



Policy and Education Committee

**Minutes of the Policy and Education Committee held in public on Thursday
16 June 2022, at Osteopathy House, 176 Tower Bridge Road SE1 3LU and
via Go-to-Meeting video conference**

Confirmed

Chair: Professor Deborah Bowman

Present: Daniel Bailey
Bob Davies
Elizabeth Elander
Professor Raymond Playford (online)
Nick Woodhead (online)

Observers with speaking rights: Ian Fraser, Council for Osteopathic Education Institutions (COEI)
Santosh Jassal, the Osteopathic Alliance (OA)(online)

Council Associates: Shireen Ismail (online)
Harriet Lambert (online)

In attendance: Steven Bettles, Policy Manager
Fiona Browne, Director of Education, Standards and Development
Dr Stacey Clift, Senior Research and Policy Officer (online)
Rachel Heatley, Senior Research and Policy Officer (online)
Banye Kanon, Senior Quality Assurance Officer
Sheleen McCormack, Director of Fitness to Practise (online)
Michelle McDaid, Quality Assurance, Project Director, Mott McDonald (online)
Matthew Redford, Chief Executive and Registrar (from Item 13)
Marcia Scott, Council and Executive Support Officer (online)
Holly Sheppard, GOsC Project / Operations Manager, Mott McDonald (online)

Observer/s: Dr Bill Gunnyeon, Chair of Council

Item 1: Welcome and apologies

1. All were welcomed to the meeting. Special welcomes were extended to those attending the PEC for the first time:
 - Council Associates: Shireen Ismail and Harriet Lambert
 - Santosh Jassal, the Osteopathic Alliance
 - Banye Kanon, Senior Quality Assurance Officer
2. Apologies were received from:
 - PEC members: Sarah Botterill and Dr Marvelle Brown,
 - Observers with Speaking Rights:
Maurice Cheng, the Institute of Osteopathy,
Dr Jerry Draper-Rodi, National Council for Osteopathic Research

Item 2: Minutes

3. The minutes of the meeting, 9 March 2022, were agreed as a correct record.
4. The minutes of the meeting, 4 April 2022, were agreed as a correct record. The Chair thanked Sarah Botterill, who, due to unforeseen circumstances, chaired the meeting.

Matters arising

5. There were no matters arising from the meetings of 17 March and 4 April 2022.

Item 3: Fitness to Practise: Osteopathic Practice Standards and Adjunctive Therapies

6. The Policy Manager introduced the item which concerned guidance on the application of the Osteopathic Practice Standards in relation to the application of adjunctive therapies, non-osteopathic treatments and/or other work undertaken by osteopaths.
7. The key messages and following points were highlighted:
 - The paper provided a summary of the outcomes of the consultation undertaken regarding the development of draft guidance to support osteopaths engaged in adjunctive or complementary therapies in relation to the Osteopathic Practice Standards (OPS).
 - Fictional case examples were developed to explore the issues that arise for osteopaths and patients when applying the Osteopathic Practice Standards in different contexts.
 - A consultation on the guidance took place between January and April 2022 receiving 13 responses: five from osteopaths, one from an Investigating Committee member; one from the Institute of Osteopathy and six from patients.

- There was also wide-ranging feedback from focus groups held with members of the Investigating and Professional Conduct Committees.
 - An Equality Impact Assessment has been undertaken to inform the consultation and was provided to the Committee.
8. In discussion the following points were made and responded to:
- a. It was agreed that the draft was much improved, showing the value of consultation. It was commented that the guidance would be particularly helpful to the Professional Conduct Committee in providing a 'steer' when considering cases and issues concern adjunctive therapies.
 - b. It was agreed that issues concerning equality, diversity and inclusion are challenging and can be difficult to communicate. A written consultation always includes specific questions about equality, diversity and inclusion but sometimes these may be more difficult to understand and respond to in writing. The same consultation questions when put to a focus group can open and develop into a more in-depth discussion on specific issues where questions can be more carefully considered, and ideas be more fully explored. It was noted that wider engagement and understanding of issues concerning EDI are important and considered as part of our wider work.
 - c. It was noted that there were inconsistencies where reference was made to the Osteopathic Practice Standards. These would be rectified in the final draft.

