

Horse Care Project

Summary of Feedback, Responses and Actions – Equine Dentistry and Massage



9 July 2021

Draft units of competency and a qualification for equine dentistry and massage were made available on the [Skills Impact website](#) for stakeholder review from 13 May to 10 June 2021 for further feedback. Please visit the website to view a full list of the documents that were submitted for consultation during the 'Drafts Available' stage.

The skills standards have been revised and developed as part of the Horse Care Project, which also includes skills standards for a range of other work roles and activities involved in maintaining the welfare of horses. Feedback for the draft skills standards that related to equine dentistry and massage was significant and required additional time to analyse. As a result, this report relates only to the skills standards for equine dentistry and massage. The summary of feedback, responses and actions for the other horse care skills standards can be accessed on the [Skills Impact website](#).

The final draft qualifications and skills standards have been revised in consultation with the Subject Matter Expert Working Groups (SMEWG) to consider the feedback suggested by stakeholders.

The summary below identifies feedback raised for the draft qualification and units of competency for equine dentistry and massage, and how these have been responded to. This involves a consideration of the information provided, views of industry stakeholders and from people who are part of the Subject Matter Expert Working Group process. Resolutions are constructed to consider the needs and views of stakeholders to the extent possible, and to comply with the *Standards for Training Package 2012*. The resolutions may represent a compromise on one or more stakeholder views with the aim of a workable outcome for industry, State and Territory Training Authorities (STAs) and training providers.

Feedback was received from a variety of stakeholders around the country via the Skills Impact Feedback Hub, phone and email, as follows:

	ACT	NSW	NT	Qld	SA	Tas	Vic	WA	National
Industry (employer / employee)									
Industry association									
Union									
Registered Training Organisation (RTO)									
Government department									
Other									

Acronyms – APP – Application, PR – Packaging Rules, E – Element, PC – Performance Criteria, FS – Foundation Skills, PE – Performance Evidence, KE – Knowledge Evidence, AC – Assessment Conditions, SMEWG – Subject Matter Expert Working Group

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Summary of feedback on draft qualification ACM50X521 Diploma of Equine Allied Health

Comments related to Core Units

Stakeholder Comments and Identified Issues	Consideration and Proposed Resolution
<p>• Industry, QLD</p> <p>Core: This course would benefit from core units in knowledge and recognition of common equine health and well being ailments, illnesses and injuries. As massage therapists there are times when it is unsuitable to treat horses and individuals need to be able to recognise those signs/symptoms. Massage therapists are operating in a professional capacity where they are asked for opinion and advise about various aspects of horse health, individuals must have the knowledge to be able to provide accurate information. They are also often seeing numerous horses a day and need knowledge of good hygiene and biosecurity practices. As a suggestion, ACMEQU405, ACMPHR405 have suitable application and criteria to address the knowledge of equine health and biosecurity/infection control shortfalls.</p> <p>As a diploma level course for a profession involving horses, it would also benefit from a core workplace health & safety unit. WHS is part of the foundation of a vast majority of courses and given the hands on, physical nature of working with horses which often have pain and discomfort and are often unfamiliar/unknown horses and handlers to the massage therapist it needs to be part of the foundation here too.</p> <p>Elective ACMEQU4X19: Should be a core unit. Saddlery and gear fit is an important contributor to the discomfort of horse (and sometimes rider) and one of the main reasons equine massage therapists as called out to treat a horse. Horse owners often ask for advise on this matter. Massage therapists need to be able to recognise when saddlery/gear does or does not fit a horse. This knowledge base is important to recognising potential causes of discomfort and pain.</p>	<p>Noted. Thank you for the feedback. Common health and wellbeing issues have been made more explicit in <i>ACMEQU5X12 Relate equine anatomical and physiological features to equine health care requirements</i> by adding PC3.1 'Recognise indicators of common equine health and well being and signs of ailments, illnesses and injuries' and additional KE points:</p> <ul style="list-style-type: none"> • 'common indicators of equine health and well being • common ailments, illnesses and injuries'. <p>Health and safety - is addressed in the new unit <i>ACMNEW4X23 Work safely in providing equine services as a contractor</i>. It covers biosecurity, hygiene and infection control and safely working in close proximity to equines. The entry requirements and the core unit <i>ACMNEW4X23 Work safely in providing equine services as a contractor</i> address working safely with horses and safe handling.</p> <p><i>ACMEQU4X19 Evaluate saddlery and gear fit for horse and rider combination</i> is an elective which can be selected for the massage therapy vocational specialisation to address saddlery/gear issues. This qualification is designed to provide specialisations in a number of allied health areas for which <i>ACMEQU4X19 Evaluate saddlery and gear fit for horse and rider combination</i> may not be a requirement, so this unit is not suitable for inclusion in the core.</p>

