- 1 Demonstrate professional behaviours
- 2 Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities
- 3 Promote and optimise the health and welfare of individuals and/or populations
- 4 Retrieve, critically evaluate, and apply evidence in the performance of health-related activities
- 5 Deliver safe and effective collaborative healthcare
- 6 Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development.



## 4. Notes on Threshold Learning Outcomes for Health, Medicine and Veterinary Science

### Relationship to the profession

The development of the Threshold Learning Outcomes for Health, Medicine and Veterinary Science has occurred within an environment of regulatory change across the major healthcare disciplines. The Australian Health Practitioner Regulation Agency (AHPRA) is the newly established national organisation that is responsible for the registration and accreditation of 10 health professions across Australia. AHPRA's operations are governed by the *Health Practitioner Regulation National Law Act 2009*, which came into effect on 1 July 2010. These health professions are:

- chiropractic
- dentistry
- medicine
- nursing and midwifery
- optometry
- osteopathy
- pharmacy
- physiotherapy
- podiatry
- psychology.

This law means that for the first time in Australia, 10 health professions through their boards are regulated by nationally consistent legislation. The primary role of the boards is to protect the public and set standards and policies that all registered health practitioners must meet <http://www.ahpra.gov.au/About-AHPRA/Who-We-Are.aspx> .

National initiatives to enhance and support health professional education, in particular funding for increased placements for work-based learning from Health Workforce Australia (HWA), are occurring concurrently. The threshold learning outcomes are important in the context of these contemporary initiatives because they articulate the requisite learning outcomes for any healthcare professional entry-level graduate, that is, they specify the skills, knowledge and ability required of graduates of health professional degrees.

## Appendix 1: Terms of reference and membership of advisory panels

### Purpose:

The Health, Medicine and Veterinary Science Learning and Teaching Academic Standards project Advisory Panel will provide support and advice to the Discipline Scholars in Health, Medicine and Veterinary Science for the life of the project.

### Roles and responsibility

- Give specific discipline advice
- Facilitate stakeholder consultation
- Provide general advice and support.

### Membership

Professor Christine Ewan	Project Director of Learning and Teaching Academic Standards project (ex officio)
Associate Professor Maree O'Keefe	Discipline Scholar
Professor Amanda Henderson	Discipline Scholar
Professor James Angus	President, Medical Deans Australia and New Zealand
Professor Johann de Vries	President, Australasian Council of Dental Schools
Professor Ian Wronski	Chair, Australian Council of Pro Vice-Chancellors and Deans of Health Science
Professor Patrick Crookes	Chair, Council of Deans of Nursing and Midwifery (Australia and New Zealand)
Professor Joan McMeeken	Chair, Forum of Australian Health Professions Councils
Associate Professor Glen Coleman	Representative, Australasian Veterinary Boards Council Inc
Mr Mark Cormack	Chief Executive Officer, Health Workforce Australia
Dr Rachael Pitt	Project Officer

## Project Advisory Panel

Professor James A Angus AO President, Medical Deans Australia and New Zealand

Professor James Angus was appointed Dean of the Faculty of Medicine, Dentistry and Health Sciences at The University of Melbourne in July 2003. Before becoming Dean, he was Professor and Head of the Department of Pharmacology and Deputy Dean of the Faculty of Medicine, Dentistry and Health Sciences. At the University of Melbourne, Professor Angus has been President of the Academic Board (2000–01) and Pro Vice-Chancellor (1999–2001).

Professor Angus was awarded the Gottschalk Medal of the Australian Academy of Science (1984), is a Fellow of the Academy (FAA) and has been a member of its Council. In 2003 he was awarded Australia's Centenary Medal for contribution to Pharmacology and the Community.

Professor Angus was a First Vice-President of the International Union of Pharmacology (IUPHAR) and was President of the Australasian Society of Clinical and Experimental Pharmacologists and Toxicologists.

His current roles include President of Medical Deans Australia and New Zealand (elected in 2009), directorships of the Walter & Eliza Hall Institute, Bionic Ear Institute, Mental Health Research Institute, Melbourne Health, IJV PCCC and Victor Smorgon Institute at Epworth Pty Ltd. He is the Honorary Secretary, Victorian Rhodes Scholarship.

He was appointed an Officer to The Order of Australia in 2010 for distinguished service to biomedical research, particularly in the fields of pharmacology and cardiovascular disease, as a leading academic and medical educator, and as a contributor to a range of advisory boards and professional organisations both nationally and internationally.

Associate Professor  
Glen Coleman

Representative, Australian Veterinary Boards Council

Associate Professor Glen Coleman is a graduate of The University of Queensland Veterinary School and practised for several years in Townsville, the United Kingdom and south-east Queensland. In 1995 he was appointed lecturer in veterinary parasitology, and continues to undertake research into companion animal parasites, with a focus on drug resistance. In 2005 he received a UQ Excellence in Teaching Award and in 2007 he was the recipient of a Carrick Award for Australian University Teaching. He currently supervises three higher degree research students working on various aspects of veterinary education. Among his current teaching and learning projects is an Australian Learning and Teaching Council-funded project on assessment policy and how it impacts upon practice. He is Deputy Head of The University of Queensland's School of Veterinary Science and Associate Dean, Academic, for the Faculty of Natural Resources, Agriculture and Veterinary Science at The University of Queensland.



## Mr Mark Cormack

CEO, Health Workforce Australia

Mr Mark Cormack was appointed as the first Chief Executive Officer of Health Workforce Australia (HWA) in January 2010.

HWA is Commonwealth statutory authority, enacted in 2009 following the COAG decision to establish a new national authority to plan, fund, research and deliver programs for the enhancement and development of Australia's health workforce.

Prior to this, Mark was Chief Executive, ACT Health since July 2006 where he was responsible for the provision of public health, hospital and healthcare services to the ACT and region.

Mark has previously filled a number of national roles in the public healthcare system as a member of the Australian Health Ministers Advisory Council (AHMAC), Chairman of the Health Policy Priorities Principal Committee (HPPPC) of AHMAC, and Board member of the National E Health Transition Authority (NEHTA).

Mark has worked in various capacities in the public healthcare sector for over 25 years.

## Professor Patrick Crookes

Chair, Council of Deans of Nursing and Midwifery (Australia and New Zealand)

Professor Crookes has been the Dean of the Faculty of Health and Behavioural Sciences since 2006 and is also Head of the School of Nursing, Midwifery and Indigenous Health at the University of Wollongong. In September 2009, Professor Crookes was elected Chair of the Council of Deans of Nursing and Midwifery for Australia and New Zealand. From June 2006–June 2009 he was the Deputy Director of the EADTSC and National Coordinator of the four dementia training and study centres across Australia funded by the Department of Health and Ageing.

Professor Crookes has over 25 years' experience as a nurse educator, the last 17 of which have been in Universities in Australia and the UK (Universities of Sydney; Sheffield and Wollongong). In each University, Professor Crookes has been heavily involved in curriculum review, development and implementation. A significant component of his teaching and research over time has focused on how best to teach research skills for which he received a Carrick Citation for Outstanding Contribution to Teaching and Learning in 2007. He currently supervises over twenty higher degree research students. He, therefore, has the confidence of peers as well as many years of experience in preparing nursing students for, and assessing performance in, clinical settings. Professor Crookes has experience in project leadership and management and in recent years has won grants including the development of a journal ranking system for Nursing and Midwifery journals; and the development of a generic clinical learning assessment tool for undergraduate nurses, for use by all universities across Australia (ALTC grant).

Professor Joan McMeeken Chair, Forum of Australian Health Professions Councils

Professor McMeeken is the Foundation Professor and Head of the School of Physiotherapy at The University of Melbourne. She is also Associate Dean in the Faculty of Medicine, Dentistry and Health Sciences, and a Professorial Fellow at The University of Melbourne.

Previously, she was Chair of the Physiotherapy Research Foundation; a Board member of the Royal Children's and Royal Women's Hospitals, Melbourne; and the former Chair of the Accreditation Committee and Board of the Australian Physiotherapy Council.

Professor Ian Wronski Chair, Australian Council of Pro Vice-Chancellors and Deans of Health Sciences

Professor Wronski has been the Pro Vice-Chancellor and Executive Dean of the Faculty of Medicine, Health and Molecular Sciences at James Cook University since 1997. From 2005 he has also been the Chair of the Australian Council of Pro Vice-Chancellors and Deans of Health Sciences.

Professor Wronski's career focus has been on the development of health workforce and health infrastructure in northern Australia and the broader western Pacific and south-east Asian regions, within university, health system and Aboriginal Medical Service settings.

He has been president and chair of key national advocacy organisations including the Australian College of Rural and Remote Medicine and the Australian Council of Pro Vice-Chancellors and Deans of Health Sciences. In addition, he was the first medical director of the Kimberley Aboriginal Medical Services Ltd and, in conjunction with Gracelyn Smallwood, was the principal author of the *Interim Set of Goals and Target in Aboriginal and Torres Strait Islander Health*. He was a practising procedural clinician in the Kimberley region until 1992.

Professor Johann de Vries Inaugural President of Australian Council of Dental Schools

Professor De Vries was Head of Operative Dentistry at The Medical University of Southern Africa for 10 years and Dean for seven and a half years. During this time he served as the Chair of the Dental Deans Committee, served on the Medical and Dental Council, the Dental Technician Council, the University Council and various professional bodies.

From 1998 to 2006 Professor De Vries was Professor and Dean of the Faculty of Dentistry, University of Manitoba, Canada. He was awarded the Fellowship of the "International Academy of Dentistry", the Fellowship of the Pierre Fauchard Academy, and was inducted as a Fellow of the "American College of Dentists".

Professor De Vries is currently the immediate Past President of the International Federation of Dental Educators and Associations and a member of the Board of Directors of the International Organisation. Until 2006 he was the Chair of the Education Council of the Canadian Dental Association and the Chair of the Committee on Dental Academia, Canadian Dental Association. He served as a member on the governing structure of the Canadian Dental Association; member of the Advisory Board for the Council for Educational Research and Development,

Canada; and a member of the Steering Committee for the Global Dental Congress during September in Ireland which was attended by dental academics from 66 countries.

He was the Chair of the Dental Deans Committee in Canada. He served as Chair-elect on the Advisory Board for the American Dental Deans Leadership Institute and was President of the Association of Canadian Faculties of Dentistry. He was a member of the Council of Deans for the American Dental Education Association and also the Vice-Chair of the Federal Dental Care Advisory Committee of the Federal Health Department, Canada; member of the Advisory Board of IVIDENT as well as Visiting Professor of Kings College, London; and member of the Academic Council, International Medical University.

Professor De Vries was awarded the Canadian Dental Association Annual Distinguished Service Award in 2006, an award of merit from the Manitoba Dental Association in 2006, Presidents Award from the Manitoba Dental Association in 2006, and a Certificate of Service from the Canadian Dental Association in 2007. He was also a member of the Oman Accreditation Councils Quality Audit Panel, as well as a member of the Editorial Board, *European Journal of Dental Education*.

## Appendix 2: Consultation and document review

### Professional bodies consulted

Allied Health Professions Australia <http://www.ahpa.com.au>

Australian Acupuncture and Chinese Medicine Association Limited <http://www.acupuncture.org.au>

The Australian Council on Healthcare Standards <http://www.achs.org.au>

Australian Council of Pro Vice-Chancellors and Deans of Health Sciences

Australian Traditional Medicine Society <http://www.atms.com.au>

Forum of Australian Health Professions Councils <http://healthprofessionscouncils.org.au>

Health Workforce Australia <http://www.hwa.gov.au>

Professions Australia <http://www.professions.com.au>

### Aromatherapy

The Australian Aromatic Medicine Association Inc. <http://www.aama-oz.org>

International Aromatherapy & Aromatic Medicine Association Inc. <http://www.iaama.org.au>

### Audiology

Audiological Society of Australia Inc. <http://www.audiology.asn.au>

### Chiropractic

Chiropractors' Association of Australia (National) Limited <http://chiropractors.asn.au>

Council on Chiropractic Education Australasia Inc. <http://www.ccea.com.au>

### Clinical myotherapy

Institute of Registered Myotherapists of Australia <http://www.myotherapy.org.au>

Professional Clinical Myotherapists of Australia <http://www.clinicalmyotherapy.com.au>

### Counselling

Australian Counselling Association <http://www.theaca.net.au>

### Dentistry

Australasian Council of Dental Schools

Australian Dental Association Inc. <http://www.ada.org.au>

Australian Dental Council <http://www.ADC.org.au> and <http://www.dentalcouncil.net.au>

### Exercise physiology

Exercise & Sports Science Australia <http://www.essa.org.au>

## Homoeopathy

Australian Homoeopathic Association <http://www.homeopathyoz.org>

Australian Register of Homoeopaths Limited <http://www.aroh.com.au>

## Hypnotherapy

Australian Clinical Hypnotherapists Association <http://hypnosis.asn.au>

Australian Hypnotherapists' Association <http://www.ahahypnotherapy.org.au>

Australian Society of Clinical Hypnotherapists <http://www.asch.com.au>

Council of Clinical Hypnotherapists, Australia <http://hypnosis.org.au>

## Indigenous health

Indigenous Allied Health Australia Inc. <http://www.indigenouslyalliedhealth.com.au>

## Kinesiology

Australian Institute of Kinesiologists Limited <http://www.australiankinesiology.com>

Australian Kinesiology Association, Inc. <http://www.akakinesiology.org.au>

## Massage therapy

Australian Association of Massage Therapists Limited <http://www.aamt.com.au>

## Medicine

Australian Medical Association <http://www.ama.com.au>

Australian Medical Council <http://www.amc.org.au>

Medical Deans Australia and New Zealand Inc. <http://www.medicaldeans.org.au>

Royal Australasian College of Surgeons <http://www.surgeons.org>

## Naturopathy (including Western herbal medicine)

Australian Natural Therapists Association Limited <http://www.australiannaturaltherapistsassociation.com.au>

Australian Naturopathic Practitioners Association <http://www.anpa.asn.au>

National Herbalists Association of Australia <http://www.nhaa.org.au>

## Nursing and Midwifery

Australian College of Mental Health Nurses <http://www.acmhn.org>

Australian Nursing & Midwifery Council <http://www.anmc.org.au>

Australian Nursing Federation <http://www.anf.org.au>

Council of Deans of Nursing and Midwifery (Australia and New Zealand) <http://www.cdnm.edu.au>

Royal College of Nursing, Australia <http://www.rcna.org.au>

## Nutrition and Dietetics

Dietitians Association of Australia <http://www.daa.asn.au>

The Nutrition Society of Australia Inc. <http://www.nsa.asn.au/index.php>

## Occupational therapy

Occupational Therapy Australia Limited <http://www.ausot.com.au>

Occupational Therapy Council (Australia & New Zealand) Inc. <http://www.cotrb.com.au>

## Optometry

Optometrists Association Australia <http://www.optometrists.asn.au>

Optometry Council of Australia and New Zealand <http://www.ocanz.org>

## Oral health (including dental hygiene and dental therapy)

Australian Dental and Oral Health Therapists' Association <http://www.adohta.net.au>

Dental Hygienists' Association of Australia Inc. <http://www.dhaa.asn.au>

## Orthoptics

Australian Orthoptic Board/Australian Orthoptics Registration Body Pty Ltd  
<http://www.australianorthopticboard.org.au>

Orthoptics Australia <http://orthoptics.org.au/OAA07>

## Orthotics

Australian Orthotic Prosthetic Association Inc. <http://www.aopa.org.au>

## Osteopathy

Australian and New Zealand Osteopathic Council Limited <http://www.anzoc.org.au>

Australian Osteopathic Association <http://www.osteopathic.com.au>

## Pharmacy

Australian Pharmacy Council Limited <http://www.pharmacycouncil.org.au>

The Pharmacy Guild of Australia <http://www.guild.org.au>

Pharmaceutical Society of Australia <http://www.psa.org.au>

The Society of Hospital Pharmacists of Australia <http://www.shpa.org.au>

## Physiotherapy

Australian Physiotherapy Association <http://www.physiotherapy.asn.au>

Australian Physiotherapy Council <http://www.physiocouncil.com.au>

Council of Physiotherapy Deans of Australia and New Zealand

## Podiatry

Australasian Podiatry Council <http://www.apodc.com.au>

Australian & New Zealand Podiatry Accreditation Council Inc. <http://www.anzpac.org.au>

## Psychology

The Australian Psychological Society Limited <http://www.psychology.org.au>

Australian Psychology Accreditation Council <http://www.apac.psychology.org.au>

## Public health

Australian Health Promotion Association <http://www.healthpromotion.org.au>

Public Health Association of Australia Inc. <http://www.phaa.net.au>

## Radiography

Australian Institute of Radiography <http://www.air.asn.au>

## Social work

Australian Association of Social Workers <http://www.aasw.asn.au>

## Sonography

Australasian Sonographer Accreditation Registry Limited <http://www.asar.com.au>

Australian Sonographers Association <http://www.a-s-a.com.au>

## Speech pathology

Asia Pacific Education Collaboration in Speech Language Pathology  
<http://www.altcexchange.edu.au/asia-pacific-education-collaboration-speech-language-pathology>

Speech Pathology Australia <http://www.speechpathologyaustralia.org.au>

## Traditional Chinese medicine (including acupuncture)

Acupuncture Association of Australia, Inc. <http://www.acupaa.com.au>

Chinese Medicine Registration Board of Victoria <http://www.cmr.vic.gov.au>

## Veterinary nursing

The Veterinary Nurses Council of Australia <http://www.vnca.asn.au>

## Veterinary science

Australian Veterinary Association Limited <http://www.ava.com.au>

Australasian Veterinary Boards Council Inc <http://www.avbc.asn.au>

Australasian Veterinary Dean's Committee

Professional accreditation and/or competency standards<sup>2</sup> reviewed to inform mapping of individual discipline accreditation standards against Threshold Learning Outcomes (TLOs)

### Audiology

Audiological Society of Australia Inc. (1997). 'Professional standards of practice'. *The ASA professional standards of practice for audiologists*. Downloaded 4 May 2010 from <http://www.audiology.asn.au/standards.htm>

### Chiropractic

Council on Chiropractic Education Australasia Inc. (2008). *Competency based standards for entry level chiropractors*. Downloaded 4 May 2010 from <http://www.ccea.com.au/Publications/Publications.htm>

### Clinical myotherapy

Professional Clinical Myotherapists of Australia. (2009). *Code of practice*. Downloaded 17 September 2010 from <http://www.clinicalmyotherapy.com.au/links/code-of-practice>

Southern School of Natural Therapies. 'Core goals in clinical myotherapy treatment'. *Bachelor of Health Science: Clinical Myotherapy*.

### Dentistry (including oral health, dental therapy, and dental hygiene)

American Dental Education Association. (2008). 'Competencies for the new general dentist' (As approved by the 2008 ADEA House of Delegates). *Journal of Dental Education*, 72(7), pp. 823-826. Downloaded 16 June 2010 from <http://www.jdentaled.org/cgi/reprint/72/7/823>

American Dental Education Association. (2007). 'Competencies for the new dentist' (As approved by the 1997 House of Delegates). *Journal of Dental Education*, 71(7), pp. 926-928.

Australian Dental Council. (2010). 'The Competencies Statements', pp. 8-14. *Professional attributes and competencies of the newly qualified dentist, V.1.0*.

