



Council
2 May 2017
Osteopathic Development Group update

Classification	Public
Purpose	For discussion
Issue	The paper provides Council with an update on progress with projects being undertaken by the Osteopathic Development Group.
Recommendation	To consider the content of the report
Financial and resourcing implications	Identified within the paper.
Equality and diversity implications	None identified.
Communications implications	The work of the ODG is promoted through a range of activities by the GOsC, the Institute of Osteopathy and other partner organisations.
Annexes	None
Author	Tim Walker

Background

1. Since 2013, the Osteopathic Development Group (ODG) – comprising representatives of the Institute of Osteopathy, Council of Osteopathic Educational Institutions, National Council for Osteopathic Research, Osteopathic Alliance and the GOsC – has been working on a number of projects aimed at supporting the development of the osteopathic profession.
2. The core of the ODG work has been eight projects as follows:
 - a. Leadership
 - b. Service Standards
 - c. Mentoring
 - d. Advanced/accredited
 - e. clinical practice
 - f. Regional support/communities of practice
 - g. International collaboration
 - h. Evidence/PROMs
 - i. Career development.
3. The projects have proceeded at different paces and they all involve different partners. The GOsC's involvement varies from project to project. Details of all the projects can be found on the Osteopathic Development Group's website at <http://osteodevelopment.org.uk/>
4. The GOsC has also provided some financial support for some of the projects. Grants were approved by Council in 2014 for four projects:
 - a. Leadership – funding for the joint OU/ODG programme to run for three years.
 - b. Mentoring – funding for initial research and a pilot project.
 - c. Evidence – funding was provided for the completion of NCOR's two adverse event learning platforms – PILARS and PREOS – see www.ncor.org.uk.
 - d. Advanced Clinical Practice (ACP) – funding for research to inform the development of an approach to advanced clinical practice in the context of osteopathy.
5. This paper provides an update on work on the current projects and future activities for the ODG.

Discussion

Leadership

6. The ODG Leadership Programme was developed in collaboration with the Open University (OU) to support leadership capacity in the profession. In its initial form the Programme ran for three years (2015, 16 and 17) and consisted of 25

hours of e-learning with two one-day workshops at the start and end. The e-learning was provided by the OU with the workshops being delivered collaboratively between the OU and the ODG project team. As part of the programme participants also worked independently in groups on a small project.

7. Over the three years, there were over 100 expressions of interest in the programme and a total of 90 applications. Places on the programme were offered to 60 osteopaths (the maximum capacity) and in each year the majority successfully completed the programme (20, 18 and 19 respectively).
8. The cost of the e-learning programme was £295 per participant which each successful applicant was asked to pay at the start of the programme. Those participants who successfully completed the online learning and attended both workshops were entitled to a reimbursement of £150.
9. At the time that Council approved the expenditure on this programme, in November 2014, the total cost over a three year period was anticipated to be £37,290. The final cost was approximately £27,400 excluding the contribution of participants and in-kind costs from those delivering the programme.
10. Each year all participants were surveyed to obtain feedback on the programme and its impact. The feedback in years one and two was also used to help fine tune the content on workshops in subsequent years. Inevitably, with this kind of programme it is difficult to identify an immediate impact. However, at the end of the third year, the participants in the first two years were surveyed to seek to identify the longer term impact of the programme.
11. Leadership within the osteopathy profession is at times a challenging issue because of the limited number of structured leadership opportunities available. However, it became clear over the course of the programme that there were many varied opportunities for individuals to use their newly acquired skills. The kinds of activities that participants reported subsequent involvement in included:
 - a. Leading new clinical and academic development within colleges
 - b. Helping to establish new special interest groups within the profession
 - c. Applying for non-executive roles with the GOsC and the Institute of Osteopathy
 - d. Strengthening practice management
 - e. Providing NHS placements for osteopaths
 - f. Improving leadership of local osteopathic groups
 - g. Setting up a local mentoring scheme.
12. The ODG evaluated the project in 2017 and decided to agree to continue it in 2018. Recruitment is now taking place. It was decided that the costs of the e-

learning element would be met in full by the participants and that the remainder of the programme would be delivered by the ODG team. The only costs to the GOsC of continuing involvement are in-kind staff costs and provision of the venue for the workshops.