Comments related to Elective Units – Group A Equine Dental Technician

Stakeholder Comments and Identified Issues	Consideration and Proposed Resolution
<ul style="list-style-type: none"> Industry, NSW <p>I think the sedation is well covered. However I understand that the writing of the diploma can not cover all the “if buts and maybes” of state legislation and regulation, legally or accurately as they all differ. Therefore I understand that the diploma should only reference that local legislation and regulation is to be followed. This simplifies the writing and intent. In saying this I am not trying to take away from veterinarians but rather provide scope for veterinarians and equine dentists to work within their local legislation and regulations.</p> <p>I understand that 5x3 is about performing equine dental treatments therefore it should reference that the treatment plan set out in 5x2 should be followed to the standards provided. Hope this makes sense.</p>	<p>Noted. Thank you for your comments.</p> <p>The qualification contains the following paragraph addressing legislative and regulatory requirements: ‘Equine allied health providers must work within the legislative and regulatory requirements relevant to animal welfare, biosecurity, veterinary practice, and pharmacy, controlled drugs and use of prohibited substances. The scope of practice for equine service providers varies according to state/territory legislative and regulatory requirements’.</p> <p>Specific state/territory licensing and legislation further clarified in the APP of each unit.</p>
<ul style="list-style-type: none"> Industry, NSW <p>For me the 2 most important issues are: It is not necessary to continue on about veterinarians interaction and responsibilities, this cannot be covered effectively, let alone accurately and only brings continued animosity. Every state is different. As long as we state that local regulation and legislation must be followed we are covered. If we interfere or try to interpret this then we leave a mess for debate and argument. Similarly the statement regarding wolf teeth, digitally loose teeth etc. All we need to state it that the technician proceed as per treatment plan in accordance with regulation and legislation. We don’t need to keep repeating this. I work for many vets that request I address these issues. If the diploma is not allowed to teach this then a vet can not request the practitioner to address it. It becomes a merry go round with no winners and the horse loosing.</p>	<p>Noted. Thank you for your comments. References to veterinarians maintained as advised by the ACM IRC.</p>

Comments related to Elective Units – Group B Equine Massage Therapist

Stakeholder Comments and Identified Issues	Consideration and Proposed Resolution
<ul style="list-style-type: none"> RTO, NSW <p>I am still very concerned that there is not enough “Meat” in the technical aspects of massage therapy including a strong understanding of how all body systems work and the impact of massage , it would be of benefit for you to look at the [RTO name] Diploma in Equine Massage (I realise there level of a cert IV qualification is different to a diploma).</p> <p>An equine massage therapist mainly works by themselves as a small business operator, they must have enough technical knowledge to know when massage is contra-indicated, when</p>	<p>Noted. Thank you for the feedback.</p> <p>The units provide the framework of the workflow and requirements for massage therapy. <i>ACMNEW5X8 Conduct assessment for equine massage therapy</i> is focussed on checking the horse condition prior undertaking massage therapies, with a specific PC (3.2) addressing instances where massage may not be suitable to take place:</p>