Dental Council of New Zealand. *Competency standards and performance measures for clinical dental technicians*. Downloaded 3 May 2010 from [http://www.dcnz.org.nz/Documents/Policy/CDT\\_CompetencyStandardsMeasures.pdf](http://www.dcnz.org.nz/Documents/Policy/CDT_CompetencyStandardsMeasures.pdf)

Dental Council of New Zealand. *Competency standards and performance measures for dental hygienists*. Downloaded 3 May 2010 from <http://www.dcnz.org.nz/Documents/Policy/HygienistsCompetencyStandardsMeasures.pdf>

Dental Council of New Zealand. *Competency standards and performance measures for dental technicians*. Downloaded 3 May 2010 from [http://www.dcnz.org.nz/Documents/Policy/DT\\_CompetencyStandardsMeasures.pdf](http://www.dcnz.org.nz/Documents/Policy/DT_CompetencyStandardsMeasures.pdf)

Dental Council of New Zealand. *Competency standards and performance measures for dental therapists*. Downloaded 3 May 2010 from <http://www.dcnz.org.nz/Documents/Policy/TherapistsCompetencyStandardsMeasures.pdf>

---

2. During the course of this project a number of disciplines published revised professional accreditation and/or competency standards. Reference is made to these more recently published standards in section 3.1.



## Exercise physiology

Exercise and Sports Science Australia. (2010). 'Exercise physiology criteria: General criteria', pp. 65-75. NUCAP: *National university course accreditation program: Guidelines and application form for academic units applying for full accreditation of a course with Exercise and Sports Science Australia (ESSA), V.3.0*. Downloaded 16 August 2010 from <http://www.essa.org.au/index.php?q=node/212>

Exercise and Sports Science Australia. (2010). Exercise science criteria: Essential knowledge and skills, pp. 42-61. NUCAP: *National university course accreditation program: Guidelines and application form for academic units applying for full accreditation of a course with Exercise and Sports Science Australia (ESSA), V.3.0*. Downloaded 16 August 2010 from <http://www.essa.org.au/index.php?q=node/212>

## Medicine

Australian Medical Association. (2006). *Code of ethics*. Downloaded 18 August 2010 from <http://ama.com.au/codeofethics>

Australian Medical Council Limited. (2009). 'Attributes of graduates', pp. 1-3. *Assessment and Accreditation of medical schools: Standards and procedures, 2009*. Downloaded 28 April 2010 from <http://www.amc.org.au/index.php/ar/bme>

The Royal College of Physicians and Surgeons of Canada. (2005). *CanMEDS 2005 Framework*.

## Naturopathy (including Western Herbal Medicine)

Australian Natural Therapists Association. (2007). *Scope and standards of practice*. Downloaded 29 June 2010 from [http://www.australiannaturaltherapistsassociation.com.au/features/standards\\_practice.php](http://www.australiannaturaltherapistsassociation.com.au/features/standards_practice.php)

National Herbalists Association of Australia. (2007). *NHAA course accreditation system guidelines & curriculum, V2.0 (CAS\_Main)*. Downloaded 17 September 2010 from [http://www.nhaa.org.au/index.php?option=com\\_content&view=article&id=109&Itemid=286](http://www.nhaa.org.au/index.php?option=com_content&view=article&id=109&Itemid=286)

National Herbalists Association of Australia. (2009). *Code of ethics*. Downloaded 17 September 2010 from [http://www.nhaa.org.au/index.php?option=com\\_content&view=article&id=81&Itemid=76](http://www.nhaa.org.au/index.php?option=com_content&view=article&id=81&Itemid=76)

## Nursing and Midwifery

Australian Nursing & Midwifery Council. (2006). *National competency standards for the midwife*, pp. 6-13. Downloaded 27 April 2010 from [http://www.anmc.org.au/professional\\_standards](http://www.anmc.org.au/professional_standards)

Australian Nursing & Midwifery Council. (2006). *National Competency standards for the registered nurse*, pp. 3-13. Downloaded 27 April 2010 from [http://www.anmc.org.au/professional\\_standards](http://www.anmc.org.au/professional_standards)

Australian Nursing Federation. (2005). *Competency standards for the advanced registered nurse*, pp. 9-13. Downloaded 27 April 2010 from [http://www.anf.org.au/pdf/Competency\\_Standards\\_Adv\\_RN.pdf](http://www.anf.org.au/pdf/Competency_Standards_Adv_RN.pdf)

## Nutrition and Dietetics

Dietitians Association of Australia. (2009). *National competency standards for entry level dietitians in Australia*. Downloaded 5 May 2010 from <http://www.daa.asn.au/index.asp?pageID=2145872322>

## Occupational therapy

Occupational Therapy Australia. (1994). 'Units, Elements and Performance Criteria', pp. 5-28. *Australian competency standards for entry-level occupational therapists*. Downloaded 4 May 2010 from <http://svc048.wic138dp.server-web.com/inner.asp?reid=14&pageid=252>

## Optometry

Kiely, P. M., Bluntish, I. S., & Montgomery, P. J. (2007). 'Practice Standards', pp. 3-45. *Optometrists Association Australia practice standards*, 2nd ed. Carlton, VIC: Optometrists Association Australia.

Kiely, P. M. (2009). 'Entry-level and therapeutic optometric competency standards', pp. 366-386. Optometrists Association Australia universal (entry-level) and therapeutic competency standards for optometry 2008. *Clinical and experimental optometry*, 92(4), pp. 362-386. Downloaded 29 April 2010 from <http://www.optometrists.asn.au/ForOptometrists/StandardsGuidelines/tabid/123/language/en-AU/Default.aspx>

Kiely, P. M. & Chakman, J. (2003). 'Practice standards', pp. 146-151. Practice Standards for optometry and optometric practice accreditation. *Clinical and experimental optometry*, 86(3), pp. 143-151. Downloaded 29 April 2010 from <http://www.optometrists.asn.au/ForOptometrists/StandardsGuidelines/tabid/123/language/en-AU/Default.aspx>

Optometry Council of Australia and New Zealand. (2006). *Accreditation manual for optometry courses in Australia and New Zealand: Part 1 accreditation process and procedures*. Downloaded 3 May 2010 from <http://www.ocanz.org/accreditation>

Optometry Council of Australia and New Zealand. (2006). Objectives of basic optometric education, pp. 46-48. *Accreditation manual for optometry courses in Australia and New Zealand: Part 2 Guidelines*. Downloaded 3 May 2010 from <http://www.ocanz.org/accreditation>

## Orthoptics

Australian Orthoptic Board. (2009). *Clinical competencies expected of a beginning orthoptic practitioner*. Downloaded 7 October 2010 from [http://www.australianorthopticboard.org.au/Registration/Intl\\_Regn.html](http://www.australianorthopticboard.org.au/Registration/Intl_Regn.html)

## Osteopathy

Australian Osteopathic Council. (2008). 'Model course objectives', pp. 27-32. *Accreditation policy: Standards and procedures for the accreditation of osteopathic courses*. Downloaded 17 May 2010 from <http://www.aoc.org.au/pdf/AOCaccreditationpolicy.pdf>

## Pharmacy

Australian Pharmacy Council. (2009). 'The graduates', pp. 10-11. *Accreditation standards, Version 1.0*. Downloaded 3 May 2010 from [http://www.pharmacycouncil.org.au/accreditation\\_accreditationcriteria.html](http://www.pharmacycouncil.org.au/accreditation_accreditationcriteria.html)

Pharmaceutical Society of Australia. (2003). 'Full version of the functional areas and of the competency standards', pp. 49-134. *Competency standards for pharmacists in Australia 2003*. Downloaded 29 April 2010 from <http://www.psa.org.au/site.php?id=643>

Pharmaceutical Society of Australia. (2006). 'Professional practice standards', p. 3. *Professional practice standards, Version 3*. Downloaded 29 April 2010 from <http://www.psa.org.au/site.php?id=1089>

Pharmaceutical Society of Australia. (2010). 'The standards', pp. 11-80. *Professional practice standards, Version 4*. Downloaded 15 September 2010 from <http://www.psa.org.au/site.php?id=1089>

## Physiotherapy

Australian Physiotherapy Council. (2006). 'List of the standards and their elements', p. 15. *Australian Standards for Physiotherapy*. Downloaded 27 May 2010 from [http://physiocouncil.com.au/australian\\_standards\\_for\\_physiotherapy](http://physiocouncil.com.au/australian_standards_for_physiotherapy)

Dalton, M., Keating, J., & Davidson, M. (2009). 'Clinical assessment of physiotherapy skills (CAPS) scale', p. 63. *Development of the APP (Assessment of physiotherapy practice) instrument: Final project report, March 2009*. Griffith University/ALTC Priority Project pp 6-28. Downloaded 27 April 2010 from <http://www.altc.edu.au/resource-development-clinical-assessment-griffith-2009>

## Podiatry

Australian & New Zealand Podiatry Accreditation Council Inc. (2009). 'Curriculum and Assessment', pp. 11-16. *Accreditation standards and procedures for podiatry programs for Australia and New Zealand*. Downloaded 17 May 2010 from <http://anzpac.org.au/intropolicy.htm>

Australian & New Zealand Podiatry Accreditation Council Inc. (2009). 'The podiatry competency standards and elements', p. 6. *Podiatry competency standards for Australia and New Zealand*. Downloaded 17 May 2010 from <http://anzpac.org.au/intropolicy.htm>

Australian Podiatry Council. (1994). 'Podiatry competency standards', pp. 7-14. *Competency standards and related assessment methods for the Australian podiatry profession: Summary report*. Downloaded 17 May 2010 from <http://www.apodc.com.au/competency.htm>

## Psychology

Australian Psychology Accreditation Council. (2010). 'Undergraduate 4th year and four year courses', pp. 43-46. *Rules for accreditation and accreditation standards for psychology courses, Version 10*. Downloaded 19 August 2010 from <http://apac.psychology.org.au/Content.aspx?ID=1083>

Australian Psychology Accreditation Council. (2010). 'Postgraduate professional courses', pp. 46-54. *Rules for accreditation and accreditation standards for psychology courses, Version 10*. Downloaded 19 August 2010 from <http://apac.psychology.org.au/Content.aspx?ID=1083>

Carrick Institute. (2008). 'Graduate attributes', pp. 2-4. *Graduate attributes of the four-year Australian undergraduate psychology program*.

Cranney, J., Turnbull, C., Provost, S. C., Martin, F., Katsikitis, M., White, F. A., Voudouris, N. J., Montgomery, I. M., Heaven, P. C. L., Morris, S., & Varcin, K. J. (2009). 'Graduate attributes', pp. 257-259. 'Graduate attributes of the 4-year Australian undergraduate psychology program'. *Australian Psychologist*, 44(4), 253-262.

## Public health

Australian Health Promotion Association. (2009). 'Entry level competencies', pp. 3-6. *Core Competencies for Health Promotion Practitioners*.

Australian Network of Academic Public Health Institutions. (2009). MPH graduate competencies, pp. 7-20. *Foundation competencies for master of public health graduates in Australia*.

Biostatistics Collaboration of Australia. (2009). 'Masters degree.' *Program objectives*. Downloaded 3 May 2010 from <http://www.bca.edu.au/programobjectives.html>

Biostatistics Collaboration of Australia. (2009). '(Post)graduate diploma'. *Program objectives*. Downloaded 3 May 2010 from <http://www.bca.edu.au/programobjectives.html>

Biostatistics Collaboration of Australia. (2009). '(Post)graduate certificate'. *Program objectives*. Downloaded 3 May 2010 from <http://www.bca.edu.au/programobjectives.html>

## Radiography

Australian Institute of Radiography. (2004). *Educational policies*. Downloaded 17 May 2010 from <http://www.air.asn.au/pubpols.php>

Australian Institute of Radiography. (2005). 'Radiation therapy standards', pp. 14-20. *Competency based standards for the accredited practitioner*. Downloaded 17 May 2010 from <http://www.air.asn.au/studentfaqs.php>

Australian Institute of Radiography. (2005). 'Radiography standards', pp. 21-27. *Competency based standards for the accredited practitioner*. Downloaded 17 May 2010 from <http://www.air.asn.au/studentfaqs.php>

### Social work

Australian Association of Social Workers. (2003). 'Statement of objectives', pp. 6-29. *Practice standards for social workers: Achieving outcomes*. Downloaded 29 April 2010 from <http://www.aasw.asn.au/publications/ethics-and-standards>

Australian Association of Social Workers. (2010). 'Goals and outcomes for social work education', pp. 8-10. *Australian social work education and accreditation standards*. Downloaded 29 April 2010 from <http://www.aasw.asn.au/publications/ethics-and-standards>

Australian Association of Social Workers. (2010). 'Content of social work programs', pp. 10-18. *Australian social work education and accreditation standards*. Downloaded 29 April 2010 from <http://www.aasw.asn.au/publications/ethics-and-standards>

### Sonography

Australasian Sonographer Accreditation Registry Limited. (2010). 'Clinical knowledge, skills and attributes required for all fields', p. 11. *Program accreditation guidelines: Of educational programs/qualifications in medical sonography*. Downloaded 16 June 2010 from <http://www.asar.com.au>

Australian Sonographers Association. (3 March 2010). 'Competency Standards', pp. 17-34. *The competency framework for diagnostic medical sonographers in Australia and New Zealand: Consultation draft*. Downloaded 29 June 2010 from [http://www.a-s-a.com.au/Resources/Representation/?n=3#Prof\\_Standards\\_Project](http://www.a-s-a.com.au/Resources/Representation/?n=3#Prof_Standards_Project)

Australian Sonographers Association. (2010). 'Code rules', pp. 3-8. *Code of professional conduct*. Downloaded 15 June 2010 from <http://www.a-s-a.com.au/Resources/objectives/?n=1>

### Speech pathology

The Speech Pathology Association of Australia Limited. (2001). 'General practice principles and units', pp. 3-19. *Competency-based occupational standards (CBOS) for speech pathologists: Entry level*. Downloaded 27 April 2010 from <http://www.speechpathologyaustralia.org.au/professional-standards-ps/competency-based-occupational-standards>

### Traditional Chinese medicine (including acupuncture)

Chinese Medicine Registration Board of Victoria. (2006). 'Graduate knowledge, skills and attributes', pp. 43-44. *Guidelines for the approval of courses of study in Chinese medicine as a qualification for registration, Revision 1*. Downloaded 16 June 2010 from <http://www.cmr.vic.gov.au>

National Academic Standards Committee for Traditional Chinese Medicine. (2001). 'Characteristics of graduates', pp. 6-8. *Traditional Chinese medicine education*. Downloaded 29 April 2010 from <http://www.acupuncture.org.au>

### Veterinary science

Australasian Veterinary Boards Council Inc. (2009). 'Essential competencies required of the veterinary surgeon', p. 28. *Policies, procedures and standards: Veterinary Schools Accreditation Advisory Committee (VSAAC)*.

Australasian Veterinary Boards Council Inc. (2009). 'Essential competencies required of the new veterinary graduate – Guidelines from the RCVS', pp. 31-33. *Policies, procedures and standards: Veterinary Schools Accreditation Advisory Committee (VSAAC)*.

Australasian Veterinary Boards Council Inc. (2009). 'Essential competencies required of the veterinary surgeon following completion of professional training in practice after initial graduation', pp. 34-37. *Policies, procedures and standards: Veterinary Schools Accreditation Advisory Committee (VSAAC)*.

American Veterinary Medical Association. (2010). 'Clinical competencies outcomes'. *Accreditation policies and procedures of the AVMA Council on Education (COE), policy 21.11.3*. Downloaded 17 September 2010 from [http://www.avma.org/education/cvea/coe\\_self\\_study.asp](http://www.avma.org/education/cvea/coe_self_study.asp)

### Other documentation reviewed

Australian Bureau of Statistics (2001). *Australian Standard Classification of Education (ASCED)*. Downloaded 16 April 2010 from <http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/1272.02001?OpenDocument>

Australian Bureau of Statistics (2006). *ANZSCO - Australian and New Zealand Standard Classification of Occupations*, 1st edn.

The Australian Council on Healthcare Standards. (2009). 'EQuIP 4 mandatory criteria', pp.10-12. *National report on health services accreditation performance*. Downloaded 5 July 2010 from <http://www.achs.org.au/NAR/>

Australian Traditional Medicine Society. (2006). 'Professional conduct', pp. 4-5. *Code of conduct*. Downloaded 29 June 2010 from [http://atms.com.au/about/About\\_Code.asp](http://atms.com.au/about/About_Code.asp)

College of Health Disciplines & Interprofessional Network of British Columbia. (2008). 'Domains', pp. 4-10. *The British Columbia competency framework for interprofessional collaboration*.

Canadian Interprofessional Health Collaborative. (2010). 'The National competency framework', pp. 12-16. *A National interprofessional competency framework*.

Victorian Government Department of Human Services. (2009). 'Proposed health workforce competency principles', p. 13. *Health workforce competency principles: A Victorian discussion paper*.

### Aromatherapy

Australian Aromatic Medicine Association Inc. (2005). *Code of practice*. Downloaded 16 June 2010 from <http://www.aama-oz.org/Display.aspx?tabid=218>

Australian Aromatic Medicine Association Inc. (2005). *Code of ethics*. Downloaded 16 June 2010 from <http://www.aama-oz.org/Display.aspx?tabid=218>

International Aromatherapy & Aromatic Medicine Association Inc. (2010). *Code of Practice*. Downloaded 16 June 2010 from <http://www.iaama.org.au/memberships/code-practice/code-practice>

International Aromatherapy & Aromatic Medicine Association Inc. (2010). *Code of ethics*. Downloaded 16 June 2010 from <http://www.iaama.org.au/memberships/code-ethics/code-ethics>

### Counselling

Australian Counselling Association. (2008). 'Code of ethics', p. 3. *Code of conduct*. Downloaded 16 June 2010 from <http://www.theaca.net.au>

Australian Counselling Association. (2008). 'Code of practice', pp. 3-13. *Code of conduct*. Downloaded 16 June 2010 from <http://www.theaca.net.au>

Australian Counselling Association. (2009). Accreditation of counsellor education courses: ACA course education standards & accreditation procedures and criteria. Downloaded 26 October 2010 from <http://www.theaca.net.au/documents.php>

Psychotherapy and Counselling Federation of Australia. (2009). PACFA training standards January 2009. Downloaded 26 October 2010 from <http://www.pacfa.org.au>

### Homeopathy

Australian Homoeopathic Association. (2001). *Code of professional conduct*. Downloaded 16 June 2010 from <http://www.homeopathyoz.org>

Australian Register of Homoeopaths Limited. (2009). *Code of professional conduct, v.1.3*. Downloaded 24 August 2010 from <http://www.aroh.com.au/policies.asp>

Australian Register of Homoeopaths Limited. (2009). *Standards of practice, v.5.3*. Downloaded 24 August 2010 from <http://www.aroh.com.au/policies.asp>

Australian Register of Homoeopaths Limited. (2009). 'Guidelines on underpinning knowledge', pp. 13-17. *AROH accreditation and audit guidelines for course providers of advanced diploma of homeopathy (HLT 60607), v. 5.1*. Downloaded 24 August 2010 from <http://www.aroh.com.au/policies.asp>

### Hypnotherapy

Australian Hypnotherapists' Association. *Code of ethics*. Downloaded 16 June 2010 from <http://www.ahahypnotherapy.org.au>

Australian Society of Clinical Hypnotherapists. (2002). *Code of ethics*. Downloaded 16 June 2010 from <http://www.asch.com.au>

Council of Clinical Hypnotherapists, Australia. (2006). Code of ethics, pp. 3-8. *Handbook of ethical practice: Defining code of ethics, standards of practice & by-laws of the Council of Clinical Hypnotherapists Australia Inc.* Downloaded 16 June 2010 from <http://hypnosis.org.au>

Council of Clinical Hypnotherapists, Australia. (2006). 'Minimum standards of practice', p. 9. *Handbook of ethical practice: Defining code of ethics, standards of practice & by-laws of the Council of Clinical Hypnotherapists Australia Inc.* Downloaded 16 June 2010 from <http://hypnosis.org.au>

Council of Clinical Hypnotherapists, Australia. *Standards of education & training*. Downloaded 16 June 2010 from <http://hypnosis.org.au>

### Indigenous health

Phillips, G. for the Committee of Deans of Australian Medical Schools. (2004). 'Suggested subject areas and key student attributes and outcomes', pp. 9-12. *CDAMS Indigenous health curriculum framework*. Downloaded 14 July 2010 from <http://www.medicaldeans.org.au/projects.html>

### Kinesiology

Australian Kinesiology Association Inc. *Code of practice*. Downloaded 16 June 2010 from <http://www.akakinesiology.org.au>

Australian Kinesiology Association Inc. (2005). *New code of conduct, 21 October 2005: Professional boundaries and sexual conduct*. Downloaded 16 June 2010 from <http://akakinesiology.org.au>

### Mental health nursing

Australian and New Zealand College of Mental Health Nurses Inc. (1995). 'Standards for mental health nursing practice', pp. 4-21. *Standards of practice for mental health nursing in Australia*. Downloaded 3 May 2010 from <http://www.acmhn.org/news-a-events/publications/college-publications.html>

### Nutritional medicine

The Nutrition Society of Australia Inc. (2007). 'Specialist Competences in nutrition and underpinning nutrition subject knowledge', pp. 3-4. *Specialist competencies in nutrition science*. Downloaded 16 June 2010 from <http://www.nsa.asn.au/index.php>

The Nutrition Society of Australia Inc. (2007). 'Specialist competences in public health nutrition', pp. 8-12. *Specialist competencies in nutrition science*. Downloaded 16 June 2010 from <http://www.nsa.asn.au/index.php>

### Occupational health and safety

WorkSafe Australia (1994). 'Core learning objectives for occupational health and safety professionals', pp. 7-10. *Guidance note for the development of tertiary level courses for professional education in occupational health and safety*. Downloaded 15 June 2010 from <http://www.safeworkaustralia.gov.au/swa/HealthSafety/OHSSStandards>

### Orthotics

Latrobe University. (2009). 'Graduate attributes'. *About the bachelor of health sciences/master of clinical prosthetics and orthotics*. Downloaded 15 June 2010 from <http://www.latrobe.edu.au/ncpo/docs/courseinfo.html>

### Paramedic

Willis, E., Pointon, T., & O'Meara, P. (2009). *Paramedic education: Developing depth through networks and evidence-based research: Final report*. Downloaded 14 July 2010 from <http://altc.edu.au/resource-paramedic-education-flinders-2009>

### Veterinary nursing

The Veterinary Nurses Council of Australia Inc. 'General standards', pp. 3-4. *Code of professional conduct*. Downloaded 29 June 2010 from <http://www.vnca.asn.au>

## Audiology

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Recognise the dignity of individuals and consider client/patient rights, expectations, needs and preferences

Recognise the importance of documentation

Adhere to the specifications and intent of the current Code of ethics

Prepare, sign and maintain, within an established time frame, documentation that reflects the nature of the professional service. When appropriate and with written consent, reports are distributed with all necessary identifying information.