Noted: The Committee considered and noted the outcome of the consultation in relation to the draft 'guidance on the application of the Osteopathic Practice Standards in relation to adjunctive therapies, non-osteopathic treatments or other work undertaken by osteopaths' and the changes made to the draft as a result.

Noted: The Committee considered and noted the Equality Impact Assessment.

Agreed: The Committee agreed to recommend the guidance to Council for publication

Item 4: Quality Assurance: Annual Report for the academic year 2021-2022 and approach to thematic review for 2022-2023

9. The Policy Manager introduced the item which asked the Committee to agree the approach to annual reporting and mechanisms for taking forward key issues this year.
10. The key messages and following points were highlighted:
 - a. An updated version of the annual report template used for 2020-21 is proposed for consideration for 2021-2022.

This enables OEIs to update last year's response as appropriate, and includes a new section aimed at encouraging a more reflective response in relation to good practice, challenges, and risk management.

- b. A proposal has been set out regarding the holding of a series of quality assurance workshops with OEIs out to facilitate consideration of key issues within the sector and how this might be addressed. Issues to be covered include:
 - Boundaries, communication/consent
 - Consent in the classroom
 - EDI/Reasonable adjustments
 - Public/Patient involvement
 - Student voice

11. The following points were made and responded to:

Annual Reporting Template

- a. Members were happy with the template and welcomed the inclusion of the section that encourages more self-reflection from the OEIs.
- b. Members noted paragraph 7 of the report acknowledging that the pilot report had initially been demanding for OEIs. The approach to establish a baseline of activity and performance that could be updated annually without having to repeat the process in its entirety was welcomed. This approach would be more efficient and effective for the OEIs and those analysing the reports permitting the OEI to retain a copy of the report which could be updated and retained as a live document in preparation for the following year's submission.

Workshop proposal

- c. Members were advised that the coordination of workshops would be dependent on the topic to be discussed. Workshops will be supported by independent consultants whose work has covered the topic for discussion (Boundaries and Consent in the Classroom). Other topics will be developed in house or in conjunction with COEI. The advantage of organising the workshops is that it will allow for the participation of teaching staff, key managers as well as senior managers. It is recognised that some events may be more successful than others, but the key is that the proposal is focused on collaboration, the sharing of good practice, and learning in a way not undertaken previously.
- d. COEI welcomes and is supportive of the initiative. It is considered an opportunity for continued development and learning that will cascade through the sector and the profession.

- e. In following up on the impact and outcomes of the workshops the thinking is that feedback and learning will be included as part of the OEI annual reports.
- f. If, during discussions at the workshop, concerns were to be raised it was noted that there are mechanisms in place to consider such matters.

Agreed: The Committee agreed the annual report template for 2021-2022.

Agreed: The Committee agreed the proposal regarding the suggested series of quality assurance workshops.

Item 5: Update to Mott MacDonald Interim Quality Assurance Handbook

12. The Policy Manager introduced the item which sought the Committee's approval for the interim Quality Assurance Handbook to be used in relation to Recognised Qualification ('RQ') renewal visits in 2022 for Nescot and the London College of Osteopathic Medicine.
13. The key messages and following points were highlighted:
 - There are two Recognised Qualification renewal visits scheduled for October/November 2022.
 - The implementation of specific Standards for Education and Training (SET) in relation to osteopathic education means that OEIs will now be required to demonstrate how they meet the SET.
 - To facilitate this in relation to the forthcoming RQ visits, the Interim Quality Assurance Handbook has been updated to reflect the SET, and a revised mapping tool developed. The handbook also includes links to GOPRE (Graduate outcomes for Osteopathic Pre-registration Education).
14. The following points were made and responded to:
 - a. Members were pleased to note that the standards had been integrated throughout the updated document rather than appearing as a supplementary annex.
 - b. In response to a comment that the visit timetable might be extended to include more guidance on classroom and clinical teaching it was explained that to date and from experience the time required for observations was never more than a half-day. It may be the case that a half-day is what has been required to cover each area but does not represent a reduction in time for the visit.
 - c. In response to whether the guidance is clear about Conflicts of Interest it was noted that this would need to be revisited. Council and PEC had considered conflicts of interest for members acting as Visitors. The Committee asked the Executive Team to reconsider the current wording taking into account the discussion at this and previous meetings of both PEC and Council.