Stakeholder Comments and Identified Issues		Consideration and Proposed Resolution
	<p>there is a serious health or injury situation that must be referred back to a vet. It is very tempting to think equine massage is a bit like going to a spa day for humans but there is a very real risk of injuring a horse or making a health or injury issue worse if massage is applied inappropriately. The impact of massaging a horse when it should not be massaged is much higher as they can't tell the therapist how they are feeling so there is a much higher level of responsibility for therapists to know the anatomy & physiology of the whole horse. In addition, there are insurance impacts and regulatory body responsibilities when horses are in competition.</p> <p>The small part I could see in the document for: Relate equine anatomical and physiological features to equine health care requirements suggests in the Assessment conditions that "profiles of two horses with different care requirements" would be adequate for assessment, this is not enough.</p>	<p>"3.2 Refer owner to registered veterinarian or other equine health care practitioner for conditions outside scope of practice" It is expected that RTOS developing the teaching and learning resources will expand on these areas in more detail as part of their delivery.</p> <p>Changes made to strengthen <i>ACMEQU5X12 Relate equine anatomical and physiological features to equine health care requirements</i> including changing the volume/frequency requirements in the Performance Evidence from 2 to 6 equines.</p>

General Qualification comments

Stakeholder Comments and Identified Issues		Consideration and Proposed Resolution
<ul style="list-style-type: none"> Government, WA 	<p>The Entry Requirements listed may prove difficult to demonstrate and access. Would it be suitable to make the entry requirements a Certificate III or higher qualification involving horses? With the following additional information being noted: Or through documented experience in an equine workplace or personal participation in equine disciplines/activities.</p>	<p>Adopted. Thank you for the feedback. The Entry Requirements have been revised to include specific units of competency for clarity. Further information for RTOs will be provided in the <i>Companion Volume: Implementation Guide</i>.</p>
<ul style="list-style-type: none"> RTO, VIC 	<p>ER: Suggest this entry requirement information not provide the clarity of skills and knowledge sufficient for an RTO to decide with a degree of certainty. Second paragraph (may have): Is this comment necessary?</p>	<p>Adopted. Thank you for the feedback. The Entry Requirements have been revised to include specific units of competency for clarity. Further information for RTOs will be provided in the <i>Companion Volume: Implementation Guide</i>.</p>

Equine Dentistry

Please note: Performance Criteria's, Performance Evidence and Assessment Criteria with references to veterinarians maintained as advised by ACM IRC.

Note: General feedback (both supportive and otherwise) has been received from multiple stakeholders during this consultation period, including feedback from students, horse owners and veterinarians. This feedback has not been provided in the tables below due to its general nature; however, this representation has been identified in the table on [page 1](#) and feedback has been taken into consideration during review of these components.

Stakeholder Comments and Identified Issues		Consideration and Proposed Resolution
ACMEQD5X1 Identify equine masticatory and oral function, conditions and their health impacts		
<ul style="list-style-type: none"> Industry, NSW 	<p>Title: Understand the equine masticatory system and identify oral conditions and their health impacts.</p> <p>APP: 'This unit of competency describes the skills and knowledge required to assess the equine masticatory...' (add 'the')</p>	<p>Noted. Thank you for the feedback.</p> <p>TITLE: The verb 'understand' is not generally accepted in units of competency which describe work activities.</p> <p>A revised title has been suggested if the current title is not suitable, along with an alternative title below. Confirmation of title will be sought from the SMEWG during validation.</p> <p>Other suggested titles:</p> <ul style="list-style-type: none"> - 'Inspect equine masticatory system and identify oral function, conditions and their health impacts' <p>OR</p> <ul style="list-style-type: none"> - 'Determine equine oral functional efficiency and identify potential impacts of oral conditions' (combined wording of the 2 current units). <p>APP - minor edit adopted 'the' added.</p>
<ul style="list-style-type: none"> Government, WA 	<p>In the following units the mapping information refers to change AQF level. As units of competency don't relate to AQF levels, is this correct?</p>	<p>Thank you for the feedback.</p> <p>Adopted, mapping information reworded.</p>
ACMEQD5X2 Conduct assessment of equine masticatory system and plan dental treatment		
<ul style="list-style-type: none"> Industry, SA 	<p>KE Sedation (general): -These things mentioned here require a high level of training, well beyond the scope of the course. This stuff takes a long time to learn the theory.</p> <p>= referral to a vet for 'specialised' sedation. What does this mean. All sedation/tranquilisation requires specialised knowledge. Does this statement mean that students that have a very very very basic knowledge of all relevant matters relating to sedation, will be allowed access and use of prescription drugs, that are classed this way for very good reasons.</p> <p>= in summary, there are many issues in this section which cannot possibly be covered in a basic course, and to be honest, this course is low level. I spent many hours during my</p>	<p>Thank you for the feedback.</p> <p>General comments noted.</p> <p>KE – 'specialised' removed in relation to sedation and analgesics.</p>