Except for screenings, documentation addresses the type and degree of hearing loss and associated conditions

Student supervision

Documentation includes identification information, relevant history, results of previous screening, assessment, and rehabilitation if available.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Address demographic factors, eg age, development, education, occupation, cultural, ethnic, linguistic and social factors

Consider outcomes including improvement and/or maintenance of communication and listening skills

Consider involvement of client/patient in decision-making re expected outcomes

Procedures are conducted in the client's/patient's chosen communication mode and linguistic system (including access to interpreters where required)

An essential component of each procedure is client/patient and/or family/carer counselling, which may address the nature of the hearing loss or related disorder and its impact, and outcome of the procedure

Procedures address client/patient and family/carer preferences, goals, and special needs. Materials and approaches used and products dispensed are appropriate to the client's/patient's chronological and developmental age, medical status, physical and sensory abilities, education, vocation, cognitive status and cultural/ethnic, social, and linguistic background.

Results of assessment and proposed management are discussed with the client and reported to the referral source when the referrer is another professional. They may also be reported to the client's family/carer or carer (if appropriate).

Hearing screening

Standard audiological assessment

Complex audiological assessment

Auditory evoked potential assessment

Balance system assessment

Electroneurography assessment

Vestibular rehabilitation

<sup>3</sup> During the course of this project a number of disciplines published revised professional accreditation and/or competency standards. Reference is made to these more recently published standards in section 3.1. The mapping exercise included professional accreditation and/or competency standards available at that time, and in some instances, an earlier version of the standards was used. The version of standards documentation used is shown for each individual discipline.



Central auditory processing testing  
Tinnitus assessment  
Audiological counselling  
Consultation  
Hearing aid assessment  
Surgically-implanted devices assessment  
Hearing rehabilitation assessment  
Hearing rehabilitation  
Assistive product dispensing  
Assistive listening system/device selection  
Sensory aids and surgically-implanted device assessment  
Device fitting/orientation  
Follow-up procedures  
Product repair/modification  
Neurophysiologic assessment/intraoperative monitoring.

### **Promote and optimise the health and welfare of individuals and/or populations**

Keep paramount the welfare of clients/patients served in all practice decisions and actions  
Prevention.

### **Retrieve, critically evaluate, and apply evidence in the performance of health-related activities**

#### **Deliver safe and effective collaborative healthcare**

Identify the procedures performed by audiologists  
Address the clinical indications for performing any given procedure  
Define appropriate environmental factors related to procedures, eg setting, equipment, materials  
Consider the importance of liaison with related professionals where appropriate and where permitted by the client/patient  
Recognise a variety of appropriate service delivery models and procedures, eg collaborative consultation, use of support personnel, and new and advanced technologies  
Consider risk as it relates to health, safety and welfare of clients/patients and audiologists  
Equipment is maintained according to manufacturer's specifications and recommendations; instruments are properly calibrated at recommended intervals; and calibration records are maintained.  
All procedures ensure the safety of the client/patient and clinician and adhere to universal health precautions, eg prevention of bodily injury and transmission of infectious disease  
Decontamination, cleaning, disinfection and sterilisation of multiple-use equipment before reuse is carried out according to facility-specific infection control policies and procedures, and according to manufacturer's instructions  
There is a monitoring procedure to ensure these procedures are followed by all clinical and ancillary staff.

#### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

## Chiropractic

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Awareness of responsibility, accountability and competence of health providers in Australian society  
Awareness of professionalism  
Understands professional responsibility, strengths, limitations and legal responsibilities  
Demonstrates a caring approach  
Awareness of professional ethos, organisation and history.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Effectively deals with patients referred by another healthcare provider or an agency  
Explains the case to the patient and obtains informed consent  
Obtains and records patient history  
Performs a thorough general physical examination  
Performs a thorough neuromusculoskeletal examination  
Where a chiropractor undertakes a radiological investigation, it should be appropriate and adequate  
Orders and interprets laboratory pathology procedures  
Orders and interprets special studies  
Establishes differential and working diagnoses from the information required  
Bases patient management plans on adequate diagnostic data.  
Designs an interim management plan  
Designs an appropriate patient management plan  
Communicates with and counsels the patient during provision of chiropractic care  
Effectively applies chiropractic techniques  
Effectively applies other treatment modalities  
Evaluates progress  
Implements appropriate crisis management.

### **Promote and optimise the health and welfare of individuals and/or populations**

Counsels the patient on preventative, supportive, concurrent and referral care  
Counsels the patient on disease prevention and health promotion  
Awareness of public health concepts  
Understands relevant healthcare economics.

### **Retrieve, critically evaluate, and apply evidence in the performance of health-related activities**

Develops a personal ability to seek out and apply scientific information.

### **Deliver safe and effective collaborative healthcare**

Skills in intra-professional referral

Refers patients

Relates effectively and knowledgeably to professionals and agencies

Collaborates or refers as necessary to obtain expert opinion

Observes safety guidelines

Considers safety in patient care

Manages staff and staff development.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Manages practice finances, reception, records and communication

Manages the physical and psychological practice environment.

Council on Chiropractic Education Australia Inc. (2008). *Competency based standards for entry level chiropractors.*

### **Clinical myotherapy**

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

#### **Demonstrate professional behaviours**

Acts in the best interests of the patient, giving the patient's concerns priority.

Be discouraged from entering clinical myotherapist patient relationships in which the clinical myotherapist's judgment regarding patient service could be compromised, eg in the treatment of family members

Recognises the power imbalance inherent in all clinical myotherapist-patient relationships and respects professional boundaries

Refrains from making remarks or gestures that may be interpreted as sexually and/or racially demeaning and from engaging in any sexual relationship or activity with the patient

Refrains from exploiting the clinical myotherapist-patient relationship to enhance his or her own personal income, eg by failing to disclose personal financial interests in services recommended to patients

Refrains from counseling or helping a non-clinical myotherapist to practice clinical myotherapy (excluding clinical myotherapy students).

Refrains from participating in any arrangement that financially rewards referral sources

Stays well informed of, is guided by, and assists the profession in improving its standards and values

Serves the agency/employer fairly and honestly

States explicitly any reservations concerning the standards or values of the agency/employer, and attempts to rectify employment practices that are in conflict with the profession's ethical principles

When working for non-clinical clinical myotherapists, assumes responsibility for verifying that such arrangements do not violate the ethical principles of the profession

Charges fees that are reasonable for the services performed

Refrains from using any form of promotional communication that contains false, misleading or sensational claims, makes reference to a product, fee or commercial promotion, or solicits the patronage of patients known to be under the care of another member

When providing public information or education outside his or her regular practice, refrains from addressing individual problems or providing any type of clinical myotherapy service

Ensures that the patient is addressed and treated respectfully, and that he or she receives attention according to individual need

Refrains from engaging in behavior that could be construed as harassment or abuse of colleagues, associates or employees

Presents professional qualifications honestly

Refrains from providing services if his or her ability to do so is compromised, eg by chemical impairment or emotional distress.

Respects the patient's right to make an informed choice when deciding among clinical myotherapists, facilities or services by disclosing fully and honestly all relevant information, eg factors that could influence the patient's choice of publicly funded or private services

Promotes ethical conduct in all aspects of educational activity by, at a minimum requiring its members to: respect the rights of individual students and interact with them in a professional manner, both in clinical and academic settings; demonstrate ethical practice in all aspects of clinical education; report to the appropriate authorities any illegal or unethical conduct among administrators, educators or students

Ensures that undergraduate and continuing education for clinical myotherapists includes reference to the study and observance of the profession's ethical values.

Teaches and observes the principles of research ethics and prevailing ethical standards

Educates clinical myotherapists on standard research ethics review processes

Recognises the patient's right to have his or her physical modesty and psychological privacy protected

Answers patient questions truthfully, objectively and as completely as possible

Maintains the privacy of the clinical record, as well as all information relating to the patient's personal conduct and affairs

Discusses the patient's personal information only with his or her permission or as law permits to protect the welfare of the individual or the community

Prior to initiating service, explains any foreseeable limitations on preserving the confidentiality of information to the patient, eg, legal obligation to report when an examination is conducted on behalf of a third party

Honors the patient's freedom of choice in selecting service providers, and facilitates referral to another clinical myotherapist when asked to do so by the patient

Refrains from withdrawing necessary services without providing the patient with reasonable advance notice and/or taking steps to transfer the patient's care to another clinical myotherapist

Ensures that all components of clinical myotherapy care comply with the profession's Standards of Practice and Professional Clinical Myotherapists of Australia (PCMA) guidelines

Reports research that appears to be unethical or illegal, or that violates the organisation's established research protocols or the laws of the jurisdiction in which the research is conducted

Refrains from providing service when doing so would violate his or her fundamental ethical values, and provides a referral to a practitioner who will deliver the necessary care

Makes known possible conflicts between personal values and those of employers, agencies or third party payers and, where possible, attempts to resolve such differences

Members must only advertise their services honestly and will not under any circumstances advertise information that is misleading with regard to skills or qualifications which the member does not possess

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Provides information required to help patients make informed decisions about clinical myotherapy services, eg the purpose and effect of specific interventions, potential risks, and the anticipated frequency and duration of service

Provides information in ways that will prevent harm to the patient and provide needed emotional support

Informs the patient promptly if any errors have occurred during the course of treatment

Respects the patient's right to make decisions about health providers, facilities and services

Refrains from coercing the patient's consent or penalising the patient if he or she refuses an intervention before, during, or following a treatment

Maintains ongoing and constructive communication with the patient and, where appropriate, with the patient's significant others

Members must maintain a high level of personal hygiene including clean hands, appropriate and clean clothing and will ensure any broken skin on hands or arms is covered with an appropriate dressing and in accordance with accepted practices as determined by Health Regulations

Recognises each patient's unique mix of characteristics, including gender, age, ethnic origin, religion, culture, language, sexual orientation, health status and need for clinical myotherapy services

Assists the patient in expressing his or her needs

Acts on the patient's behalf, when necessary, to ensure that others respect the patient's rights and dignity

### **Promote and optimise the health and welfare of individuals and/or populations**

Conveys accurate information about the adequacy of access to clinical myotherapy services and suggests ways to improve access

Collaborates with other healthcare groups in public education activities

Cooperates with other groups to resolve particular problems or address specific needs

Advocates for quality clinical myotherapy care in the work setting and in the healthcare system

Within the healthcare system, acts as an advocate for the patient's well-being to ensure that relevant concerns are addressed by those responsible for providing service to the patient

Understands and complies with policies guiding distribution of resources in the workplace and helps improve such policies when necessary

Advocates on behalf of the patient whose needs are not met within the established policy framework

Advocates for adequate availability of and access to clinical myotherapy services

Demonstrates to the public and stakeholders how a commitment to high quality, ethical care translates into cost-effective health outcomes for consumers

Protects the public from unethical or incompetent members by establishing programs to advance clinical myotherapy practice and by providing remediation or discipline where performance falls below acceptable standards of practice

### **Retrieve, critically evaluate, and apply evidence in the performance of health-related activities**

Avoids over-utilisation of his or her services by ensuring that the type and duration of treatment reflect current scientific evidence and discontinuing treatments when they are no longer necessary or effective

Contributes to the public debate on service availability, emphasising evidence-based solutions and the profession's commitment to patients and society.

### **Deliver safe and effective collaborative healthcare**

Refrains from practising outside his or her level of competence

Seeks the assistance of appropriate healthcare practitioners to answer patient questions beyond the scope of clinical myotherapy practice, eg when asked to communicate a diagnosis

When referring the patient to another clinical myotherapist, health practitioner or facility, informs the patient of: the reason(s) for the referral; the relative cost of services, if known; the information that will be shared with the practitioner; any interest or involvement in the referral

Refrains from assigning to non-clinical clinical myotherapists any activity that require the unique judgment, skill and knowledge of a clinical myotherapist

Assists other clinical myotherapists and health professionals as requested or needed

Respects the members of the healthcare team and recognise their expertise

Shares information with other team members, provided patient consent is obtained where required

Collaborates with team members in the planning and evaluation of patient care

Intervenes, as needed, if any member of the healthcare team appears to be providing service to the patient in an incompetent, incapacitated or unethical manner

Refrains from providing care in cases where a second practitioner is treating the patient and the services constitute duplication; the second practitioner is known to have conflicting treatment philosophies or patient care objectives; the second practitioner has a similar scope of practice and patient care objectives, but there is no communication or consultation between practitioners

Reviews options for action when faced with difficult decisions, consulting colleagues as needed.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Engages in lifelong learning to continually improve practice

Demonstrates commitment to continuous quality improvement, eg by participating fully in the PCMA's continuing education program

Educator should use the Code of ethics as a teaching tool and exemplify its principles by serving as a role model for ethical conduct.

Helps ensure clinical myotherapy students attain a high standard of patient care by encouraging its members to participate, wherever possible, in educational and mentoring opportunities, eg student placements and supervised practice arrangements

Adopts, and revises as needed, a personal ethical framework for use in making decisions about fairness to patients

Reviews, and observes in practice, his or her personal ethical principles, ensuring that they remain consistent with the expectations for ethical conduct established by the PCMA.

Professional Clinical Myotherapists of Australia. (2009). *Code of practice*.

## Dentistry

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Recognise and respect patients' rights, particularly with regard to confidentiality, privacy, informed consent

Understand and apply Commonwealth, State and Territory legislation relevant to practise as a dentist

Communicate effectively, interactively and reflectively with patients, their families, relatives and carers in a manner that takes into account factors such as their age, intellectual development, social and cultural background

Ensure the personal health information of patients is shared only with relevant healthcare providers and where permitted by law

Maintain an accurate, consistent and legible record of patient management including referral, delegation or handover

Demonstrate appropriate caring behaviour towards patients and respect professional boundaries in relationships between themselves and patients and members of the community

Understand the ethical principles and legal responsibilities involved in the provision of dental care to individual patients, to communities and populations, practising with personal and professional integrity, honesty and trustworthiness

Provide information in a manner that ensures patients and families can be fully informed when consenting to any procedure and encourage them to make fully informed decisions by discussing treatment options and expected outcomes

Obtain and record informed consent for all forms of treatment

Provide patient-centred care, respect patients' dignity and choices; acknowledge that all interactions, including history taking, diagnosis, treatment planning and treatment, must focus on the patient's best interests

Appreciate the personal responsibility to contribute to the generation of knowledge, to engage in mentoring processes and to build the image of the profession to ensure continuing public respect for it

Understand and apply the principles of culturally safe and sensitive practice and provide care in an empathic way that is free of discrimination.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Manage and evaluate psychological and behavioural factors impacting and impacted by dental and oral conditions

Obtain and record a complete history of the patient's psychosocial, medical, oral and dental status

Perform an appropriate physical examination, interpret the findings and organise further investigations when necessary in order to arrive at an appropriate diagnosis

Apply decision-making, clinical reasoning and judgment to develop a differential, provisional or definitive diagnosis by interpreting and correlating findings from the history, clinical and radiographic examination and other diagnostic tests, taking into account the social and cultural background of the patient and the longer term consequences on patients' oral and general health

Select appropriate clinical, laboratory and other diagnostic procedures and tests, understand their diagnostic reliability and validity, and interpret their results

Select treatment options based on the best available information and the least invasive therapy necessary to achieve the appropriate and favourable outcome for the patient

Appreciate the importance of identifying both the patient and the intended site for a procedure before undertaking irreversible treatment

Formulate and record a comprehensive diagnosis, management and/or referral plan which meets the needs of patients

Prevent and manage where necessary medical and dental emergency situations encountered in clinical dental practice, including oro-facial infections and trauma to the teeth, mouth and jaws

Apply knowledge and understanding of the basic biological, medical, technical and clinical sciences in order to recognise the difference between normal and pathological conditions relevant to clinical dental practice

Understand how to prevent, diagnose and treat anomalies and diseases of the teeth, mouth, jaws and associated tissues

Perform an extraoral and intraoral examination appropriate to the patient, including assessment of vital signs and the recording of those findings

Complete and record a comprehensive examination of oral hard and soft tissues

Recognise the clinical features of oral mucosal diseases and disorders

Examine the dentition for pathology and abnormalities including dental caries, attrition, wear, abrasion and erosion, and other damage to dental hard tissues

Identify the location, extent, contributing factors and degree of activity of dental caries, tooth wear and other structural or traumatic anomalies

Take radiographs of relevance to the diagnostic process and dental practice

Interpret radiographic and other diagnostic tests relevant to clinical practice

Recognise the presence of systemic disease and know how the disease and its treatment, including present medication, affect the delivery of dental care and vice versa

Diagnose abnormalities in dental or periodontal anatomical form that compromise periodontal health, function or aesthetics and identify conditions which require management

Distinguish between periodontal health and periodontal disease and identify conditions that require management

Diagnose, explain and manage the deterioration and breakdown of existing restorations

Conduct, explain and discuss the planning of restorative, periodontic and prosthetic dental treatment as part of comprehensive oral rehabilitation

Understand the common impairments of function as a consequence of tooth loss

Manage oro-facial pain, including temporomandibular joint (TMJ) disorders, discomfort and psychological distress

Manage periodontal disease

Manage caries and other hard tissue tooth loss

Manage pulp and peri-radicular disease and disorders

Restore teeth and the dentition to acceptable form, function and aesthetics

Manage patients with prosthodontic needs, including the provision of fixed, patient-removable and implant prostheses

Treat and manage conditions requiring minor surgical procedures of the hard and soft tissues, and apply and /or prescribe appropriate pharmaceutical agents to support treatment

Manage common oral mucosal diseases and disorders

Manage minor developmental or acquired dentoalveolar, growth related and functional abnormalities of the primary, mixed and permanent dentition



Produce diagnostic casts, mounted with inter-occlusal records

Establish a patient/family-practitioner relationship that allows the effective delivery of dental treatment

Recognise and communicate to patients the properties and risks and benefits of dental materials and related tissue responses

Provide open, complete and timely communication throughout the period of care

Identify patients' expectations, desires and attitudes when planning and delivering treatment.