13. In addition a final element of the original leadership concept – the creation of an osteopathic leadership framework – is due to be completed in 2018.

Service Standards

14. The aim of the Service Standards project has been to develop a set of voluntary standards covering service provision by osteopaths which could be used, where relevant, to demonstrate that osteopathic practices were able to meet equivalent standards to those required by the Care Quality Commission (and equivalents in Northern Ireland, Scotland and Wales). Standards of this nature could be particularly important for those seeking to obtain NHS contracts or provide other commissioned services.
15. The GOsC has no powers to develop such standards itself but has supported their development and ensured that they align with the *Osteopathic Practice Standards*. The draft standards were developed relatively quickly and consulted on in 2014. The work was then halted as the Institute of Osteopathy (iO) was developing its 'Patient Charter' and it was felt important that these two documents were complementary.
16. The Service Standards project now rests primarily with the iO who are developing a practice accreditation scheme which will be based on the standards. This will be a voluntary scheme for which practices will pay a accreditation charge. The scheme is expected to be finalised shortly and launched in autumn 2018.

Mentoring

17. The mentoring project grew out of research commissioned by the GOsC on new graduated preparedness for practice¹. This report identified that there were few structured opportunities for new or recent graduates to be obtain support in their early years of practice.
18. The ODG commissioned further research from Health Academix exploring mentoring needs and how these could be met. The research phase was concluded in 2016 and recommended a range of needs:
 - a. A library of resources
 - b. Workplace mentoring
 - c. Independent mentoring scheme
 - d. External mentoring sources
 - e. Peer mentoring

¹ <http://www.osteopathy.org.uk/news-and-resources/document-library/research-and-surveys/new-graduates-preparedness-to-practise-research-report-2012/>

- f. Multidisciplinary opportunities.
19. This initial research phase was supported by the GOsC with a grant of £12,200, of which £10,900 was spent.
 20. The ODG mentoring team identified that it had limited means to further all of the recommendations and identified as a key priority the development of resources which would support a generic approach to mentoring. These resources were developed into a 'mentoring toolkit' which was then piloted by a number of osteopaths in the second part of the 2017.
 21. The pilot consisted mainly of practice principals and newly appointed associates, as this had long been identified as the client group most in need of support (both for the mentees and the mentors). Mentoring training events were held for 25 osteopaths in summer 2017 to develop understanding of the principles of mentoring and how to use the tools in the mentoring toolkit.
 22. In January 2018 all those who had taken part in the pilot were surveyed to evaluate the effectiveness of the toolkit which is now being revised. The updated toolkit will be sent to all 2018 graduates who will be encouraged to seek mentoring support and to use the ODG mentoring toolkit. Further training events (face-to-face and online) will be offered in summer 2018 and on an ongoing basis in future years.
 23. The ODG mentoring team will be considering what further steps can be taken to widen the range of mentoring opportunities and also how this might link to the peer support elements of the new GOsC CPD scheme.

Advanced/accredited clinical practice (ACP)

24. Council received an extensive update on this project at its meeting in May 2017. In that report the project was described as seeking understand the nature of advanced clinical practice in osteopathy, define the need for an ACP framework and developing a suitable framework that can be used by the profession and its institutions, and provide a clear benefit to the public.
25. The first phase of the project aimed to undertake research to inform policy development in this area and was made up of the following parts:
 - a. Review existing research relating to ACP in osteopathy
 - b. Survey patients' needs in relation to ACP
 - c. Research osteopaths' views and behaviours, including existing pathways through which they attain to ACP
 - d. Review existing osteopathic infrastructure, including quality assurance and accreditation of current ACP training
 - e. Review frameworks for ACP in other professions
 - f. Secure stakeholder and professional engagement.