Stakeholder Comments and Identified Issues		Consideration and Proposed Resolution
	<p>university studying till very late in the mornings for many years, to learn a lot of the things required to be known. Then I spent many hours acquiring post graduate qualifications to be able to have some chance of having a good understanding of the nature of equine dentistry. What many people fail to understand, and which is so important, is dentistry is not just about looking at teeth. All the medical training such as acquiring a deep understanding of physiology, anatomy, disease processes, zoonoses, radiology, assessing patients prior to any intervention, etc etc etc, takes a long time to learn.</p> <p>AC general: Good dentistry requires sedation. It is very difficult to thoroughly examine a mouth in an unsedated horse. At times, it is difficult in sedated horses, but these same horses would be impossible to examine when not sedated. Part of the problem will be that technicians will try to carry on in difficult patients, otherwise, they lose business or lose face with clients.</p>	
<ul style="list-style-type: none"> RTO, NSW 	<p>APP: remove 'knowledge or expertise, or regulation' replace with 'practice'. PC5.3 remove 'dental veterinarian' and replace with 'more appropriate service provider'.</p>	<p>Adopted. Thank you for the feedback. APP - suggested revised wording adopted 'scope of practice'. PC5.3 references to veterinarians maintained as advised by the ACM IRC, added 'or appropriate service provider'.</p>
<ul style="list-style-type: none"> Industry, NSW 	<p>APP: 3rd paragraph change 'dentistry' to 'dental': "The equine dental industry expects oral care..." PC2.2 remove text 'and advise client to contact their registered veterinarian, if sedation is assessed as necessary'. 2.4 change to 'Assist attending veterinarian or other ancillary staff as required' change 3.1 to 'Inspect equine head for symmetry, swellings or other abnormalities using safe handling techniques, including but not limited to; palpating the temporomandibular joint (TMJ), temporalis, masseter and medial pytergoid muscles, etc. to assess for sensitivity/asymmetry change 4.1 to '4.1 Explain examination findings clearly to owner/agent' PE bullet 1c change to 'determined the need for sedation, and if required follow required protocols within relevant state/territory legislation relating to sedation' KE bullet 5e remove 'secondary dentin' bullet 5i change 'open pulp chambers on' to 'occlusal surface openings...' bullet 5j change to 'caries; infundibular caries, peripheral</p>	<p>Adopted. Thank you for the feedback. APP - adopted 'dentistry' changed to 'dental'. PC2.2 - references to veterinarians maintained as advised by the ACM IRC. PC2.4 – adopted, added 'or other ancillary staff as required'.</p> <p>PC3.1 – adopted suggested wording; however, this information is too detailed for a PC which just details the step required in the task. The additional information from 'including but not limited to' has been incorporated into the KE.</p> <p>PCs4.1, 6.2 and 6.3, PE & KE - 'carer' changed to 'agent' throughout unit.</p> <p>PE and AC - References to veterinarians maintained as advised by ACM IRC.</p>