### **Promote and optimise the health and welfare of individuals and/or populations**

Serve the community in private or public practice settings, promote health and prevent disease through activities such as: educating individuals and groups; interacting with others to promote activities that protect, restore and improve oral health and the quality of life; organised community efforts

Promote and improve the oral health of individuals and the community by understanding and applying the principles of health promotion and disease prevention

Recognise and appreciate the need to contribute to the improvement of oral health beyond those served in traditional practice settings

Understand and apply the principles of prevention for inducing behavioural changes which benefit oral health and/or general health

Educate patients at all stages in their life, or patients' family, carers or guardians, about the aetiology and prevention of oral disease using effective and evidence-based education and communication strategies

Apply psychosocial and behavioural principles in patient-centred healthcare

Achieve optimal patient care with an awareness of the need for cost-effectiveness to allow maximum benefit from the available resources

Understand systems of healthcare provision in a culturally diverse society including their advantages and limitations, the principles of efficient and equitable allocation and use of finite resources, and recognition of local and national needs in healthcare and service delivery

Appreciate the determinants of health and health behaviours

Apply a thorough knowledge of the complex interactions between oral health, nutrition, general health, drugs and systemic diseases that can have an impact on oral healthcare and oral diseases

Understand the causes and factors that lead to dental diseases or disorders

Encourage and support patients to take interest in, and responsibility for, the management of their health.

### **Retrieve, critically evaluate, and apply evidence in the performance of health-related activities**

Practise evidence-based dentistry

Evaluate and integrate emerging trends in healthcare as appropriate

Locate and evaluate evidence in a critical and scientific manner to support professional practice and use information technology appropriately as an essential resource for modern dental practice

Use contemporary information technology for documentation, continuing education, communication, management of information and applications related to healthcare

Formulate treatment plans which integrate research outcomes with clinical expertise and patient views

Evaluate the validity of claims related to the risks/benefits of products and techniques

Understand and apply knowledge of the scientific basis of dentistry, including the relevant biomedical and psychosocial sciences, the mechanisms of knowledge acquisition, scientific method and evaluation of evidence

Evaluate systematically all treatment outcomes, including information on a patient's and/or patient's family/carer's satisfaction/dissatisfaction with treatment and providing and/or recommending additional action and planning for the maintenance of oral health.

### **Deliver safe and effective collaborative healthcare**

Recognise personal limitations and know when to refer or seek advice appropriately

Understand his or her limitations and know when and how to refer a patient for an appropriate opinion and/or treatment, where the diagnosis and/or treatments are beyond his or her skills, or to confirm prescribed treatment

Work productively in his or her role in the dental team and display appropriate professional behaviour towards other team members

Contribute to teams of healthcare practitioners in delivering healthcare in a cooperative, collaborative and integrative manner

Communicate effectively with other health professionals involved in patients' care and convey written and spoken information clearly

Communicate effectively and responsibly in all communication media

Manage and maintain a safe working environment; have an appreciation of the systems approach to quality healthcare and safety, and the need to adopt and practise healthcare that maximises patient safety

Apply the scientific principles of sterilisation, disinfection and antisepsis, and cross infection control

Work safely with ionising radiations with consideration for their effects on biological tissues and understand and apply the regulations relating to their use, including radiation protection and dose reduction

Apply the principles of pharmacology in using therapeutics relevant to clinical dental practice

Appreciate medical conditions and medications which can impact on oral health or make the provision of dental treatment unsafe

Propose, discuss and agree treatment options that are sensitive to each patient's individual needs, goals and values, compatible with contemporary methods of treatment, and congruent with an appropriate oral healthcare philosophy

Understand how to manage a dental practice including planning, organising and leading clinical teams in public or private practice

Understand basic principles of practice administration, financial and personnel management in a dental practice

Promote health maintenance of colleagues.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Employ a critically reflective approach to practice which involves learning from experience and participating in and contributing to peer review

Utilise critical thinking, problem-solving skills and emotional intelligence

Maintain their own health and understand its importance in relation to occupational hazards and its impact on the ability to practise as a dentist

Demonstrate an ethos of lifelong professional growth and development, and support continuing professional development for all members of the dental team.

## Exercise physiology

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

An understanding of national compensation schemes and legislation that includes clinical exercise practice

Knowledge of workers' compensation and compulsory third party legislation and frameworks

Capacity to deliver appropriate workers' compensation and compulsory third party services in the role of the: (i) accredited exercise physiologist (AEP); (ii) case manager

Knowledge of Exercise and Sport Science Australia (ESSA) code of professional conduct and ethical practice

Categorise professional behaviour according to the ESSA ethics charter.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Knowledge of the professional roles available to the accredited exercise physiologist (AEP) within the following two broad categories: (i) knowledge of chronic disease management (rehabilitation and secondary prevention); (ii) knowledge of functional conditioning, incorporating both work conditioning and conditioning for activities of daily living

Understanding of the broad classifications of pathology in the context of the AEP

Understanding of pathological and pathophysiological bases of the AEP target pathologies, including diagnostic procedures

Understanding of the stages of disease, risk factors, complications and comorbidities that must be accounted for in exercise interventions

Knowledge of the purpose, methods and typical clinical outcomes of common surgical, medical and allied health treatments for AEP target pathologies

Access and use information on the effects of common surgical medical and allied health treatments on the clinical status of clients with AEP target pathologies

Knowledge of the typical effects of common surgical, medical and allied health treatments on exercise responses for clients with AEP target pathologies

Access and use information on the effects of common surgical, medical and allied health treatments on the expected acute and chronic exercise responses

Knowledge of the mode of action and indications of medications commonly prescribed in AEP target pathologies

Knowledge of the effects of the following commonly prescribed medication classes on acute and chronic exercise blockers: (i) Cardiovascular: beta blockers, alpha blockers, angiotensin converting enzyme inhibitors (ACEI), calcium channel blockers, anti-anginal agents, cardiac glycosides (eg digoxin), diuretics, statins, anti-arrhythmic agents, anti-thrombogenic agents; (ii) respiratory: relievers, symptom controllers, preventers and emergency medicine; (iii) metabolic: hypoglycaemic agents, insulin: fast and slow acting, sugar to treat hypoglycaemia, agents to treat obesity. include sulfonylureas, meglitinides, biguanides, thiazolidinediones, and alpha-glucosidase inhibitors; (iv) musculoskeletal: nonsteroidal anti-inflammatory drugs, corticosteroids and opioids; (v) neurological / neuromuscular: antispasm medications, psychotropic, antidepressants

Experience with details of clients' current medications, including: (i) accessing information on the actions of prescribed medications, eg using MIMS; (ii) explaining to clients in plain language the purpose(s) of their prescribed medications; (iii) explaining to clients the importance of compliance to prescribed medication regimes; (iv) accessing and using information on medications with respect to the associated acute and chronic exercise responses

Experience with the assessment of clinical outcomes following exercise interventions by: (i) accessing clinical data, eg request data from medical practitioners; (ii) interpreting clinical data, eg blood tests, with reference to the clinical literature; (iii) measuring the clinical outcomes, eg blood pressure

Understanding of typical risk factors, eg biological, sociocultural, behavioural and environmental; alleviating factors; and aggravating factors for AEP target pathologies and comorbidities

Selection and application of appropriate instruments to assess the risk of exercise participation for clients with AEP target pathologies, and comorbidities

With using appropriate (to the client and situation) exercise tests, including measurements and observations of aerobic power (predicted or direct  $VO_{2max}$  or  $VO_{2peak}$ ), aerobic endurance, rest and exercise spirometry, muscle strength and endurance, ranges of motion, body composition, static and dynamic postures, core stability, balance, coordination, mobility, gait, movement patterns, functional capabilities, and activities of daily living

Awareness of communication and other cognitive, emotional and social pressures that could be affected by mental health disorders

Understanding of the core principles of occupational rehabilitation

Understanding of the ergonomic principles within workplace environments and how these apply functionally to the individual

Understanding of the core principles of case management

Knowledge of functional capacity evaluations (FCE) that are widely used and accepted in industry and professional practice

Understanding of how to transfer FCEs into functional conditioning programs and strategies

Knowledge of the tests for activities of daily living that are widely used and accepted in professional practice

Basic understanding of the ergonomic principles within home environments

Experience with: (i) designing, processing and being responsible for developing and adhering to treatment plans; (ii) running workplace ergonomic assessments/worksites visits to make functional modifications or recommend suitable duties relative to an individual's capacity and injuries/conditions; (iii) providing concise, objective reports and return-to-work plans that meet the needs of all relevant parties, eg employee, employer, medical/allied health professionals and insurer and relevant legislative requirements; (iv) evaluating functional capacity (both for individuals with injuries/conditions or for pre-employment assessments); (v) transferring baseline functional capacity information into functional exercise programs and understanding functional body mechanics as it pertains to manual handling in the workplace environment and safe ergonomic principles

Experience in generic functional capacity/conditioning services: (i) activities of daily living (ADLs); (ii) designed, delivered and evaluated exercise programs to improve activities of daily living capacities in people with AEP target pathologies; (iii) ergonomic assessments within home environments

The ability to monitor and interpret at rest, exercise and recovery: (i) self-report scales, eg RPE and fatigue, visual analogue scales, dyspnoea scales, pain, physical activity; (ii) heart rate, rhythm and oxygen saturation, eg palpation, heart rate monitor, ECG, pulse oximetry; (iii) blood pressure; (iv) breathing, eg visual observations, spirometry; (v) balance and movement patterns, eg static and dynamic postures, coordination, mobility, gait

Knowledge of modes, intensities and volumes of exercise that may cause deterioration of clients (physical and/or cognitive) and/or adverse events

Identification of modes, intensities and volumes of exercise that are contraindicated for clients with AEP target pathologies. These should be for acute, eg thermoregulation, and chronic, eg adverse remodelling of the heart in heart failure with excess loads, effects of exercise

Knowledge of adverse signs and symptoms that may arise during exercise or recovery for the list of AEP target pathologies

Knowledge of when to modify, stop or not start an exercise, test, exercise session or program in the event of the appearance of new or recurring adverse observations or measurements or new or recurring signs or symptoms

Experience in monitoring signs and symptoms before, during and after exercise that may indicate important changes relating to an injury or disease status or progression

Confidence in dealing with clients (either via reassurance and/or referral) for whom a test, exercise session or program is modified, stopped or not started due to the presence of signs, symptoms or adverse observations or measurements

Experience in designing, implementing, evaluating, modifying and advancing individual exercises or exercise programs, accounting for: (i) presenting pathology and comorbidities (may be extracted from referral); (ii) current treatment(s), including medical, pharmacological and allied health; (iii) risk factors, aggravating factors, alleviating factors; (iv) interpersonal communication; (v) goals, likes and dislikes, barriers, eg sociocultural, socioeconomic and sociopsychological factors; (vi) subjective and objective measurements or observations; (vii) current exercise and functional capacities

Exercise programs should account for mode, intensity, duration, frequency, volume and progression, and should reflect a concord between AEP and client

Knowledge of factors that affect long-term exercise adherence and concordance, and sociocultural factors that must be considered when supporting clients in their endeavours towards self-management of healthy lifestyle, exercise and physical activity

Experience in interviewing clients to compile a relevant history beyond the referral and risk factor documentation, including exercise and work histories, the client's perspectives on the cause(s) of disease/mechanisms of injury, comorbidities, barriers to participation, pain, goals, likes and dislikes, and opportunities

Provision of assistance and guidance to clients and, where appropriate, referrers to develop appropriate short-, medium- and long-term goals, appropriate to medical, physical and psychosocial, functional and environmental influences

Experience in counselling and working with clients through behaviour change

Knowledge of the strategies to deal with clients who may be hostile, resistant, noncompliant, anxious, depressed or psychotic

Using (subjective, objective, assessment, plan) SOAP notes, practice in clinical documentation, including the compilation of a client's file and clinical note-taking

Understanding of safe exercise limits using thresholds that commonly arise when exercise testing people with cardiopulmonary conditions including: (i) angina; (ii) claudication; (iii) dyspnoea; (iv) light headedness/syncope

Basic knowledge of pulmonary rehabilitation

Ability to recognise breathing limitations that impact on exercise capacity: (i) obstructive airway patterns; (ii) FVC,  $FEF_{peak}$ , FEV1, predicted or measured MVV; (iii)  $V_E$  at peak exercise; (iv) breathing reserve; (v) exercise-induced asthma; (vi)  $O_2$  sat%

The design of an exercise intervention for clients with chronic obstructive pulmonary disease

Knowledge of adverse signs and symptoms that may arise during exercise or recovery for the list of cardiopulmonary target pathologies

Experience in recognising and taking appropriate action regarding: (i) vasovagal episodes; (ii) hypotension/hypertension related to exertion; (iii) ischaemia (angina, claudication); (iv) depleted breathing reserve; (v) general or localised fatigue; (vi) cardiopulmonary arrest

Understanding of the: (i) common aberrant rhythms and waveform morphologies; (ii) pathological correlates of the aberrant rhythms and waveform morphologies; (iii) red, amber and green flags in relation to aberrant rhythms and waveform morphologies

Experience in: (i) setting up, monitoring and recording 12-lead electrocardiograms at rest, exercise and recovery (especially heart rate and rhythm); (ii) basic recognition of common aberrant rhythms and traces (see list following); (iii) confidence in rapidly responding to adverse ECG findings: red, amber and green flags in ECG

Experience in basic recognition of the following aberrant rhythms and waveforms, and an ability to outline the course of action (continue with exercise = green flag; continue only after medical approval = amber flag; discontinue and refer = red flag): (i) ectopy: atrial, junctional and ventricular; (ii) atrial fibrillation; (iii) atrial flutter; (iv) sinus block/arrest; (v) electrolyte disturbances; (vi) digitalis toxicity; (vii) atrioventricular blocks (1°, 2°, 3°); (viii) bundle branch blocks; (ix) axis deviations; (x) real versus pseudo ST depression in exercise; (xi) pre-excitation syndrome; (xii) ventricular tachycardias; (xiii) ventricular fibrillation and cardiac arrest; (xiv) symptomatic brady-arrhythmias, eg vasovagal episodes; (xv) symptomatic tachy-arrhythmias

Understand the purpose and methods of the following tests: (i) glucose tolerance test; (ii) random blood glucose; (iii) fasting blood glucose; (iv) glycosaturated haemoglobin (HbA1c); (v) total cholesterol, HDL<sub>chol</sub>, LDL<sub>chol</sub>, triglycerides

Experience in interpreting the following tests: (i) glucose tolerance test (GTT); (ii) random blood glucose (RBG); (iii) fasting blood glucose (FBG); (iv) glycosaturated haemoglobin (HbA1c); (v) total cholesterol, HDL<sub>chol</sub>, LDL<sub>chol</sub>, triglycerides

Knowledge of adverse signs and symptoms that may arise during exercise or recovery for metabolic target pathologies

Specifically, understand the issues surrounding glucose control before, during and following exercise in people with diabetes

Experience in recognising and taking appropriate action regarding: (i) hypoglycaemia; (ii) hyperglycaemia; (iii) for both hypoglycaemia and hyperglycaemia, suitable advice for clients regarding glucose testing and control before, during and after exercise; (iv) hypotension or hypertension related to exertion; (v) ischaemia (angina, claudication); (vi) depleted breathing reserve; (vii) general or localised fatigue

Understanding of applied movement analysis

Experience in performing a movement and work task analysis in a clinically relevant time period

Ability to adapt techniques based on the observations and measurements made above

Understanding of the loading characteristics of tissue, eg bone, ligament, tendon, nerve, muscle, with and without pathology

Experience in progressively varying tissue loading characteristics in response to a specific pathology, physical status or work demand task (including the ability to perform this experience in a clinically relevant time period)

Understanding of tissue mechanics to create a safe exercise environment

Experience in developing loading strategies for tissue with and without specific pathology, in a clinically relevant time period

Experience in recognising and taking appropriate action for: (i) acute musculoskeletal pain and injuries; (ii) medical emergencies, such as cauda equine syndrome

Knowledge of adverse signs and symptoms that may arise during exercise or recovery for the list of musculoskeletal target pathologies

The capacity to recognise (during exercise and recovery) and take appropriate action regarding: (i) new or worsening pain; (ii) new or worsening neurological deficit; (iii) failure to achieve expected gains in exercise capacity

Familiarity with using and interpreting various subjective and objective measures from the generic list as relevant to this category or when clinically appropriate

An ability to create an environment (including equipment modification) that is safe for a person with neurological pathology to exercise

Knowledge of adverse signs and symptoms that may arise during exercise or recovery for the list of neurological or neuromuscular target pathologies

Confidence to recognise and take appropriate action regarding common signs and symptoms associated with neurological or neuromuscular target pathologies, eg autonomic dysreflexia, hypotension, elevated core temperature.

### **Promote and optimise the health and welfare of individuals and/or populations**

Ability to explain, advise or provide information to help clients to understand AEP target pathologies, risk factors and the relationship with exercise

Provision of basic education on AEP target pathologies or risk factors, and related benefits of exercise and healthy lifestyle

Knowledge of the challenges and opportunities for delivering culturally appropriate exercise and healthy lifestyle programs for communities and individuals from culturally and linguistically diverse (CALD) backgrounds

The design and deliverance of culturally appropriate exercise and healthy lifestyle programs to CALD communities and individuals. Communication must be sympathetic to sociocultural diversity, eg CALD clients or colleagues, and diversity/minority groups). Know when to work with an interpreter

Motivation and leadership of individuals and groups of clients with AEP target pathologies in exercise and physical activity programs; providing feedback to clients, including correcting poor or unsafe techniques

Knowledge of basic lifestyle strategies, programs and resources, including government and community-based population-wide strategies

Knowledge of nutrition at the level needed to provide basic lifestyle advice, with emphasis on AEP target pathologies

Understanding of the psychology of living with chronic medical conditions, pain, anxiety, depression, bereavement

Understanding of models of behaviour change

Awareness of communication and other cognitive, emotional and social processes that could be affected by neurological or neuromuscular target pathologies

Experience in modifying communication strategies to improve effectiveness

Ability to modify communication strategies to improve effectiveness

Awareness of the issues concerning exercise: (i) following chemotherapy, radiotherapy, surgery and other treatments; (ii) before blood tests; (iii) after prolonged bed rest; (iv) in conjunction with medications used to treat cancer patients

Experience in determining safe (client-centred) exercise limits and effective ranges for exercise and physical activity

Provision of counselling and support for clients in their development of self-management strategies to promote independence.

### **Retrieve, critically evaluate, and apply evidence in the performance of health-related activities**

Awareness of evidence bases of the effects of exercise for people living with, or at risk of, AEP target pathologies

Understanding of evidence-based practice models of clinical decision-making

Experience in assessing, comprehending, critically analysing, collating and disseminating the clinical exercise scientific literature

Experience in making informed judgements of the claims made in the original research articles versus the strength of the evidence provided

Knowledge of the evidence with regard to mode of exercise, intensity, duration, frequency, volume and progression for AEP target pathologies.