- d. It was noted that the Recognised Qualification renewal visits would take place in 2022 and not 2021 as shown on the cover of the report.

Agreed: The Committee agreed the Interim Quality Assurance Handbook, subject to reviewing the section on conflicts of interest, for use in conjunction with the Recognised Qualification Renewal visits for Nescot and the London College of Osteopathic Medicine in 2022, subject to the change of emphasis in relation to conflicts of interest.

Item 6: Review of Whistleblowing Policy

15. The Director of Fitness to Practise introduced the item which invited Committee members to consider the proposed amendments to the Whistleblowing Policy following a review.
16. The key messages and following points were highlighted:
- The GOsC has a Whistleblowing Policy which has been in place since 2014.
 - A general review of the GOsC Whistleblowing Policy has been conducted and practical changes have been made to the policy in terms of structure to improve its accessibility for those seeking to raise a concern with the GOsC. Changes include:
 - o setting out the criteria that must be met for a concern to amount to a qualifying disclosure;
 - o Addition of a section on help for whistle-blowers; and
 - o General updating, for example, the addition of the requirement that GOsC, is required to publish an annual report on the whistleblowing disclosures.
 - Given the amendments to the policy are predominantly focussed on restructuring existing information we are not proposing that a consultation is required.
17. In discussion the following points were made and responded to:
- a. Members welcomed the updated document which demonstrated openness, transparency, and is clear and accessible. It was also noted that the opening paragraph giving the definition of a Whistle-blower was helpful.
 - b. It was commented that the updated document was crucial and would be welcomed especially by students who in the past may have wanted to raise concerns but not been clear as to the process and what might happen as a whistle-blower after raising a concern.
 - c. It was noted that the GOsC only received three whistleblowing complaints during 2020-21 but the cases were closed due to the individuals not

providing further information. There was a question about anonymity. It was explained that an anonymous complaint or concern raised cannot be progressed unless it supported by evidence and verification. While some criteria may be met there may be an unwillingness to provide additional information. Where this is the case, an investigation may end in its early stages. Every opportunity will be offered to whistle-blowers to investigate a concern raised further and the process will now include the provision of support and seeking information from alternative sources. As a safeguard there are instances where complainants will remain anonymous, but a balance must be maintained and to ensure progression cases will require active management and discussion.

- d. It was noted that the opening sentence at paragraph 7.2 of the updated guidance '*Whistleblowers can use this confidential support at any time before, during or after attending a hearing for free*' could be misinterpreted. It was confirmed the sentence would be amended.

Noted: The Committee consider and noted the amended Whistleblowing Policy.

Item 7: Conflicts of Interest update and recruitment update (Oral item)

18. The Policy Manager introduced the item which gave an update on the progress regarding the recruitment of additional osteopathic visitors by Mott MacDonald.

19. The following points were highlighted:

- a. As a result of the ongoing discussions regarding Conflicts of Interest it was clear that the pool of Visitors needed to be expanded.
- b. An active recruitment process has been undertaken and expressions of interest have been received from 5/6 individuals who have been invited to participate in training arranged organised by Mott MacDonald and will take place in mid-July.
- c. It is hoped that the proposed Quality Assurance workshops will also encourage interest in RQ Visitor roles.

20. In discussion the following points were made and responded to:

- a. It was suggested that as there is usually a long period of time between RQ Visits there might be an opportunity to help new recruits develop skills through shadowing those who have experience Visitors.
- b. It was added that even if there is no active recruitment taking place if there is interest in Visitor and other quality assurance roles, prospective recruits can contact Mott MacDonald directly.

Noted: The Committee noted the update on conflicts of interest and recruitment.