Stakeholder Comments and Identified Issues		Consideration and Proposed Resolution
	<p>cemental decay and other'</p> <p>bullet 10b change 'clients' to 'owners/agents'</p> <p>AC bullet 2a remove blue text 'noting that where equines need to be sedated...'</p> <p>bullet 3a change 'carers' to 'agents'</p>	KE - adopted suggested edits.
<ul style="list-style-type: none"> Government, WA 	<p>In the following units the mapping information refers to change AQF level. As units of competency don't relate to AQF levels, is this correct?</p>	<p>Adopted. Thank you for the feedback.</p> <p>Mapping information reworded.</p>
<ul style="list-style-type: none"> National, Industry Association 	<p>Performance Criteria.</p> <p>N° 3 : Conduct Oral and Dental Examination. (and palpating the tempromandibular joint, TJM, to access for sensitivity).</p> <p>This task is a gimmick; these are trigger points that we all have, push on your own temple and it hurts and so it is the same with the horse!</p> <p>There are NO connecting nerves that run into the TMJ and so no one can make a decisive conclusion that the horse has a " headache ".</p> <p>If someone questions you about this, go up to them and palpate their temples, hard.</p> <p>When they scream and pull away, tell them they obviously have a problem with their TMJ !!!!</p> <p>My second point is in Foundation Skills, under description.</p> <p>•Use terminology and concepts appropriate for the audience.</p> <p>This is possibly one of the most important facts when communicating with a client. They have no idea of all the technical terms for all the issues that we deal with ; if your speaking with a Vet, then yes but the general public, definitely a "No". It does need to be explained in Laymans terms for the client to fully understand exactly what is going on in the mouth and to be able to form some sort of picture as to the issues going on with their horse.</p>	<p>Noted. Thank you for the feedback.</p> <p>PC3.1 revised with detail removed. Now '3.1 Inspect equine head for symmetry, swellings or other abnormalities using safe handling techniques'.</p> <p>New KE: 'palpation techniques, including for temporomandibular joint (TMJ), temporalis, masseter and medial pytergoid muscles'.</p> <p>FS - thank you for supportive feedback.</p>
<ul style="list-style-type: none"> National, Industry Association 	<p>PC3.1 change to: Inspect equine head for symmetry, swellings or other abnormalities using safe handling techniques.</p> <p>Move additional detail to KE.</p> <p>PC3.6 change 'light source and...' to 'light course with'</p>	<p>Adopted. Thank you for the feedback.</p> <p>New KE: 'palpation techniques, including for temporomandibular joint (TMJ), temporalis, masseter and medial pytergoid muscles'.</p> <p>3.6 adopted, changed to 'light source with...'</p>

Stakeholder Comments and Identified Issues	Consideration and Proposed Resolution
ACMEQD5X3 Perform equine dental treatment and oral care using appropriate instrumentation	
<ul style="list-style-type: none"> Industry, NSW 	<p>PC2.5 & 3.1 remove 'carer'</p> <p>3.4 change to 'If sedation is required follow protocols and relevant state/territory legislation relating to sedation'</p> <p>3.6 change to 'Provide assistance to attending veterinarian and or ancillary staff, where required'</p> <p>4.2 change to '4.2 Address incisor length and angle to prevent interference with the lateral excursion or rostral-caudal movement of the mandible conserving physiological integrity and functional anatomy of the teeth'</p> <p>4.6 change to 'Treat digitally loose, retained deciduous or senile teeth in accordance with treatment plan'</p> <p>4.7 change to 'Treat If wolf teeth (first pre molars) in accordance with agreed treatment plan'</p> <p>PE bullet 1d change to 'removed retained deciduous teeth'</p> <p>bullet 1e change to 'removed wolf teeth (first premolars) or referred to a registered veterinarian'</p> <p>bullet 1f change to 'addressed malocclusions in the cheek teeth arcades and removed sharp points protuberant to soft tissue'</p> <p>bullet 2a change to 'all corrections made to the teeth were done conserving the physiological integrity, anatomy and functionality of the teeth, including vital tooth has not been exposed (secondary dentin should maintain some brown coloration and not be taken so far that white dentine is visible)'</p> <p>bullet 5 change to 'determined the need for sedation, and if required, followed protocols and relevant state/territory legislation relating to sedation'</p> <p>KE bullet 7b replace 'clients' with 'owners/agents'</p> <p>bullet 14g change to 'assess and treat digitally loose or retained teeth'</p> <p>bullet 14h change to 'assess and remove treat wolf teeth (first premolars)'</p> <p>AC bullet 2a remove text 'noting that where equines need to be sedated...'</p> <p>bullet 3a change to 'owners or agents of equines'</p>