### **Deliver safe and effective collaborative healthcare**

Knowledge of the roles of other health practitioners in the context of clinical exercise practice

Articulation of the scope of professional roles available to the AEP

Experience in referring to, and/or use of a referral letter from: (i) an allied health professional; (ii) a medical practitioner

Communication (verbal, written, electronic) using brief and concise language, and in appropriate syntax (subjective, objective, assessment, plan - SOAP, lay, medical) for other AEPs, medical practitioners, other health professionals, compensable authorities/agents, eg insurers, and clients.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Exercise and Sport Science Australia. (2010). NUCAP: *National university course accreditation program: Guidelines and application form for academic units applying for full accreditation of a course with Exercise and Sports Science Australia (ESSA), V.3.0.*

## **Medicine**

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Have knowledge and understanding of the principles of ethics related to healthcare and the legal responsibilities of the medical profession

Demonstrate an appreciation of the complexity of ethical issues related to human life and death, including the allocation of scarce resources

Demonstrate respect for every human being, including respect of sexual boundaries

Demonstrate respect for community values, including an appreciation of the diversity of human background and cultural values

Demonstrate a realisation that one's personal, spiritual, cultural or religious beliefs should not prevent the provision of adequate and appropriate information to the patient and/or the patient's family, or the provision of appropriate management including referral to another practitioner

Demonstrate an appreciation of the responsibility to contribute towards the generation of knowledge and the professional education of junior colleagues

Demonstrate a commitment to ease pain and suffering.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Have developed the ability to construct, in consultation with a patient, an accurate, organised and problem-focused medical history

Have developed the ability to perform an accurate physical and mental state examination

Have developed the ability to interpret and integrate the history and physical examination findings to arrive at an appropriate diagnosis or differential diagnosis

Have knowledge and understanding of common diagnostic procedures, their uses and limitations

Have developed the ability to select the most appropriate and cost-effective diagnostic procedures



Have developed the ability to interpret common diagnostic procedures

Have developed the ability to formulate a management plan, and to plan management in concert with the patient

Have developed the ability to choose, from the repertoire of clinical skills, those that are appropriate and practical to apply in a given situation

Have knowledge and understanding of management of common conditions including pharmacological, physical, nutritional and psychological therapies. A more detailed knowledge of management is required for those conditions that require urgent assessment and treatment.

Have developed the ability to recognise serious illness and to perform common emergency and life-saving procedures, including care for the unconscious patient and cardiopulmonary resuscitation

Have knowledge and understanding of the normal structure, function and development of the human body and mind at all stages of life, the factors that may disturb these, and the interactions between body and mind

Have knowledge and understanding of the aetiology, pathology, symptoms and signs, natural history, and prognosis of common mental and physical ailments in children, adolescents, adults and the aged

Have knowledge and understanding of normal pregnancy and childbirth, the more common obstetrical emergencies, the principles of antenatal and postnatal care, and medical aspects of family planning

Have knowledge and understanding of the principles of amelioration of suffering and disability, rehabilitation and the care of the dying

Demonstrate a commitment to communicating with patients and their families, and to involving them fully in planning management

Demonstrate a realisation that it is not always in the interests of patients or their families to do everything that is technically possible to make a precise diagnosis or to attempt to modify the course of an illness

Have developed the ability to counsel patients sensitively and effectively, and to provide information in a manner that ensures patients and families can be fully informed when consenting to any procedure.

### **Promote and optimise the health and welfare of individuals and/or populations**

Have knowledge and understanding of the principles of health education, disease prevention and screening

Demonstrate recognition that the doctor's primary professional responsibilities are the health interests of the patient and the community

Demonstrate a desire to achieve the optimal patient care for the least cost, with an awareness of the need for cost-effectiveness to allow maximum benefit from the available resources

Have knowledge and understanding of systems of provision of healthcare in a culturally diverse society including their advantages and limitations, the principles of efficient and equitable allocation and use of finite resources, and recognition of local and national needs in healthcare and service delivery

Have knowledge and understanding of Indigenous health, including the history, cultural development and health of the Indigenous peoples of Australia or New Zealand

Have knowledge and understanding of the factors affecting human relationships, the psychological, cultural and spiritual wellbeing of patients and their families, and the interactions between humans and their social and physical environment.

### **Retrieve, critically evaluate, and apply evidence in the performance of health-related activities**

Have knowledge and understanding of the scientific method relevant to biological, behavioural and social sciences at a level adequate to provide a rational basis for present medical practice, and to acquire and incorporate the advances in knowledge that will occur over their working life

Have developed the ability to interpret medical evidence in a critical and scientific manner and an understanding of the epidemiology of disease in differing populations and geographic locations

Have developed the ability to use information technology appropriately as an essential resource for modern medical practice.

### **Deliver safe and effective collaborative healthcare**

Demonstrate a preparedness to work effectively in a team with other healthcare professionals

Have developed communication skills, including being able to listen and respond, as well as being able to convey information clearly, considerately and sensitively to patients and their families, doctors, nurses, other health professionals and the general public

Demonstrate a realisation that doctors encounter clinical problems that exceed their knowledge and skills, and that, in these situations, they need to consult and/or refer the patient for help in clinical, cultural, social and language related matters as appropriate

Demonstrate an appreciation of the systems approach to healthcare safety, and the need to adopt and practise healthcare that maximises patient safety including cultural safety

Have developed the skills needed to work safely as an intern, as outlined in the *National Patient Safety Education Framework* developed by the Australian Council for Quality and Safety in Health Care.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Demonstrate an appreciation of the responsibility to maintain standards of medical practice at the highest possible level throughout a professional career

Demonstrate recognition that the doctor should have the necessary professional support, including a primary care physician, to ensure his or her own well-being.

Australian Medical Council. (2009). *Assessment and accreditation of medical schools: Standards and procedures, 2009*.

## **Midwifery**

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Complies with policies and guidelines that have legal and professional implications for practice

Demonstrates and acts upon knowledge of legislation and common law pertinent to midwifery practice

Formulates documentation according to legal and professional guidelines

Acts to ensure that the rights of women receiving maternity care are respected

Practises in accordance with the endorsed Code of ethics and relevant state/territories and Commonwealth privacy obligations under law

Plans, implements and evaluates strategies for providing culturally safe practice for women, their families and colleagues

Recognises and acts within own knowledge base and scope of practice

Addresses the impact of personal beliefs and experiences on the provision of midwifery care

Appraises and addresses the impact of power relations on midwifery care

Identifies unsafe practice and takes appropriate action

Fulfils the duty of care in the course of midwifery practice

Assumes responsibility for professional midwifery leadership functions

Contributes to, and evaluates, the learning experiences and professional development of others.

**Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Assesses the health and well being of the woman and her baby

Respects and supports women and their families to be self-determining in promoting their own health and well-being

Plans and evaluates care in partnership with the woman

Communicates effectively with the woman, her family and friends

Manages the midwifery care of women and their babies

Applies knowledge, skills and attitudes to enable woman centred care

Demonstrates the ability to initiate, supply and administer relevant pharmacological substances in a safe and effective manner within relevant state or territory legislation

Recognises and responds effectively in emergencies or urgent situations.

Utilises midwifery knowledge and skills to facilitate an optimal experience for the woman

Evaluates the midwifery care provided to the woman and her baby

Provides or supports midwifery continuity of care.

**Promote and optimise the health and welfare of individuals and/or populations**

Provides learning opportunities appropriate to the woman's needs

Protects, promotes and supports breastfeeding

Advocates for, and promotes midwifery practice, within the context of public health policy.

**Retrieve, critically evaluate, and apply evidence in the performance of health related activities**

Ensures research evidence is incorporated into practice

Interprets evidence as a basis to inform practice and decision-making.

**Deliver safe and effective collaborative healthcare**

Plans, provides, and is responsible for, safe and effective midwifery care

Utilises a range of midwifery knowledge and skills to provide midwifery care for the woman and/or her baby with complex needs as part of a collaborative team

Consults with, and refers to, another midwife or appropriate healthcare provider when the needs of the woman and her baby fall outside own scope of practice or competence

Collaborates with, and refers women to, appropriate community agencies and support networks

Demonstrates effective communication with midwives, healthcare providers and other professionals

Establishes, maintains and evaluates professional relationships with other healthcare providers

Delegates, when necessary, activities matching abilities and scope of practice and provides appropriate supervision.

**Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Assesses and acts upon own professional development needs.

## Naturopathy

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Consider the health and wellbeing of the patient and have an understanding of the therapeutic nature of the patient and practitioner relationship

Maintain patient confidentiality in accordance with legal requirements

Maintain a safe and hygienic practice environment

Maintain and keep accurate up-to-date patient records in a secure and confidential manner

Abide by the *Code of professional ethics* of the Australian Natural Therapists Association

Abide by the constitution, policies and rules of the Australian Natural Therapists Association

Treat patients with compassion, respect and have an appreciation of the diversity of human background and cultural values

Comply with local, state and federal laws.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Listen to and identify the concerns of the patient, families and carers

Present information accurately and clearly to a patient in accordance with good professional practice

Respect the patient's right to make decisions about their healthcare.

### **Promote and optimise the health and welfare of individuals and/or populations**

### **Retrieve, critically evaluate, and apply evidence in the performance of health related activities**

### **Deliver safe and effective collaborative healthcare**

Refer patients to other health service practitioners as appropriate.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Maintain professional reputation based on integrity and ability

Continue self-education to maintain currency of healthcare services

Provide healthcare services consistent with and in accordance with the scope of qualifications and training.

Australian Natural Therapists Association. (2007). *Scope and standards of practice*.

## Nursing

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Practises in accordance with legislation affecting nursing practice and healthcare

Practice in a way that acknowledges the dignity, culture, values, beliefs and rights of individuals/groups

Advocates for individuals/groups and their rights for nursing and healthcare within organisational and management structures

Recognises and responds appropriately to unsafe or unprofessional practice

Fulfils the duty of care

Integrates organisational policies and guidelines with professional standards.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Integrates nursing and healthcare knowledge, skills and attitudes to provide safe and effective nursing care

Prioritises workload based on the individual's/group's needs, acuity and optimal time for intervention

Uses a range of assessment techniques to collect relevant and accurate data

Analyses and interprets assessment data accurately

Determines agreed priorities for resolving health needs of individuals/groups

Identifies expected and agreed individual/group health outcomes including a time frame for achievement

Documents a plan of care to achieve expected outcomes

Effectively manages the nursing care of individuals/groups

Provides nursing care according to the documented care of treatment plan.

Responds effectively to unexpected or rapidly changing situation.

Determines progress of individuals/groups toward planned outcomes

Revises the plan of care and determines further outcomes in accordance with evaluation data

Plans for continuity of care to achieve expected outcomes

Establishes therapeutic relationships that are goal-directed and recognises professional boundaries.

### **Promote and optimise the health and welfare of individuals and/or populations**

Assists and supports individuals/groups to make informed healthcare decisions

Educates individuals/groups to promote independence and control over their health

Uses appropriate strategies to promote an individual's/group's self-esteem, dignity, integrity and comfort

Facilitates a physical, psychosocial, cultural and spiritual environment that promotes individual/group safety and security

Uses healthcare resources effectively and efficiently to promote optimal nursing and healthcare.

### **Retrieve, critically evaluate, and apply evidence in the performance of health-related activities**

Demonstrates analytical skills in accessing and evaluating health information and research evidence

Uses a relevant evidence-based assessment framework to collect data about the physical socio-cultural and mental health of the individual/group

Uses best available evidence, nursing expertise and respect for the values and beliefs of individuals/groups in the provision of nursing care

Identifies the relevance of research to improving individual/group health outcomes

Uses best available evidence, standards and guidelines to evaluate nursing performance

Supports and contributes to nursing and healthcare research.

### **Deliver safe and effective collaborative healthcare**

Recognises the differences in accountability and responsibility between registered nurses, enrolled nurses and unlicensed care workers

Understands and practises within own scope of practice

Recognises that the membership and roles of healthcare teams and service providers will vary depending on an individual's/group's needs and healthcare setting

Communicates nursing assessments and decisions to the interdisciplinary healthcare team and other relevant service providers

Facilitates coordination of care to achieve agreed health outcomes

Collaborates with the healthcare team to inform policy and guideline development

Communicates effectively with individuals/groups to facilitate provision of care

Delegates aspects of care to others according to their competence and scope of practice

Provides effective and timely direction and supervision to ensure that delegated care is provided safely and accurately.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Participates in professional development to enhance nursing practice

Uses appropriate strategies to manage own responses to the professional work environment

Participates in quality improvement activities

Contributes to the professional development of others.

Australian Nursing and Midwifery Council. (2006). *National competency standards for the registered nurse*.

## Nutrition and Dietetics

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Develops and maintains a credible professional role by commitment to excellence of practice

Demonstrates professional leadership to promote the contribution of nutrition and dietetics to health and prevention of disease

Demonstrates cultural awareness.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Collects food intake and food systems data

Collects health and medical, social, cultural, psychological, economic, personal and environmental data

Provides assessment of food intake data

Provides assessment of nutritional status

Undertakes screening and assessment to identify and prioritise those at nutritional risk

Determines nutritional status using assessment data

Makes appropriate nutrition diagnoses

Prepares plan for achieving management goals in collaboration with client or carer and other members of healthcare team

Implements nutrition care plan in collaboration with client or carer and other members of healthcare team

Monitors progress of the individual's condition and care and adapts plan as necessary

Documents and communicates all steps of the process

Conducts a needs assessment

Evaluates nutrition programs with the population group

Documents and disseminates all steps of the process

Evaluates and disseminates results of activities

Creates solutions which match and solve problems.

### **Promote and optimise the health and welfare of individuals and/or populations**

Describes personal, social, cultural, psychological, environmental, economic and political factors influencing food and food use, food habits, diet and lifestyle

Demonstrates knowledge of foods and food preparation methods used in the practice community

Uses client-centred counselling skills to facilitate nutrition and lifestyle change and supports clients to self-manage

Identifies and develops education resource material

Communicates with individuals, groups, organisations and communities from various cultural socio-economic, organisational and professional backgrounds to enable them to take actions to improve nutrition and health outcomes applying the principles of learning theory

Develops and delivers education sessions for small groups

Assesses opportunities to improve nutrition and food supply in a community or population group

Plans nutrition programs with the population group

Develops plans to provide safe and nutritious food  
Implements nutrition programs with the population group  
Describes food systems, food use, and food and nutrition policy  
Makes recommendations on food and nutrition policy  
Advocates on behalf of individuals, groups and the profession to positively influence the wider political, social and commercial environment, about factors which affect eating behaviour and nutritional standards  
Describes and compares food service systems  
Describes and compares theories of health promotion, program planning, and management and public health  
Assesses opportunities to improve nutrition and food standards within a food service institution (refers to an environment where clients are nutritionally dependent)  
Develops plans to provide safe and nutritious foods in a food service institution  
Implements activities to support delivery of quality nutrition and food standards within a food service.

### **Retrieve, critically evaluate, and apply evidence in the performance of health-related activities**

Relates knowledge of food science to nutrition and dietetics  
Applies clinical reasoning theory  
Adopts a questioning and critical approach in all aspects of practice  
Applies evaluation findings into practice  
Applies current knowledge of the theory of human nutrition and dietetics and related practice to a level which supports safe practice  
Assesses and assigns priorities to all data  
Draws justifiable conclusions from all data  
Applies the basic principles of education theory as it applies to nutrition and dietetic practice  
Applies principles of learning theory  
Conducts or uses nutrition research methodology, research principles and evidence-based practice including qualitative and quantitative research methods  
Conducts research using appropriate research methods, ethical processes and procedures and statistical analysis.

### **Deliver safe and effective collaborative healthcare**

Develops sustainable collaborative relationships and networks  
Translates technical nutrition information into practical advice on food and eating  
Demonstrates safe practice  
Applies organisational skills in the practice of nutrition and dietetics  
Applies management principles in the practice of nutrition and dietetics  
Applies quality management principles to all aspects of professional practice.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Evaluates practice on an ongoing basis.



## Occupational Therapy

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Adopt a client-centred approach to practice

Practice in a culturally safe professional manner

Practice in a professional manner that meets ethical and legal responsibilities

Demonstrate professional knowledge, skills and attitudes appropriate for the working environment.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Perform a relevant, comprehensive, assessment of occupational performance

Engage in critical, collaborative, professional reasoning processes to determine priorities for intervention

Develop, communicate and implement an effective, efficient plan for occupational therapy intervention

Demonstrate client-centredness during intervention

Promote client occupational performance and participation

Select and implement intervention strategies and methods appropriate to the client

Select and implement intervention strategies and methods appropriate to the working environment

Utilise available community resources, facilities and services

Respect and support the role(s) of significant other(s)

Plan cessation / completion of services / effective handover.

### **Promote and optimise the health and welfare of individuals and/or populations**

Promote and facilitate occupation through the application of professional knowledge, skills, attitudes and evidence appropriate to the practice context

Incorporate perspectives of multiple stakeholders in evaluation of occupational therapy service provision

Demonstrate the ability to understand and conduct multiple evaluation methods and techniques

Demonstrate an understanding of and commitment to principles and methods of quality improvement

Contribute to the promotion and advancement of occupational therapy.

### **Retrieve, critically evaluate, and apply evidence in the performance of health-related activities**

Incorporate best available research evidence and professional reasoning into occupational therapy practice

Utilise evaluation outcomes to make recommendations for future practice.

### **Deliver safe and effective collaborative healthcare**

Facilitate active participation of the client in service provision

Adopt a communication approach appropriate to the working environment

Document and report relevant aspects of service provision

Share professional information responsibly

Adopt an efficient, effective and systematic approach to daily workload management

Work effectively within the structure of the workplace environment

Contributes to quality assurance and service development.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Maintain and enhance competence through lifelong learning and continuing professional development activities  
Engage in lifelong learning processes and activities to maintain professional competence  
Contribute to education and professional practices of students.

Occupational Therapy Australia Limited. (2010). *Australian Minimum Competency Standards for New Graduate Occupational Therapists*.

## **Optometry**

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Have knowledge and understanding of the principles of ethics related to healthcare and the legal responsibilities of optometrists  
Respect for every human being, with an appreciation of the diversity of human background and cultural values  
Full understanding of the ethical issues relating to the delivery of healthcare  
A desire to improve the human condition and to ease discomfort and suffering.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Have knowledge and understanding of the normal structure, function and development of the human eye and visual system at all stages of life  
Have knowledge and understanding of ocular and visual dysfunctions and diseases across the lifespan; a more detailed knowledge is required of those conditions that present commonly and require urgent assessment and treatment  
Have knowledge and understanding of common diagnostic and therapeutic procedures, their uses and limitations  
Have knowledge and understanding of management of ocular and visual dysfunctions and diseases, including optical therapies, visual training, workplace environmental factors and pharmacological therapies  
Have knowledge and understanding of factors affecting human relationships, the psychological wellbeing of patients and their families, and the interactions between humans and their social and physical environment  
The ability to take a tactful, accurate, organised and problem-focused history  
The ability to choose from the repertoire of clinical skills, those which it is appropriate and practical to apply in a given situation  
The ability to select the most appropriate and cost-effective diagnostic and therapeutic procedures  
The ability to apply the common optometric clinical skills proficiently  
The ability to interpret and integrate the history and physical examination findings to arrive at an appropriate diagnosis or differential diagnosis  
The ability to formulate a management plan, and to plan management in concert with the patient

The ability to counsel sensitively and effectively, and to provide information in a manner that ensures patients and families can be truly informed

The ability to identify and treat those ocular and visual dysfunctions and diseases that can be treated within the scope of optometric therapeutic practice and to recognise ocular disease and ocular signs of systemic disease that require ophthalmological opinion or treatment

The ability to perform common emergency and life-saving procedures such as caring for the unconscious patient and cardiopulmonary resuscitation

An awareness of the need to communicate with patients and to involve them fully in decisions on management.