26. Progress on this part of the project was much slower than anticipated and the consultants report was not finalised until autumn 2016. The final report identified three possible models for developing clinical interest and advanced clinical practice in osteopathy based on: clinical interest groups; credentialing; or a knowledge and skills framework.
27. In the light of the growing interest in this area of practice, the Advanced Clinical Practice project team identified the need to prioritise and accelerate work in the paediatric area as the next stage in the ACP project.
28. Over the past year, a working including representatives of the four main UK providers of postgraduate training in paediatric osteopathy – the British College of Osteopathic Medicine, the British School of Osteopathy, the Foundation for Paediatric Osteopathy and the Sutherland Cranial College of Osteopathy – as well as the GOsC and iO has been working on a common framework for paediatric osteopathic practice, how an accreditation scheme could be developed based around this framework, and how the existing courses would feed into such a scheme. The ACP working group has been keeping in close touch with the Osteopathic Sports Care Association which already has an established approach in this area.
29. A competency framework has now been developed and a consultation on the approach took place from 22 February to 20 April 2018. Input has also been sought from the Royal College of Paediatrics and Child Health. The consultation analysis is now taking place before next steps are agreed by the ODG project team and ODG Board. Any eventual accreditation scheme will need to be accessible, at least initially, to osteopaths who have experience in working with children but who may not have undertaken formal training in the field. The accreditation system will also be voluntary so it is up to every individual osteopath if they wish to participate or not.
30. Council agreed a grant for this project in July 2014 of £38,300, primarily to cover consultancy costs but also to support the work of the project team, the majority of which has now been spent.

Regional support/communities of practice

31. This project was aimed at developing resources for existing local groups and to support those who were interested in setting up new groups. The main output from this project was the development of a resource pack (published online) providing a practical guide to setting up and sustaining such groups.
32. The initial version produced in 2015-16 with support from existing local and regional groups and circulated widely within the profession. With the emphasis in the new GOsC CPD scheme on building supportive communities of practice, the document (and the project) were retitled in 2017 and an updated version of the guide produced.

33. This project is now considered a 'business as usual' activity and the documentation and support for new communities of practice is being maintained and supported by the iO with some input from the GOsC.

International collaboration

34. This project aimed to bring together various resources about osteopathy internationally that were held in various parts of the profession, although primarily within the GOsC as the secretariat for the Forum on Osteopathic Regulation in Europe. The result was a single website <https://www.osteointernational.uk/> which is now maintained as a business as usual activity by the iO with input from the ODG partners and others.
35. The iO also now provides the secretariat for the newly formed European Federation and Forum for Osteopathy and it may be sensible at some point for the information on this site to be transferred and maintained by the EFFO secretariat on its website.

Evidence/PROMs

36. The evidence development project is being led by the National Council for Osteopathic Research (NCOR) and consists of two smaller-scale projects and one large-scale project. These are:
- a. Creating patient and practitioner adverse event online reporting platforms.
 - b. Collecting feedback from osteopathic patients via a national online and phone based facility (PROMs).
37. The GOsC made a grant of £7,200 in 2014 for the development of the two web platforms which was quickly completed and continue in use.
38. The Patient Incident Learning and Reporting System (PILARS) and Patient Reported Experiences of Osteopathic Services (PREOS) are online surveys to collect, respectively, reports from osteopaths of adverse events in clinical practice, and patient-reported experience measures. PILARS additionally functions as a forum-type discussion platform, allowing osteopaths to share advice, broadening reflective opportunities for isolated practitioners in particular.
39. PILARS has received 15 reported incidents with 43 associated comments and discussions. Analysis revealed recurrent themes pertaining to: misalignment of patient and osteopath expectations (i.e. communication); concerns about misdiagnosis or occult serious pathology; unreasonable behaviour by patients; patient consent and perceived treatment risks and side-effects. PREOS has received 31 reports from patients, the majority of which are very positive. The sites can be accessed via the NCOR website www.ncor.org.uk.
40. The major strand of the project has been that relating to PROMs which has been undertaken by NCOR with additional financial support from the iO.