Adopted. Thank you for the feedback.
PC2.5 & 3.1 carer deleted.
Carer changed to agent throughout unit for consistency with unit ACMEQD5X2.
PC3.4 - references to veterinarians maintained as advised by ACM IRC.

PC3.6 – adopted, added ‘or other ancillary staff where required’.

PCs4.2 & 4.6 suggested edits adopted.

PC4.7 – reworded to ‘Assess dentition for presence of wolf teeth (first premolars) and remove digitally loose wolf teeth or refer to veterinarian according to agreed treatment plan’.

PE & KE - adopted minor edits as per feedback.

PE & AC - References to veterinarians maintained as advised by ACM IRC.

Stakeholder Comments and Identified Issues	Consideration and Proposed Resolution
<ul style="list-style-type: none"> <li data-bbox="147 180 365 209">• Industry, QLD <p data-bbox="427 180 1178 603">Power instruments First of all - I believe there should be a specific unit for teaching this subject because of the issues which are involved with power equipment. Also included in the unit the subject of head suspension/supporting systems these need to be clearly understood. I must hasten to point out and be very clear I am not against the use of power equipment; however, I wish this to be very clear, in the incorrect hands power equipment can and will do harm. With in this subject there needs to be a clear understanding of the need to preserve the equine tooth as if all the tooth is ground away with over zealous dental treatments, there will be no tooth left for the twilight years. Simply put, "Do not grind the tooth away with unnecessary dental work" OR "Take off there bare minimum to achieve correction".</p> <p data-bbox="427 643 1178 699">I will copy a segment Ver Batum which I have used for another reply covering Equine Dentistry.</p> <p data-bbox="427 707 1178 1193">Quote Discussion regarding power instruments Power instruments. This is a great avenue for harm. For a start there is a need for a set of national governing principals covering the use of power instruments. The principals of use and the types and makes of power instrument are so broad, the subject of power cannot be covered in a short duration, there needs to be practical experience involved with this subject. (A personal view: - there is a great need for anatomy revision) "View of Author". There needs to be a situation where one can compare apples with apples as *techniques *views *instruments are so varied. There is a thorough need for an education system delivered by a national education structure as there are a great number of urban myths and misconceptions regarding power instruments.</p> <p data-bbox="427 1233 1178 1441">One of the major criteria for getting the Cert IV over the line with all the objections, the use of manual equipment. Hence, I believe this still should be one of the criteria. There other important points which need to be considered before including the power equipment in the Cert IV. Some issues with power equipment: - If the instrument is in the *incorrect place *incorrect angle *incorrect tooth which needs not reducing -</p>	<p data-bbox="1211 180 2051 331">Noted. Thank you for the feedback. Element 1 of the unit addresses safety issues (1.3) and when delivered would require to demonstrate skills using the instruments (1.4). The User Guide provides detailed advice about anatomical guidelines/principles/requirements to support delivery of the unit.</p>