### **Promote and optimise the health and welfare of individuals and/or populations**

Have knowledge and understanding of the principles of public health, including health service delivery, health education, prevention of disease and morbidity, and rehabilitation

A desire to achieve optimal patient care for the least cost, with an awareness of the need for cost-effectiveness to allow maximum benefit from the available resources

Recognition that the health and wellbeing of the patient and the community are paramount.

### **Retrieve, critically evaluate, and apply evidence in the performance of health related activities**

Have knowledge and understanding of the physical, mathematical, optical, biological, biomedical and behavioural sciences at a level adequate to provide a rational basis for both present optometric practice and the assimilation of the advances in knowledge that will occur over their working life

Have knowledge and understanding of the principles and methodology of scientific investigation and inference to provide the basis for evaluating the effectiveness of current practice and the value of propositions for changes and innovations

The ability to interpret biomedical evidence in a critical and scientific manner, and to use libraries and other information resources to pursue independent inquiry relating to optometric problems.

### **Deliver safe and effective collaborative healthcare**

The ability to communicate clearly, considerately and sensitively with patients, relatives, medical practitioners, other health professionals and the general public

A willingness to work effectively in a team with other healthcare professionals

An appreciation of the need to recognise when a clinical problem exceeds their capacity to deal with it safely and appropriately and of the need to refer the patient for help from others when this occurs.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

An appreciation of the responsibility to maintain standards of optometric practice at the highest possible level throughout a professional career.

Optometry Council of Australia and New Zealand. (2006). *Accreditation manual for optometry courses in Australia and New Zealand: Part 2 Guidelines*.

## Oral health (dental hygiene)

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Understand and comply with the ethical responsibilities and legislative requirements relating to the safe and competent practice of clinical dental technology in New Zealand.

### **Assess individual and/or population health status and, where necessary, formulate and implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Understand current biological, physical, cultural, social and psychological factors involved in dental and oral disease and the attainment and maintenance of oral health

Obtain by interview and examination patient information relevant to the delivery of oral healthcare and record this information logically, legibly and securely

Assess information to identify oral health problems and formulate an evidence-based dental hygiene care plan that addresses the aetiology of dental and oral disease, the attainment or maintenance of oral health, priority of management, patient options, anticipated outcomes and the duration of treatment

Communicate the requirements of an oral healthcare plan to patients in order to obtain informed consent and, where necessary, carry out agreed procedures and manage any complications.

### **Promote and optimise the health and welfare of individuals and/or populations**

Objectively assess both short-term and long-term outcomes of oral health strategies.

### **Retrieve, critically evaluate, and apply evidence in the performance of health-related activities**

Use these factors, ie current biological, physical, cultural, social and psychological factors involved in dental and oral disease and the attainment and maintenance of oral health, to inform best practice

Undertake research and/or analyse relevant scientific literature and apply findings to the delivery of appropriate oral healthcare.

### **Deliver safe and effective collaborative healthcare**

Refer for advice and/or treatment where diagnosis and treatment planning indicates that the patient requires a level of knowledge and/or skills greater than those of the dental hygienist

Communicate effectively with and/or educate patients, other health workers and the public on oral health matters.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Maintain competence by monitoring the outcomes of oral healthcare delivery, and undertaking continuing personal professional development.

## Oral health (dental therapy)

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Comply with Dental Council of New Zealand (DCNZ) code of practice on patient information and records

See issues from the perspective of people of other cultures

Adhere to the Treaty of Waitangi

Undertake procedures to ensure compliance with DCNZ infection control code of practice

Undertake occupational health and safety procedures to ensure compliance with relevant laws and codes of practice

Understand and comply with the ethical responsibilities and legislative requirements relating to the safe and competent practice of clinical dental technology in New Zealand.

### **Assess individual and/or population health status and, where necessary, formulate and implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Understand current biological, physical, cultural, social and psychological factors which influence the attainment and maintenance of oral health

Obtain by interview and examination patient information relevant to the delivery of oral healthcare and record this information logically, legibly and securely

Assess information to write a list that identifies problems and their causes

Support the problem list with evidence

Develop a written program of interventions required to address the problem list including patient options, priorities, predictions of outcomes, and the extent and duration of intervention

Communicate the requirements of an oral healthcare plan to patients in order to obtain informed consent and, where necessary, carry out agreed procedures and manage any complications.

### **Promote and optimise the health and welfare of individuals and/or populations**

Objectively assess both short-term and long-term outcomes of oral health strategies.

### **Retrieve, critically evaluate, and apply evidence in the performance of health related activities**

Use these factors, ie current biological, physical, cultural, social and psychological factors which influence the attainment and maintenance of oral health, to inform best practice

Undertake research and/or analyse relevant scientific literature and apply findings to the delivery of appropriate oral healthcare.

### **Deliver safe and effective collaborative healthcare**

Refer for advice and/or treatment where diagnosis and treatment planning indicates that the patient requires a level of knowledge and/or skills greater than those of the dental therapist recertification program or DCNZ minimum recertification requirements are fulfilled

Communicate effectively with and/or educate patients, other health workers and the public on oral health matters.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Maintain competence by monitoring the outcomes of oral healthcare delivery, and undertaking continuing personal professional development.

## Orthoptic

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Communicate effectively with patients and colleagues, and consult with people of different ages, CALD backgrounds and varying abilities in order to aid in their management.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Assess patients by applying appropriate investigative techniques to detect, diagnose, monitor and manage refractive error and common ophthalmic conditions such as cataract, age-related macular degeneration (AMD), diabetic retinopathy and glaucoma

Assess patients, particularly infants and children, by applying specialised orthoptic investigative techniques to detect, diagnose, monitor and manage conditions affecting binocular vision and eye movements, such as amblyopia and strabismus

Assess patients with the use of highly specialised ophthalmic medical equipment including retinal photography and related imaging technologies (OCT, HRT, GDx) for the management of eye diseases such as retinal disease and glaucoma; and assess ocular structural integrity using appropriate techniques of biometry and ultrasonography to provide for example pre-operative measurement for refractive and cataract surgery.

### **Promote and optimise the health and welfare of individuals and/or populations**

Assess patients who have low vision and/or multiple handicaps and provide vision rehabilitation to maximise visual potential in order to improve function and positively impact on quality of life and independence.

### **Retrieve, critically evaluate, and apply evidence in the performance of health-related activities**

### **Deliver safe and effective collaborative healthcare**

Ability to work within a multidisciplinary healthcare team, to provide quality eye healthcare to patients with vision / eye conditions within secondary healthcare settings, such as hospitals, specialist private clinics and low vision / rehabilitation agencies.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Graduates should have an understanding of the need to be flexible and adaptable in the workplace to facilitate the changing scope of healthcare practice, and the need for lifelong learning.

Australian Orthoptic Board. (2009). *Clinical competencies expected of a beginning orthoptic practitioner*

## Osteopathy

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Have knowledge and understanding of the ethical standards and legal responsibilities of osteopathic practitioners

The ability to maintain patient records and other documentation according to legal requirements and accepted procedures and standards for comprehensiveness, legibility, accuracy and confidentiality

Respect for every human being, with an appreciation of the diversity of human background and opportunities, and an unprejudiced attitude towards patients regardless of their background. There should be respect for and understanding of different cultural values and incorporation of that respect and understanding in all aspects of osteopathic practice.

A desire to ease pain and suffering

An acceptance of the responsibilities of an osteopath in relation to the care of the patient; the profession of osteopathy and the community

A consideration of the interests of the patient and the community as paramount, with these interests never subservient to their own pecuniary interest.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

The ability to establish satisfactory relationships with patients by developing patient cooperation and showing concern and consideration to relieve anxiety, tension and discomfort

An awareness of the need to communicate clearly and fully with patients and their families or carers, and to involve them fully in planning management

Have knowledge and understanding of the structure, function and normal growth and development of the human body and mind at all stages of life, the interactions between body and mind, the factors which may disturb these and the disorders of structure and function and behaviour which may result

Have knowledge and understanding of the history, theory and underlying principles of osteopathy

Have knowledge and understanding of the aetiology, natural history, prognosis and management of relevant disorders in children, adolescents, adults and the aged which may or may not respond to osteopathic care; and the knowledge required to allow appropriate management including knowledge of all the commonly used manipulative techniques and other treatment modalities used in osteopathic practice

Have knowledge and understanding of management of disorders of somatic origin relevant to osteopathic care.

The ability to gather and record an accurate, organised and problem-focused patient history, including psycho-social factors, using appropriate perspective, tact and judgement

The ability to perform a physical examination and to assess the general well-being and emotional state of patients

The ability to apply judgement and perspective in choosing from the repertoire of clinical skills those which it is appropriate and practical to apply in a given situation

The ability to arrive at an appropriate diagnosis based on the objective evaluation of all available evidence

The ability to recognise early signs of physical or mental disorder and institute appropriate prevention or intervention measures

The ability to formulate a management plan in concert with the patient and/or carer

Judgement in deciding on appropriate care by instituting the appropriate osteopathic management with treatment and/or referral to other health disciplines including mental health services. This includes treatment of the disorder, the relief of discomfort and counselling on alleviation of causal and aggravating factors.

Manual dexterity to carry out manipulative treatments and competence in other modalities of treatment

The ability to perform common life-saving procedures such as caring for the unconscious patient and cardiopulmonary resuscitation

A realisation that it is not always in the interests of the patient or their family to do everything which is technologically possible to make a precise diagnosis or to attempt to modify the course of a problem.

### **Promote and optimise the health and welfare of individuals and/or populations**

The ability to provide continuing healthcare by assessing the patient's progress; modifying patient care appropriately; planning effective follow-up care and by counselling and instructing the patient and family/carer, if necessary, regarding cause, management and prognosis

Have knowledge and understanding of the principles of health education; disease prevention; amelioration of pain, suffering and disability; rehabilitation; the maintenance of health; the interaction of physical and mental health; and the minimisation of disability in old age

Have knowledge and understanding of the agencies that provide support and counselling of patients who have permanent disabilities or debilitating illnesses; have suffered severe physical or emotional trauma; have a notifiable disease; or have a drug addiction or mental health problem; and the means of referral of such patients to those agencies

Have knowledge and understanding of the principles of public and occupational health

Have knowledge and understanding of the costs associated with healthcare, and the principles of efficient and equitable allocation and use of finite resources

A desire to achieve optimal patient care for the least cost, with an awareness of the need for cost effectiveness to allow maximum benefit from the available resources

Have knowledge and understanding of factors affecting human relationships, the psychological well-being of patients and their families and carers and the interactions between humans and their social and physical environment.

### **Retrieve, critically evaluate, and apply evidence in the performance of health related activities**

Have knowledge and understanding of scientific method as applied to biomedical, behavioural and sociological research

The ability to interpret relevant literature in a critical and scientific manner and apply these skills to ongoing learning and patient management

The ability to use the resources of an appropriate reference library to pursue independent inquiry relating to clinical problems

The ability to use computers for learning, literature searches and other applications in osteopathic practice

Have knowledge and understanding of the physical, biological, behavioural and social sciences, at a level not only adequate to provide a rational basis for osteopathic practice immediately following graduation, but also to assist them adapt to the changes in practice and assimilate the advances in knowledge which will occur over their working life.



### **Deliver safe and effective collaborative healthcare**

Have knowledge and understanding of systems of provision of healthcare with their advantages and limitations including methods of meeting the healthcare needs of disadvantaged groups within the community

The ability to communicate clearly, considerately and sensitively with patients, relatives, carers, professional colleagues, other health professionals and the general public. This should include the ability to counsel sensitively and effectively and to provide information in a manner which ensures patients and families/carers can be truly informed when consenting to any clinical procedure. It also includes the ability to write referral letters, progress reports and medico-legal reports that are clear, effective and in proper form.

Have knowledge and understanding of the recognition of and timely referral for joint or separate care of patients with conditions for which osteopathic treatment is inadequate or inappropriate, or where it will delay urgently needed medical or other care

An appreciation of the need to recognise when a clinical problem exceeds their capacity to deal with it safely and efficiently and to refer the patient for help from others when this occurs

A willingness to accept responsibilities for the patient's welfare, recognising personal professional capabilities and limitations, and relating effectively and knowledgeably to other health disciplines including mental health professionals

The ability to work as a member of a multi-disciplinary team where this is in the best interests of patient care

A desire to work effectively as a team member with other healthcare professionals.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

The ability and preparedness to participate in peer review and quality improvement process

An appreciation of their responsibility and a desire to maintain their standards of practice at the highest possible level by continuing education throughout their professional careers

The ability to adapt to changes in relevant knowledge and practice and to incorporate such changes into their own practice.

Australian Osteopathic Council. (2008). *Accreditation policy: Standards and procedures for the accreditation of osteopathic courses*.

## **Pharmacy**

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

**Cultural understanding:** An understanding of cultural diversity, including indigenous issues (in the case of New Zealand students, within the framework of the Treaty of Waitangi) and multiculturalism; an ability to put aside assumptions and personal paradigms in their professional dealings with patients from culturally diverse backgrounds

**Ethics:** A knowledge of ethics, ethical standards, professionalism and social responsibility

**Workplace-related skills:** Enterprise, self-confidence and a sense of personal responsibility endorsing the principles of work place diversity and anti-discrimination.

### **Assess individual and/or population health status and, where necessary, formulate and implement management plans in consultation with patients/clients/carers/animal owners/communities**

Knowledge and critical understanding of essential facts, concepts, principles and theories relating to the items in the Indicative Curriculum

Ability to obtain, interpret and evaluate patient and clinical data

Understanding of standard laboratory procedures and the operation of standard pharmaceutical instrumentation, and ability to select appropriate techniques and procedures.

### **Promote and optimise the health and welfare of individual and/or populations**

Ability to apply knowledge and understanding towards meeting public health needs, the needs of patients and other healthcare professionals

Ability to advise patients and other health professionals on medicines and their use.

### **Retrieve, critically evaluate, and apply evidence in the performance of health related activities**

**Critical thinking:** The ability to analyse issues logically, consider different options and viewpoints, and make informed decisions.

**Information literacy:** An understanding of information literacy and specific skills in acquiring, organising and presenting information, including computer-based activity

**Research:** The ability to conduct research by recognising when information is needed and locating, retrieving, evaluating and using it effectively

Ability to apply in a clear and correct manner, generic skills in communication, critical thinking, information literacy and research to pharmaceutical, clinical and laboratory information.

### **Deliver safe and effective collaborative healthcare**

**Communication:** The ability to communicate information, arguments and analyses effectively

**Inter-professional collaboration:** intellectual openness and curiosity, and the awareness of the limits of current knowledge of the links between health professions

**Recognition of limitations:** Ability to recognise the need to work within personal limitations and the scope of pharmaceutical practice

**Teamwork:** The ability to work effectively as both a team leader and a team member

**Numeracy:** Ability to understand basic mathematical relationships and perform calculations, order of magnitude awareness and estimations, correct use of units

Ability to calculate medicine doses and dosage regimes accurately

Ability to prepare extemporaneously non-sterile pharmaceutical products in a safe and legal manner

Ability to assess prescriptions and other orders for medicines, and to dispense medicines safely and legally

Graduates must have an understanding of medication safety and the ability to recognise, prevent and manage adverse events

Ability to safely and legally handle chemical and pharmaceutical materials.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

**Lifelong learning:** A commitment to lifelong learning, with the ability to acquire and apply knowledge, develop existing skills, adapt to a changing environment, and acquire new skills

**Scholarship:** A commitment to the fundamental importance of the acquisition and development of knowledge and understanding.

**Self-motivation:** The capacity for self-directed activity and the ability to work independently.

## Physiotherapy

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Demonstrate practice that is ethical and in accordance with relevant legal and regulatory requirements

Prepare and provide documentation according to legal requirements and accepted procedures and standards

Adapt communication style recognising cultural safety, and cultural and linguistic diversity.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Communicate effectively with the client

Demonstrate a working knowledge and understanding of theoretical concepts and principles relevant to physiotherapy practice

Collect client information

Form a preliminary hypothesis

Design and conduct an assessment

Conduct assessment safely

Compare findings with 'normal'

Compare findings with what is expected for the condition, and include or exclude alternative diagnoses

Prioritise client needs

Re-evaluate as required to develop a justifiable and sustainable hypothesis

Develop a rationale for physiotherapy intervention

Set realistic short and long term goals with the client

Select appropriate intervention

Plan for possible contingencies that may affect intervention plan

Prioritise intervention plan in collaboration with the client

Determine plan of evaluation that uses valid and reliable outcome measures

Obtain informed consent for the intervention

Prepare equipment and treatment area appropriate to the intervention

Implement intervention safely and effectively

Manage adverse events

Monitor the outcomes of the intervention

Evaluate the outcomes of the intervention

Determine modifications to the intervention.

### **Promote and optimise the health and welfare of individuals and/or populations**

Implement health promotion activities

Provide strategies for client self-management.

### **Retrieve, critically evaluate, and apply evidence in the performance of health-related activities**

Acquire and apply new knowledge to continuously improve own practice

Apply an evidence-based approach to own practice

Apply contemporary forms of information management to relevant areas of practice.

### **Deliver safe and effective collaborative healthcare**

- Operate within individual and professional strengths and limitations
- Operate within own role and according to responsibilities
- Identify areas that are outside skills and expertise and refer client appropriately
- Communicate effectively with other service providers
- Prepare and deliver presentations to groups
- Work effectively within a team
- Manage own work schedule to maximise safety, efficiency and effectiveness
- Use a model of service delivery relevant to the practice setting.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

- Participate in quality improvement processes
- Demonstrate strategies to maintain and extend professional competence.

Australian Physiotherapy Council. (2006). *Australian standards for physiotherapy*.

## **Podiatry**

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

- Operates within relevant legal and regulatory frameworks
- Demonstrates ethical behavior
- Practises in a culturally-sensitive and inclusive manner
- Uses effective interpersonal communication skills and adopts appropriate strategies in working with diverse client groups
- Obtains informed consent through appropriate communication
- Conducts self in a professional manner.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

- Understands and applies relevant podiatry practice principles and theoretical concepts
- Conducts appropriate patient/client interview and collects relevant initial information
- Establishes clinical impressions
- Safely conducts appropriate physical examination/tests and refers as appropriate
- Interprets and evaluates data
- Establish differential diagnosis
- Develops rationale for podiatry management plan
- Established patient/client-focused short- and long-term goals
- Negotiates appropriate management plan
- Monitors and evaluates management plan.

### **Promote and optimise the health and welfare of individuals and/or populations**

Utilises preventative and educative strategies

Implements health promotion and education activities

Responds to the health needs of the communities in which the podiatrist practices

Identifies the determinants of health for relevant populations.

### **Retrieve, critically evaluate, and apply evidence in the performance of health-related activities**

Acquires, critiques and applies new knowledge and information and communications technology skills as appropriate to podiatry practice context

Applies an evidence-based approach to practice.

### **Deliver safe and effective collaborative healthcare**

Practices to accepted standards and within the limitations of the individual and of the profession

Implements safe and effective management plan

Utilises reporting and presentation skills at an appropriate level

Works in partnership with teams, other professionals, support staff, community and government and demonstrates appropriate communication skills

Communicates information and involves others as appropriate

Undertakes podiatry within the broader healthcare context

Implements infection control and other standards within occupational health and safety legislative requirement.

Understands and manages adverse events

Displays efficient organisation to complete administrative responsibilities safely and effectively

Delivers and monitors effective and efficient services and resources

Implements/participates in appropriate supervision linked to the skill and complexity of the task being undertaken.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Utilises effective strategies for continually improving knowledge and skills

Engages in reflective practice, planning and action for ongoing learning.

Australian & New Zealand Podiatry Accreditation Council Inc. (2009). *Podiatry for Australia and New Zealand*.