41. The main part of the project has been the development, piloting and roll-out of an app based platform (PROM questionnaires can also be completed by patients online). Piloting of the PROM app was completed in late 2015, and it has been rolled out in clinical practice since 2016.
42. A multi-faceted implementation strategy has been used involving occasional article in the osteopathic media, face-to-face meetings involving small groups, using social media for frequent reminders, outreach visits, and third party endorsement through champions and members of the NCOR research council. The inclusion of PROMs in the GOSc's CPD Early Adopters programme has helped to increase take up.
43. The first questionnaire on the PROMs app is completed by the patient at their first appointment, or as close as possible to this. The initial questionnaire contains 16 questions – they include: demographics; symptom areas; access to appointments; duration of symptoms, and reasons for seeking treatment. The single Patient Reported Outcome measure (PROM) included in the app is the Bournemouth Questionnaire (BQ). Follow-up data is collected at one week and six weeks after the initial questionnaire has been completed, when 10 questions are asked. They include: the BQ questionnaire again; a patient satisfaction question; a patient experience question, and another asking the patient about their overall change in symptoms
44. Data returns continue to grow steadily, and continuing dialogue with participating osteopaths helps to refine the implementation of the PROMs system. A total of 262 osteopaths are currently collecting data and approximately 1,800 patient returns have been completed for NCOR analysis.
45. Early adopters of the PROMs system are now in a position to receive their individual practice reports, and the aggregate data for the profession is growing in value to describe osteopathic practice to external audiences. The findings from the PROM app development, piloting, and implementation have formed the basis of a range of dissemination strategies.
46. While NCOR continues to progress this project, building numbers of users in the UK and elsewhere in Europe, and seeking to extend its scope into the paediatric field. As far as the ODG is concerned this project is also a business as usual activity.

Career development

47. This project has aimed to map and articulate the range of potential career development pathways for osteopaths. Although initial work on this project was completed, further development has been put on hold pending the conclusion of the advanced clinical practice project with which it is closely associated.
48. This is the one project that GOSc declined to engage with as it was considered to be for the benefit of the profession and its promotion and did not sit comfortably with the statutory objectives of the GOSc.

Future development of the ODG

49. The Osteopathic Development Group was formed in 2013 as a way of bringing the profession together to ensure development and the long-term sustainability of osteopathy. Five years on, there has been significant progress in a number of these projects, to the extent that at the September 2017 ODG Board meeting a number of projects were reclassified as business as usual activities which have been assigned to relevant ODG partners to continue on an ongoing basis. The Leadership project has successfully concluded its initial three year programme, and the Service Standards project has been agreed by the ODG Board to be handed over to the iO to progress.
50. The ODG Board has therefore been reviewing the purpose of the ODG to ensure it continues to fulfil a useful purpose.
51. The original aim of the ODG in working together for the development of osteopathy in the UK, was to enable the profession to meet its full potential in contributing to the healthcare of the nation, to support enhanced dialogue with other professions, increase professionalism, contribute to the evidence base, and enhance postgraduate development of clinicians. The ODG Board has taken the view that these aims should continue to underpin any future ODG development activities or projects.
52. The ODG initiative has proved is that it is entirely possible and beneficial for the whole profession to work together on key programmes. With increasing confidence in doing this, the profession's joint and common ability to interface with the public, kindred organisations in health, and influencers in government and the media has also improved.
53. The types of issues that the ODG is now considering include:
- How could the profession take advantage of its new AHP status?
 - Raising awareness of osteopathic practice and promotion of the profession
 - Building a more coherent internal communications network within the profession
 - Supporting the development of our education sector, osteopathic educators and student recruitment
 - How do we work together to further develop research in osteopathy?
 - How might we go about challenging the profession's concerns about evidence based practice?
 - How do we further develop the capacity of the profession – at an individual, practice and organisational level – to adapt to the increasing pace of change in healthcare?
54. Clearly some of these issues are outside of the remit of the GOsC as they concern the promotion of osteopathy and of the profession. However, some of the issues also have a direct or indirect impact on the quality of osteopathic treatment and patient care, and we will continue to provide support for these initiatives on a case by case basis. It is also considered important for the GOsC

to continue to engage with the leaders of the profession through the ODG Board and, where we can, to provide support for the ongoing development of the profession.

Recommendation: to consider the content of the report.