Stakeholder Comments and Identified Issues	Consideration and Proposed Resolution
<ul style="list-style-type: none"> Government, WA 	<p>Regarding the delivery advise for ACMEQD5X3 Perform equine dental treatment and oral care using manual and/or motorised instrumentation. The delivery advice recommends ACMEQD5X3 to be delivered and assessed after ACMEQD5X1 and ACMEQD5X2 – should these units be listed as pre-requisite units in ACMEQD5X3?</p> <p>In the following units the mapping information refers to change AQF level. As units of competency don't relate to AQF levels, is this correct?</p>
<ul style="list-style-type: none"> National, Industry Association 	<p>PC4.3: change text 'focal light source and dental mirrors' to 'instrumentation'.</p> <p>PC4.6: remove text ', retained deciduous or senile teeth'</p> <p>PE bullet 2a: remove bracketed text: '(secondary dentine should maintain some brown coloration and not be taken so far that white dentine is visible)'</p> <p>KE bullet 7j remove 'specialised'</p> <p>KE bullet 11 remove 'diagnostic'</p> <p>KE bullet 14h remove 'and treat'</p>

Massage Therapy

Stakeholder Comments and Identified Issues		Consideration and Proposed Resolution
ACMEQU5X12 Relate equine anatomical and physiological features to equine health care requirements		
<ul style="list-style-type: none"> Government, WA 	<p>The unit refers to “horses” throughout the unit outline. Should the term used be “Equine” or is the unit only for “Horses”</p> <p>In the following units the mapping information refers to change AQF level. As units of competency don't relate to AQF levels, is this correct?</p>	<p>Thank you for the feedback.</p> <p>Adopted, ‘horses’ changed to ‘equines’ throughout unit and mapping information updated.</p>
ACMNEW5X8 Conduct assessment for equine massage therapy		
<p><i>No specific feedback received for this unit during second public consultation.</i></p>		
ACMNEW5X9 Provide equine massage therapy services		
<p><i>No specific feedback received for this unit during second public consultation.</i></p>		
ACMNEW5X13 Develop and implement an equine rehabilitation program		
<ul style="list-style-type: none"> Government, WA 	<p>Regarding the delivery advise for ACMNEW5X9 Provide equine massage therapy services. The delivery advice recommends ACMNEW5X9 to be delivered and assessed after ACMEQU4X15 and ACMNEW5X8– should these units be listed as pre-requisite units in ACMNEW5X9?</p>	<p>Noted. Thank you for the feedback.</p> <p>Delivery advice including sequencing of units is included in the ACM <i>Companion Volume: User Guide: Equine Allied Health</i>.</p> <p>As stipulated in the Training Package Products Policy (section 2, subsection 2.2) Pre-requisite units must only be used where essential to achieving the subsequent competency. They must not be used for the purpose of driving delivery order or sequencing.</p>

User Guide: Equine Allied Health

Stakeholder Comments and Identified Issues		Consideration and Proposed Resolution
<ul style="list-style-type: none"> Industry & RTO, NSW 	<p>Feedback provided on technical language throughout document.</p>	<p>Thank you for the feedback. Suggestions adopted throughout the document. References to veterinarians maintained as advised by the ACM IRC.</p>
<ul style="list-style-type: none"> Industry, WA 	<p>On Page 11: Equine Dentistry Elective Group. The bullet point that currently reads</p> <ul style="list-style-type: none"> assisting veterinarians with tooth extractions and other surgical or diagnostic procedures, <p>I suggest replacing this with:</p> <ul style="list-style-type: none"> assisting veterinarians with equine dental procedures as requested and/or directed. 	<p>Thank you for the feedback. Adopted, edit made.</p>
<ul style="list-style-type: none"> National, Industry Association 	<p>We have 230 contact days with at least 8 dental technicians for hands on experience.</p>	<p>Noted. Thank you for the feedback. Section added to User Guide p24: 'Work placement and learning on the job Industry advice is that significant practical, work placement is a requirement to develop the skills and knowledge needed as an equine allied health care practitioner. As an example, for equine dental technicians a program covering at least 230 days rotating through eight different equine dental technicians as mentors has run successfully in the past. RTOs will need to organise practical work placements for learners to practice and develop skills in real workplace settings on a range of equines of different classes, life stages, diets, temperaments and education levels. Where state/territory requirements allow, industry recommends that a traineeship/apprenticeship pathway is the preferred delivery method.'</p>