## Psychology

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Familiarity with the main provisions of the state and commonwealth acts and regulations of parliament relevant to psychologists' work

Familiarity with codes of conduct relevant to psychologists' work including those published by relevant psychologist registration board(s)

Familiarity with the Australian Psychological Society's *Code of ethics and Ethical guidelines*

Familiarity with confidentiality and privacy issues

Familiarity with consent issues

Familiarity with issues concerning practice with minors and those unable to provide informed consent

Familiarity with boundary issues

Familiarity with sexual propriety

Familiarity with psycho-legal issues

Familiarity with role and cultural issues, including issues for minority or marginalised groups

Familiarity with gender and sexuality issues

Familiarity with service needs of vulnerable groups in society

Familiarity with registration issues

Familiarity with the propriety of relationships amongst psychologists, and between psychologists and other professionals, employers and clients

Familiarity with the mechanisms for the resolution of conflict between psychologists and clients, colleagues, employers and other professionals.

Familiarity with note-taking and record keeping.

Conduct or behaviour consistent with state, territory and federal codes of behaviour for psychologists and statements of clients' rights

Conduct or behaviour consistent with the Australian Psychological Society's *Code of ethics and Ethical guidelines*

Conduct or behaviour consistent with appropriately clarifying and negotiating the role and responsibilities as a trainee psychologist

Conduct or behaviour consistent with record keeping, including demonstrated knowledge of the ethical and legal implications of administrative and record keeping procedures including confidentiality

Conduct or behaviour consistent with ethical and professional behaviour and manner

Ability to apply ethical principles to ethical dilemmas.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

A strong level of skills and knowledge in test selection - ability to select appropriate assessment techniques and instruments with proper consideration of issues relating to reliability and validity

A strong level of skills and knowledge in test administration and interpretive skills, including experience in the skilled administration and interpretation of at least:

- The current version of an individually administered adult or child test of intelligence (some examples of appropriate tests include WISC IV, WAIS IV, WPPSI-III, Stanford-Binet V, Kaufman Adolescent and Adult Intelligence Test, Kaufman Assessment Battery for Children, Differential Ability Scales);

- The current version of at least one major standardised test of personality (examples of appropriate tests include - 16PF, MMPI, CPI, OMNI, NEO-PI);
- The current version of at least one specialised memory assessment, eg Wechsler Memory Scale, Wide Range Assessment of Memory and Learning, and
- Other tests appropriate to the learning objectives of the course which are based on empirically validated approaches and equivalent accuracy in the measurement of cognitive or behavioural functioning or an accurate measurement of aptitude, abilities or skills.

A strong level of skills and knowledge in proficiency in interviewing (structured and unstructured interviews, selection interviews, survey interviewing, history taking, clinical interviewing for diagnostic purposes and group-based interviewing)

A strong level of skills and knowledge in systematic observation of behaviour involving both naturalistic and clinical observation and in using predetermined procedures for observing the behaviour of one or more persons

A strong level of skills and knowledge of psychopathology and of diagnostic classification systems (including current versions of DSM and ICD)

Strong knowledge of the major methods of psychological investigation and techniques of measurement, and their application and interpretation

A strong level of skills and knowledge in the theoretical basis for the assessment techniques used in psychology

A strong level of skills and knowledge of psychometric properties of psychological tests and the ability to use this knowledge to inform problem formulation

A strong level of skills and knowledge in awareness of limitations of psychological tests with particular reference to notions of validity, reliability, and cultural issues

A strong level of skills and knowledge in assessment and diagnostic processes (selecting the appropriate assessment tool(s), administering the assessment tool(s), interpreting the assessment results, interviewing /micro counselling skills involved in the assessment process, problem formulation and hypothesis testing

A strong level of skills and knowledge in the ability to competently undertake a mental status examination

Strong skills and knowledge in ability to skilfully negotiate a treatment or service contract

Strong skills and knowledge in ability to use a theoretical system that explains aetiology and remediation of psychological, social or organisational problems

Strong skills and knowledge in ability to investigate identified issues relevant to the delivery of the interventions (e.g., ethical dilemmas, stakeholders)

Strong skills and knowledge in ability to identify the nature and documented efficacy of potential interventions

Strong knowledge of design and implementation of psychological interventions

Strong skills and knowledge in formulation of treatment plans, goals and strategies for intervention including the ability to justify the link between diagnosis formulation and intervention chosen

Strong skills and knowledge in justifying the link between diagnosis/formulation and the intervention chosen

Strong skills and knowledge in counselling skills

Strong skills and knowledge in ability to design and implement evaluations of the impact of the interventions (including the ability to employ appropriate research designs to evaluate the effectiveness of psychological interventions) including:

- measuring attitude and behaviour change
- evaluation of a client's response to the initial intervention
- revision of problem formulation and initial intervention if necessary program evaluation.

### **Promote and optimise the health and welfare of individuals and/or populations**

Strong skills and knowledge in implementing preventative, developmental or remedial programs and interventions

Strong skills and knowledge in ability to design and/or plan preventative, developmental or remedial interventions to achieve the best possible outcomes

Strong skills and knowledge in familiarity with a range in intervention techniques and strategies as well as their theoretical and empirical bases, for both individuals and groups

Strong skills and knowledge in highly skilled use of core behaviour change skills including counselling and cognitive behavioural approaches to helping as appropriate in group individual or organisational settings

Strong skills and knowledge in organisational interventions; career development, ie helping with career planning in private or organisational contexts.

### **Retrieve, critically evaluate, and apply evidence in the performance of health related activities**

Strong skills and knowledge in researching the empirical literature to develop plans for interventions and drawing on published studies and theories/models relevant to the problem and intervention.

Strong knowledge of relevant psychological theories and models.

Strong knowledge of published empirical findings supporting theories (especially those which underpin the major forms of psychological intervention) and the methods employed to establish them.

The application of research knowledge and skills to finding, understanding, collating and critiquing published empirical research findings relevant to a phenomenon or problem of interest.

The application of research knowledge and skills to use of qualitative and quantitative methods, skilled analysis of data, and the ability to draw accurate research inferences critical evaluation of the effectiveness of interventions and programs including:

- suggesting modifications for future use and
- awareness of issues regarding reliability and validity of observations.

Apply research knowledge and skills to designing interventions, therapeutic programs or other means to test hypotheses including an understanding of the principles of single case designs.

The application of research knowledge and skills to designing and implementing program evaluation

The application of research knowledge and skills to collecting, recording, and analysing responses to interventions or therapeutic programs

The application of research knowledge and skills to identifying and defining problem situations based on observation and other assessment

The application of research knowledge and skills to generating hypotheses based problem definition and other information

The ability to develop knowledge of theories and empirical data on professional relationships, such as:

- power relationships;
- therapeutic alliance;
- interface with social psychology;
- more specific knowledge of the fluctuations of the therapeutic/professional relationship as a function of intervention setting.



### **Deliver safe and effective collaborative healthcare**

Familiarity with the role of the psychologist within the profession and the workplace.

Familiarity with the roles of other professions and the capacity to report to other professionals appropriately and to work collaboratively.

A strong level of skills and knowledge in writing informed, succinct, valid and well organised reports.

Strong skills and knowledge in superior interpersonal skills (including the ability to form a professional relationship including positive working alliances with clients and colleagues).

The ability to establish and maintain constructive working relationships and in clinical settings therapeutic alliances with clients

The ability to communicate, interact and liaise for a range of purposes, eg discussing research with other professionals; discussing relevant psychological services with clients, potential clients

High-level oral communication and interpersonal skills in communicating effectively with clients, other psychologists, other professionals, the community; individuals, small groups and agencies from varied cultural, ethnic, religious, social and political backgrounds, including:

- rapport building skills
- professional personal presentation
- clarity, accuracy, coherence, organisation and succinctness of communication
- style of communication (appropriateness for audience)
- organisation of communication
- seeking out and understanding information
- personal and professional boundaries in communications

Seeking out, understanding and responding appropriately to information provided by a range of persons in order to adequately meet their needs

Excellent written communication, including the ability to write, in an organised fashion, reports and other documents:

- which are informed, succinct, accurate, lucid and well-organised;
- for a range of audiences, including educational, health and legal professionals, courts, government departments, insurance companies, corporations and other entities; and
- which clearly communicate the intent of the writer taking into consideration the sensitivity of the matters under discussion and the capacity of the reader to accurately interpret the information.

Familiarity with administrative and record keeping procedures (including adequate clarification of any financial arrangements)

Familiarity with advertising and public statements

Familiarity with negotiated workplace agreements

Familiarity with billing practices.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Self-evaluation or self-assessment skills, including identification of the limits of one's professional competence.

## Public Health

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Justify population health activities by applying ethical principles including maleficence, beneficence, equity and justice

Analyse population health activities (collection, management, dissemination and use of data and information) with regard to the public health code of ethics

Outline the central intent of privacy laws to protect confidentiality including implications for population health practice

Demonstrate the capacity to foster an environment, which is culturally safe for people where there is no assault, challenge or denial of identity of who they are in accessing what they need for optimal health.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Describe common measures of indicators for population health

Calculate and interpret the epidemiologic measures of occurrence (prevalence, incidence of diseases, death); and association between exposure (including risk behaviour) and disease, eg. risk ratios, and measures of public health impact, eg population attributable risk

Generate and interpret descriptive statistics and appropriate graphics for summarising and displaying epidemiologic data

Generate and interpret simple inferential statistics

Analyse and describe the health status of a population based on demographic and epidemiological information

Describe the determinants / causes of a significant population health problem

Analyse key health indicators for Aboriginal and Torres Strait Islander peoples

Analyse key indicators of social determinants of health for Aboriginal and Torres Strait Islander peoples

Describe the features of different types of surveillance systems and screening programs designed to address specific population health problems

Interpret and communicate surveillance findings from an identified population

Design a population-based surveillance system

Evaluate a population-based surveillance system

Assess the suitability of surveillance systems and/or screening programs designed to address an identified population health problem

Outline a communication strategy for surveillance findings to trigger required health system response/s

Describe key elements of a population-based disease prevention strategy such as screening, immunisation and contact tracing

Design a key element of a comprehensive population disease prevention strategy (such as, a component of an immunisation, screening, contact tracing, surveillance, counselling or risk communication activity)

Assess the relative merits, eg considering suitability to target group, resource requirements etc, of alternative disease prevention measures, eg. education, immunisation, incentives, legislation, policies, standards, screening

Explain how legal frameworks, organisational structures and service delivery systems influence disease prevention and control

Design a population-based disease prevention/control strategy

Evaluate a population-based disease prevention/control strategy

Develop a strategy to activate a health system response based on an understanding of the legal implications, organisational structures and service delivery systems used in disease prevention and control

Describe effective intervention strategies for public health emergencies

Outline key components of an effective emergency response to a specified disease

Describe examples of emergency response measures within the health and emergency services sectors

Identify local, national and international mechanisms (including legislative and regulatory frameworks) for responses to public health emergencies

Design and/or coordinate activities/elements of an appropriate emergency management plan to ensure constant readiness to respond (biological, chemical or radiation exposure incidents, natural disaster or terrorist attack)

Assess the relative merits, eg considering suitability to target group, resource requirements etc, of alternative emergency response measures, eg laws, regulations, compliance measures, policies and protocols

Outline key parameters for safety within key domains of environmental health

Describe key elements of evidence-based approaches to environmental risk management and hazard control including the role of existing health agencies, critical infrastructure, legislative and regulatory measures

Outline the impact of social, cultural, political and regulatory factors that influence responses to environmental health issues

Identify and describe environmental determinants and risk factors in a given community or population

Specify environmental drivers of illness/injury in a given community or population

Identify vulnerable individuals/groups and describe specific environmental health risks in a given community or population

Outline key standards and apply appropriate assessment tools and methods to determine environmental factors that adversely affect health in a given community or population

Analyse key environmental risk factors in a given community or population

Formulate a risk assessment plan to define and characterise the potential influence of environmental factors

Conduct and report on a risk assessment project to define and characterise the nature and potential influence of environmental factors

Conduct and report on an appropriate environmental health stakeholder analysis and consultation

Identify the key goals, objectives and strategies of an environmental health intervention, including an evaluation strategy

Develop specific components and activities of an environmental health intervention

Incorporate statutory requirements into an environmental health intervention design

Describe international/national/state/regional priority health problems relevant to specific populations/communities

Describe Aboriginal and Torres Strait Islander health in historical context and analyse the impact of colonial processes on health outcomes

Conduct a stakeholder analysis (including analysis of power and control) and identify prospective partners with reference to the health needs of a specific population/community

Analyse, and present appropriately, information on the health of a specific population/community, eg causes/determinants of health, illness/injury

Develop criteria to prioritise health problems for a specific population/community

Analyse and prioritise health problems for a specific population/community using appropriate criteria

Develop a health promotion plan, specifying target groups and including specific goals, objectives, strategies, broad budgetary implications and related evaluation criteria based on the best available evidence

Articulate clear and measurable objectives, an effective action plan and a sound and sufficient budget

Implement and manage a health promotion initiative

Articulate the role of public policy in promoting and protecting health and preventing disease

Articulate key institutional structures, political processes and influences on the public health system

Analyse the feasibility of a population level public health policy (including consideration of relevant social, economic, political, legal, ethical and environmental factors; organisational, governance, regulatory and financial structures; workforce capacity; and international obligations)

Develop an advocacy strategy regarding a population health issue to influence public policy and/or regulations, based on evidence of both effective interventions to address the problem and effective public health advocacy

Analyse leadership styles appropriate to the effective implementation of a specific health policy

Analyse communication and coordination challenges to policy change within an organisation

Describe key stakeholders in a population health problem

Describe key institutional structures, agencies and workforce capacity relevant to a key population health problem

Analyse the efficacy of a population health policy on the basis of an appropriate set of criteria

Critically evaluate an Aboriginal and Torres Strait Islander health policy

Identify the program logic of a population health program/project, ie the relationship between the rationale and objectives of a program, program planning, implementation and evaluation

Analyse the management of a population health program in terms of strategic focus, organisational authority, leadership capacity, strategic partnerships, resource allocation, workforce capacity and mechanisms of accountability

Analyse/evaluate a population health program/project outcomes relative to relevant performance standards, objectives and negotiated specifications

Design a process, impact and/or outcome evaluation plan for a population health program/project that reflects the needs of key stakeholders

Design and conduct an economic evaluation of a program

Map key interest groups with a stake in a specific population health issue on the basis of available information

Describe principal funding/finance sources relevant to a public health system

Apply the principles of economic evaluation to public health allocations at the population/community level

Apply the principles of economic evaluation to Aboriginal and Torres Strait Islander programs with a particular focus on the allocation of resources relative to need

Develop a cost-effective public health project/program/contract which, in terms of scope of work, performance, deliverables, probity, fairness and value for money, is able to be audited

Articulate potential stakeholder standpoints regarding a specific population's health on the basis of available information.

### **Promote and optimise the health and welfare of individuals and/or populations**

Engage community and other sectoral stakeholders in needs assessment and priority setting

Catalyse community engagement and leadership to promote health

Strengthen inter-sectoral partnerships and capacity to promote health.

### **Retrieve, critically evaluate, and apply evidence in the performance of health related activities**

Interpret mixed method research findings relevant to a population's health including those generated through qualitative methods

Analyse and compare relevant theories and models to the application of health promotion strategies to address a health problem within a specific population/community

Critically appraise potential evidence-based health promotion initiatives to address effectively a health problem within a specific population/community

Critically evaluate an Aboriginal and Torres Strait Islander health promotion program

Integrate the results of an evaluation/analysis of a population health program/project with current policy and practice in collaboration with policy makers and practitioners

Describe key issues in population health that are amenable to research and ultimately contribute to health gain

Assess peer-reviewed and evidence-based information (including systematic reviews) relevant to a study in population health

Critically apply findings from a literature search to clearly define a population health research problem

Formulate and articulate testable hypotheses/researchable research questions relevant to population health

Outline an appropriate population health research design that meets ethical and legislative requirements

Outline methods to identify, collect and analyse relevant population health data/appropriate information and to ensure the veracity of sources

Synthesise and articulate population health research findings

Identify, collect and analyse relevant population health data/ information and justify the veracity of sources

Describe the potential benefits, risks and costs of population health project/research to the community

Locate secondary information, systematically review and assess its quality and usefulness for the purposes of public health research, policy and practice (including systematic reviews – Cochrane, Campbell etc.)

Describe the historical policy context and current evidence regarding a population health problem

Develop an ethics proposal and seek approval from appropriate bodies as required

Present information in a truthful and useful way, and evaluate both the information itself and the sources and methods used to collect it.

### **Deliver safe and effective collaborative healthcare**

Develop a communication plan to alert appropriate service providers in health and other sectors to trigger appropriate responses in a given community or population

Identify the key professionals, community leaders and other relevant stakeholders to collaborate on the environmental health intervention

Facilitate collaboration between internal (organisation) and external (community) stakeholders and reconcile their potential competing interests and power differentials to develop effective health policy

Demonstrate the capacity to interact effectively with other people both on a one-to-one basis and in groups and to work effectively as a member of a team to achieve a shared goal.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Demonstrate a capacity for critical self-assessment regarding one's capacity to interact effectively with other people both on a one-to-one basis and in groups and to work effectively as a member of a team to achieve a shared goal

Demonstrate a reflexive public health practice for cross-cultural contexts

Demonstrate a reflexive public health practice for Aboriginal and Torres Strait Islander health contexts

Demonstrate a capacity for critical self-assessment regarding one's leadership and advocacy skills.

Australian Network of Academic Public Health Institutions. (2009). *Foundation competencies for master of public health graduates in Australia*.

### **Radiography**

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

#### **Demonstrate professional behaviours**

Practice in accordance with the Australian Institute of Radiography (AIR) *Guidelines of Professional Conduct*

Demonstrate a thorough knowledge of information management and confidentiality

Engage effectively in ethical decision making

Ensure confidentiality of information entrusted to them.

Ensure documentation is accurate and maintains confidentiality

Act to ensure the rights of individuals are not compromised.

Show empathy towards individuals, their carers and colleagues

Act to maintain the dignity and integrity of individuals or groups

Practice within the framework of accepted policies and procedures

Act to ensure the rights of individuals are not compromised.

Demonstrate duty of care in patient management

Act in ways that demonstrate respect for the values, customs, spiritual beliefs and practices of individuals

Participate in education of students and graduates undertaking supervised clinical practice

Contribute to learning experiences and professional development of others

Prioritise issues for management of time and resources

Assume responsibility for own actions.

#### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Demonstrate a broad and thorough knowledge of the science of radiation therapy

Demonstrate a broad and thorough knowledge of physical sciences as it relates to radiation therapy

Demonstrate a broad and thorough knowledge of biological sciences as it relates to radiation therapy

Demonstrate a broad and thorough knowledge of humanities and behavioural sciences as it relates to radiation therapy

Demonstrate a broad and current knowledge of information technology as it relates to radiation therapy

Demonstrate a thorough knowledge of the principles of radiation therapy and their clinical application.

Demonstrate a thorough knowledge of radiation therapy procedures and their application to patient welfare

Demonstrate a thorough knowledge/understanding of radiation oncology procedures to participate with other members of the healthcare team in decision-making

Apply critical thinking and problem-solving skills to formulate appropriate clinical decisions

Apply critical thinking skills to time management and resource utilisation

Evaluate the appropriateness of patient and clinical information

Identify problems as they arise in clinical practice

Apply knowledge and experience to solve problems and ensure care is delivered to achieve best practice

Apply reasoning and problem-solving skills to determine appropriate clinical decisions

Identify situations requiring problem-solving and apply a systematic and logical approach

Initiate resolution of problems to ensure prescribed protocols are maintained

Develop and document clinical procedures

Assess the individual's condition and appropriateness for the prescribed procedure

Make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and communicate the decisions and reasoning appropriately.

### **Promote and optimise the health and welfare of individuals and/or populations**

Apply strategies to promote individual or group self-esteem.

### **Retrieve, critically evaluate, and apply evidence in the performance of health-related activities**

Evaluate the appropriateness of research findings to practice

Apply research and evaluation findings to evidence-based practice

Demonstrate a knowledge of research as it relates to radiation therapy

Demonstrate an understanding of the significance of research in contemporary practice

Participate in and contribute towards research, reasoning and problem solving

Conduct evidence-based practice, evaluate practice systematically and participate in audit processes.

### **Deliver safe and effective collaborative healthcare**

Identify individual patient's health issues and refer to appropriate professional groups within the multidisciplinary team

Participate in individual care in consultation with the team

Recognise and operate within own SOP

Consult with an experienced practitioner when expertise is required beyond own SOP

Recognise the limitations of SOP for student and graduate practitioner

Consult with other healthcare professionals when issues are beyond own SOP

Ability to work effectively within the organisation

Advise members of the multidisciplinary team about individual patient needs and know when to make appropriate referrals

Demonstrate respect for colleagues and other members of the multidisciplinary team

Participate with other members of the healthcare team in decision-making

Implement procedures relating to legislation in radiation therapy  
Demonstrate a thorough knowledge of radiation safety to a level that supports safe practice in radiation therapy  
Act to minimise risk of infection  
Reporting of incidents  
Implement procedures to meet statutory and ethical health and safety requirements  
Demonstrate knowledge of the SOP of the multidisciplinary team and the role of the radiation therapy within the team  
Ensure all services and interventions are provided in accordance with definitive protocols and standards of practice  
Analyse and document issues related to reportable incidents, with recommendations for future corrective actions  
Make independent professional decisions within their SOP  
Maintain effective communication.

**Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Evaluate practice in an ongoing basis  
Respond to and recognise own abilities and level of professional competence  
Evaluate the quality of practice in the clinical setting  
Ability to audit, reflect upon and review practice  
Use professional standards of practice to assess own performances  
Participate regularly in continuing professional development and self-directed learning  
Participate in training programs related to the introduction of new technologies and procedures  
Evaluate progress towards expected training outcomes  
Reflect upon decisions to modify future practices.

Australian Institute of Radiography. (2005). *Competency based standards for the accredited practitioner.*

**Social Work**

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

**Demonstrate professional behaviours**

Records are kept and maintained in accordance with ethical principles and the relevant legislation regarding record keeping, privacy and freedom of information provisions relevant to the jurisdiction in which the social work service is being offered  
Reports accurately and objectively reflect client circumstances, in keeping with ethical principles and legislative provisions  
The social worker advises the client of their right to query the service provided and the avenues and procedures to follow if the client wishes to do so  
The social worker demonstrates knowledge and understanding of organisational systems and processes and of wider societal systems



The social worker has made an analysis of organisational systems and processes and the extent to which these are responsive to the needs of the client

The social worker is able to identify circumstances in which policy requirements or directions in their practice context raise social work ethical issues and is able to deal with this appropriately

The social worker views their own development as an ethical practitioner as essential

As part of their practice, the social worker identifies the policy context in which they work and determines whether it is consistent with social work values and principles

The social worker identifies aspects of policy, relating to their practice context, which are inappropriate, inconsistent or inadequate and is able to explain why this is so

In their practice context, the social worker is able to articulate policy appropriate to that context which reflects social work values and principles, client needs and social justice principles and issues

The social worker conducts all aspects of research consistent with the five basic values of social work practice: human dignity and worth, social justice, service to humanity, integrity, and competence

The social worker conducts all aspects of research within the constraints of the Australian Association of Social Workers (AASW) *Code of Ethics* and the legal framework for the management of ethical issues in research such as the operations of the (National Health and Medical Research Council) NH&MRC.

**Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

The social worker has the necessary knowledge, skills and resources to bring to the client situation

The client is made aware of the nature and extent of the social work service being offered and this information

The client is involved, as far as possible, in developing a service plan with the social worker and in its implementation, the strengths and capacities of the client being acknowledged and respected

The social work assessment and the intervention taken is appropriate to the client's situation, in keeping with ethical and legislative requirements and directed towards appropriate outcomes reached in agreement with the client wherever possible

The social worker is aware of the relationship between the client and their social environment and takes appropriate action

The social worker works with the client and the organisation(s) so that the client receives the most appropriate and effective service from the organisation

The social worker is able to identify when change is needed and ways in which appropriate change might be achieved as well as actively contribute to the change process

The social worker is aware of, and assists clients to make appropriate use of, internal organisational review, complaint and appeal processes, as well as external administrative and other appeal processes when relevant

The social worker draws from practice knowledge and experience in identifying appropriate policy for their practice context

Appropriate action is initiated by the social worker for the development, implementation and/or change of policy in their practice context

The social worker has taken relevant and reasonable steps to have appropriate policy developed, accepted and implemented

Provision is made for the review and evaluation of policy and its outcomes and this is undertaken in a timely manner

The social worker uses and encourages approaches to policy development, review and change which maximise client improvement and contribution.

### **Promote and optimise the health and welfare of individuals and/or populations**

The social worker contributes to increasing public awareness of client needs and social justice issues generally and in specific circumstances when they arise

The social worker conducts or participates in research that informs their practice and contributes to the understanding of issues facing individuals and communities

The social worker demonstrates knowledge and understanding of organisational change and development processes

The social worker identifies when and how to involve clients in matters relating to organisational change and development

The social worker is able to imitate and/or contribute to the review of organisational systems and processes in the organisation in which they work or with which the social worker and their clients come into contact

The social worker identifies the need for change in wider societal systems and raises this appropriately for consideration and possible action.

### **Retrieve, critically evaluate, and apply evidence in the performance of health related activities**

Research activities are based on a solid understanding of research principles and research methods

The social worker's practice is informed by the evidence based research in the area of practice

The social worker shares the outcomes of research with colleagues so that the research product is available to other practitioners.

### **Deliver safe and effective collaborative healthcare**

Within the multi-disciplinary team, the social worker maintains social work principles, values and practice whilst acknowledging the practice base of other disciplines

When necessary, the social worker recognises the need for, and arranges a referral to, a relevant service provider and/or for termination of the social work service; and, where service is interrupted for some reason, puts in place appropriate interim service or other arrangements

The social work manager promotes effective teamwork and communication.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

The social worker recognises the need for supervision and, when necessary, obtains advice

The social worker seeks feedback from the client in the evaluation of service provision and uses this to improve future practice

The social worker is engaged in a process of continuing professional education which assists the development of their skills and knowledge in their chosen field of practice and their understanding of the issues facing the wider community

The social worker includes supervision as an important part of their continuing professional education

The social worker uses ongoing reflection on practice in order to enhance the development of their skills, knowledge and understanding

The social worker incorporates research, knowledge and understanding of the changing needs of their community into their social work practice

At the appropriate time, the experienced social worker provides field education learning experiences for social work students.

## Sonography

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Demonstrate professional, legal and ethical aspects of sonographic practice

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Demonstrate competent clinical skills

Demonstrate theoretical and applied physical principles of ultrasound and instrumentation, including Doppler ultrasound

Demonstrate current knowledge and recommendations regarding biological effects of ultrasound

Demonstrate effective patient care including infection control principles and emergency conditions and procedures.

### **Promote and optimise the health and welfare of individuals and/or populations**

### **Retrieve, critically evaluate, and apply evidence in the performance of health related activities**

Demonstrate basic knowledge of the process of research methodology.

### **Deliver safe and effective collaborative healthcare**

Demonstrate the ability to team-work effectively

Demonstrate safe work practices in accordance with current standards of Occupational Health and Safety

Demonstrate quality control of equipment.

Demonstrate communication skills.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Demonstrate lifelong learning skills

Demonstrate self-critical autonomous practice within the professional role

Demonstrate an understanding of the importance and availability of continuing professional education to facilitate professional review and development.

Australasian Sonographer Accreditation Registry Limited. (2010). *Program accreditation guidelines: Of educational programs/qualifications in medical sonography.*

## Speech Pathology

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Undertakes assessment within the ethical guidelines of the profession and all relevant legislation and legal constraints, including medico-legal responsibilities

Undertakes management and implementation within the ethical guidelines of the profession and all relevant legislation and legal constraints, including medico-legal responsibilities

Demonstrates an understanding of principles and practices of clinical education

Documents speech pathology intervention plans, goals, outcomes, decision and discharge

Documents progress and changes in speech pathology intervention

Upholds the *Speech Pathology Australia Code of Ethics*.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners**

Establishes and documents the presenting communication and/or swallowing condition and issues; identifies the significant other people in the client's life and collates information on the client

Identifies the communication and/or swallowing conditions requiring investigation and the most suitable manner in which to do this

Administers speech pathology assessment relevant to the communication and/or swallowing information required

Analyses and interprets speech pathology assessment data

Identifies gaps in information required to understand the client's communication and swallowing issues and seeks information to fill those gaps

Determines the basis or diagnosis of the communication and/or swallowing issues or condition and projects the possible outcomes

Reports on analysis and interpretation

Provides feedback on results of interpreted speech pathology assessments to the client and/or significant others and referral sources, and discusses management

Uses integrated and interpreted information relevant to the communication and/or swallowing issues, and/or the service provider's goals to plan speech pathology intervention

Seeks additional information required to plan speech pathology intervention

Discusses long-term outcomes and decides, in consultation with client, whether or not speech pathology strategies are appropriate and/or required

Selects speech pathology program or intervention in conjunction with the client and significant others

Establishes goals for intervention

Defines roles and responsibilities for the management of the client's swallowing and/or communication condition and issues

Establishes rapport and facilitates participation in the speech pathology intervention program

Implements speech pathology intervention program based on speech pathology assessment, interpretation and planning

Undertakes continuing evaluation of speech pathology intervention and modifies intervention program as necessary.

### **Promote and optimise the health and welfare of individuals and/or populations**

Identifies the practice of speech pathology in a range of community contexts

Undertakes preventative, educational and/or promotional projects or programs on speech pathology and other related topics as part of a team with other professionals.

### **Retrieve, critically evaluate, and apply evidence in the performance of healthcare activities**

Updates, acquires and/or develops resources

Demonstrates adherence to professionally accepted scientific principles in work practices

Collaborates in research initiated and/or supported by others.

### **Deliver safe and effective collaborative healthcare**

Consults and coordinates with professional groups and services

Develops, contributes to, and maintains professional and team-based relationships in practice contexts

Uses and maintains an efficient information management system

Responds to service providers' policies

Uses service providers' electronic system.

Manages workload

Participates in evaluation of speech pathology services.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Continues professional development

Demonstrates an awareness of formal and informal networks for professional development and support and a capacity to develop them

Develops personal growth and professional identity as a speech pathologist.

The Speech Pathology Association of Australia Limited. (2001). *Competency-based occupational standards (CBOS) for speech pathologists: Entry level*.

## Traditional Chinese medicine

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Have knowledge of the historical context in which Chinese medicine has developed

Have knowledge of ethical and legal responsibilities of primary contact healthcare professionals

Have knowledge of management strategies necessary for the successful conduct of business as a practitioner of Chinese medicine

Have knowledge of the process involved in formally reporting adverse events related to the practice of acupuncture and Chinese herbal medicine

Manage a private practice and adhere to all statutory requirements – particularly in relation to infection control and the use, prescribing or dispensing of therapeutic goods

Commitment to ethical professional practice and a willingness to address ethical issues appropriately and sensitively

Awareness of the professional responsibility of a Chinese medicine practitioner, both to the client and the wider community

Appreciation of the multi-cultural and multi-racial nature of the Australian community and how this may affect the practice of Chinese medicine

Appreciation of the traditions and philosophical foundations of Chinese medicine

Sense of responsibility towards the profession of Chinese medicine, fellow colleagues and peers, and to the education of future students

Commitment to appropriate reporting of adverse events.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Have knowledge of the theory and practice of acupuncture and/or Chinese herbal medicine, its contemporary structure and role in the Australian healthcare context

Have knowledge of the processes used for disease diagnosis in Chinese and western medicine, and identification of potential risks resulting from underlying pathology.

Have knowledge of the implications of simultaneous use by patients of pharmaceuticals and Chinese herbal medicines, and their potential interactions

Have knowledge of the contraindications of acupuncture and Chinese herbal medicine, including those due to other concurrent interventions or drug administration

Have knowledge of the process of clinical decision-making with respect to disorders in children and adults to determine whether to treat or refer

Gather, record and analyse clinical information gained by taking an accurate and organised patient case history, and conduct a physical examination, appropriate for the safe, competent, independent practice of acupuncture and/or Chinese herbal medicine

Differentiate syndromes, by evaluating clinical information according to the differential diagnostic system, and link the results of this evaluation to strategies and techniques consistent with Chinese medicine practice

Select in a judicious manner, from a variety of treatment approaches, the appropriate Chinese medicine strategies and techniques to effectively treat a patient's condition

Provide safe and competent manual practice of acupuncture and dispensing of Chinese herbal products

Monitor the health of a patient by applying relevant assessment procedures and modify treatment accordingly

Implement appropriate first aid measures when a patient displays an adverse reaction to treatment, and ensure prompt transfer to medical services where necessary.

### **Promote and optimise the health and welfare of individuals and/or populations**

Desire to achieve the optimum level of care for every patient, acknowledging financial and ethical constraints peculiar to the individual client/patient

Have knowledge of factors affecting the patient such as their familial, social and physical environments, and the impact of these on the therapeutic relationship

Respectful awareness and appreciation of human life and the effect that illness and suffering can have on physical, social, and spiritual wellbeing

Desire to achieve excellence in the practice of acupuncture and/or Chinese herbal medicine, and to contribute to improving both the quality of life of patients and the wellbeing of the community and the environment.

### **Retrieve, critically evaluate, and apply evidence in the performance of health-related activities**

An understanding of scientific research methodology, and an ability to critically evaluate research publications relevant to Chinese medicine

Critically evaluate relevant literature to inform and modify current clinical practice, and benefit future client/patient healthcare management

Seek out and use resources such as libraries, databases and computer resources to enable independent learning, especially for improving theoretical understanding and clinical practice.

### **Deliver safe and effective collaborative healthcare**

Have knowledge of effective communication with practitioners of other relevant health professions

Have knowledge of appropriate referral to medical and other allied health professionals when concurrent medical care is desirable, or when acupuncture or Chinese herbal medicine is inadequate or contraindicated

Ability to effectively communicate with the general public, patients and peers in plain language, or appropriate terminology, depending on the context

Realisation of the strengths and limitations of Chinese medicine and the necessity to refer to peers, or other medical and health professionals, when appropriate

Commitment to work professionally and effectively with peers and other health professionals.

Communicate in a sensitive and appropriate manner with patients and their families, peers, other health professionals, and the public.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Open-minded sense of inquiry in the pursuit of excellence relating to both professional and personal development.

Chinese Medical Registration Board of Victoria. (2006). *Guidelines for the approval of courses of study in Chinese medicine as a qualification for registration, revision 1.*

## Veterinary Science

Upon completion of their program of study, healthcare graduates at professional entry-level will be able to:

### **Demonstrate professional behaviours**

Demonstrate knowledge and understanding of the veterinary legislative environment

Demonstrate an appreciation of the complexity of ethical issues, the diversity of stakeholder perspectives and the range of cultural values.

### **Assess individual and/or population health status and, where necessary, formulate, implement and monitor management plans in consultation with patients/clients/carers/animal owners/communities**

Demonstrate the ability to acquire information from and about clients and perform a clinical examination of their animals and to store and retrieve such information

Demonstrate the ability to collect, organise and analyse information in relation to specific problems, assessing its validity and reaching probabilistic judgements

Demonstrate an awareness of the need to communicate with clients and to involve them fully in planning and management

Demonstrate the ability to perform basic diagnostic and therapeutic procedures

Demonstrate knowledge and understanding of the normal structure, function and development of animals, their interactions with their environment and the factors which may disturb these

Demonstrate knowledge and understanding of fundamental clinical skills in a broad range of species

Demonstrate knowledge and understanding of the underlying basis of health and disease in a broad range of species

Demonstrate a recognition that it is not always in the interests of clients to do everything that is technically possible to make a precise diagnosis or attempt to modify the course of a disease.

### **Promote and optimise the health and welfare of individuals and/or populations**

Demonstrate a desire to promote animal welfare

Demonstrate knowledge and understanding of the principles of epidemiology and zoonoses of disease and their impact on the environment

Demonstrate knowledge and understanding of public health and food safety

Demonstrate knowledge and understanding of economically and environmentally sustainable animal production systems.

### **Retrieve, critically evaluate, and apply evidence in the performance of health-related activities**

Demonstrate knowledge and understanding of scientific method at a level adequate to provide a rational basis for present veterinary practice, and to assimilate the advances in knowledge which will occur over their working life.



### **Deliver safe and effective collaborative healthcare**

Demonstrate an appreciation of the need to recognise when a clinical problem exceeds their capacity to deal with it safely and efficiently and of the need to refer the patient for help from others when this occurs

Demonstrate recognition of the critical role of the veterinarian in biosecurity and in the management of veterinary issues that have national and international implications

Demonstrate a willingness to work effectively in a team with other relevant professionals

Demonstrate the ability to work and communicate effectively and empathetically with colleagues and clients through a range of media with compassion, courtesy, respect, honesty and without discrimination

Demonstrate an ability to perform effectively in a workplace including an understanding of organisational systems, human and physical resource management, performance indicators, occupational health and safety, knowledge management and quality control.

### **Reflect on current skills, knowledge and attitudes, and plan ongoing personal and professional development**

Demonstrate self-management and group leadership.

Australasian Veterinary Boards Council Inc. (2009). *Policies, procedures and standards: Veterinary Schools Accreditation Advisory Committee (VSAAC)*.

## Appendix 3: Abbreviations

ALTC	Australian Learning and Teaching Council
AHPRA	Australian Health Practitioner Regulation Agency
AQF	Australian Qualifications Framework
CALD	Culturally and linguistically diverse
HWA	Health Workforce Australia
LTAS	Learning and Teaching Academic Standards
NUCAP	National University Course Accreditation Program
TEQSA	Tertiary Education Quality and Standards Agency
TLO	Threshold Learning Outcome

Support for this project has been provided by the Australian Learning and Teaching Council Ltd., an initiative of the Australian Government. The views expressed in this report do not necessarily reflect the views of the Australian Learning and Teaching Council or the Australian Government.

This work is published under the terms of the Creative Commons Attribution- Noncommercial-ShareAlike 3.0 Australia Licence. Under this Licence you are free to copy, distribute, display and perform the work and to make derivative works.

**Authors:**

Associate Professor Maree O'Keefe  
Professor Amanda Henderson  
Dr Rachael Pitt

**Attribution:** You must attribute the work to the original authors and include the following statement: Support for the original work was provided by the Australian Learning and Teaching Council Ltd, an initiative of the Australian Government.

**Noncommercial:** You may not use this work for commercial purposes.

**Share Alike:** If you alter, transform, or build on this work, you may distribute the resulting work only under a licence identical to this one.

For any reuse or distribution, you must make clear to others the licence terms of this work. Any of these conditions can be waived if you obtain permission from the copyright holder. To view a copy of this licence, visit <http://creativecommons.org/licenses/by-nc-sa/3.0/au/>

or send a letter to:  
Creative Commons

543 Howard Street, 5th Floor  
San Francisco California 94105 USA.

Requests and inquiries concerning these rights should be addressed to:

Australian Learning and Teaching Council  
PO Box 2375, Strawberry Hills NSW 2012, Australia  
Telephone: 02 8667 8500  
Facsimile: 02 8667 8515  
[www.altc.edu.au](http://www.altc.edu.au)  
ABN 30 109 826 628  
2011

ISBN 978-1-921856-30-3





PO Box 2375 Strawberry Hills NSW 2012 Australia  
Telephone 02 8667 8500 Facsimile 02 8667 8515  
[www.altc.edu.au](http://www.altc.edu.au)  
ABN 30 109 826 628