Item 8: Equality Diversity and Inclusion

21. Dr Stacey Clift, Senior Research and Policy Officer introduced the item which gave feedback on the findings of the equality, diversity and inclusion (EDI) pilot and consideration of next steps.
22. The key message and following points were highlighted:
 - a. The EDI pilot has developed since the initial focus groups and slightly exceeded our target response rate of 50.
 - b. The EDI pilot sample is broadly representative of the UK population.
 - c. Through the EDI pilot more views of osteopaths with minority protected characteristics have been captured.
 - d. Most respondents did not feel that people from all protected characteristics had equitable opportunities to advance their careers within osteopathy.
 - e. Osteopaths tended to report a slightly higher proportion of experiences of unwelcome comments or conduct in training (43%) than in their last 12 months of practice (23.5%).
 - f. Some osteopaths report anxiety about what the GOsC will do with the data and question what happens if registrants disclose a disability in terms of their registration. This illustrates that there are barriers, which make the collection of EDI data difficult, with some of those barriers built into the regulatory framework/legislation, such as the requirements around 'good health' for new applicants to the Register.
 - g. There are potentially three options to consider in relation to EDI monitoring going forward, either:
 - i. go live with the survey.
 - ii. incorporate collection of EDI data as part of the registration and renewal process.
 - iii. do both above alongside a range of next steps to continue to promote equality and eliminate discrimination within the osteopathic profession and enhance quality of care for patients.
 - h. The Committee are also asked to consider:
 - i. Are there any other options for the collecting of equality data not considered?
 - ii. Are there any areas which may have been missed?
 - iii. Does the Committee favour a particular option and, if so, why?

23. In discussion the following points were made and responded to:

The Analysis

- a. Members were pleased that the target response rate of 50 had been exceeded.
- b. The hesitancy over disclosure was significant for the protected characteristic of disability but for the eight other characteristics the significant issues were of trust and mistrust. It was added that it is believed that due to the legislative requirement for good health this might lead to a reluctance in disclosure of a disability if it is believed this might impact registration. It is hoped that regulatory reform will address this issue.
- c. It was suggested that rather than wait for regulatory reform ways to practise safely and effectively when working with a disability could be a message to highlight following the survey.
- d. Members were concerned about the perception held by respondents that the GOsC might use the data against them. It was suggested that perhaps using the GOsC's various media like the e-bulletin would help to allay the concerns. It was noted that the use of language was of particular importance in this type of project and that it took time to build trust. The appropriate use of communications would help in challenging negative perceptions.
- e. It was noted that the issues of trust and mistrust were findings of concern that were relevant to the Communications and Engagement Strategy and the first strand of promoting trust demonstrating that there is an awareness of wider and more challenging issues and the work to be undertaken to build trust.
- f. In response to a comment on language testing it was explained that each question around the nine protected characteristics provided a rich discussion in the focus groups on how different people would respond to the questions resulting in the language changing and categories added.
- g. It was suggested that when registrants can clearly observe the positive changes being made and implemented as result of the survey it would help to instigate and build trust across the profession.
- h. COEI commented that the OEIs recognise the role they have in implementing change but recognising that the generational changes will take time. The OA suggested that an ongoing commentary on the data collected, what has been learned, and the expected outcomes would be helpful. It was also suggested setting up a further opportunity for people to attend focus groups and complete surveys to encourage new participants who can be confident their voices will be heard.

- i. Members considered the three options. There were concerns about survey overload and therefore it was considered more practical to incorporate the survey as part of the registration and renewal process. In a show of hands Option 2 was favoured.

Noted: The Committee considered and provided feedback on the findings of the pilot, analysis, and options for next steps.

Agreed: The Committee agreed to recommended Option 2 as its preferred approach.

Item 9: Patients: Implementation and evaluation of shared decision-making resources produced as part of the Values project

24. Rachel Heatley, Senior Research and Policy Officer, introduced the item which outlined plans for the launch and evaluation of shared decision-making resources produced as part of the Values project.

25. The key messages and following points were highlighted:

- a. The GOsC are entering into the next phase of the Values project, a project in which we worked in partnership with osteopaths and patients, the General Dental Council, and the Collaborating Centre for Values Based Practice to develop resources to support shared decision-making based on what is important to the individual patient.
- b. Six resources have been produced; four aimed specifically at patients and two resources aimed at osteopaths. The resources have been designed to improve accessibility.
- c. To evaluate the use of the resources it is hoped to appoint a researcher/research organisation to review the implementation of the resources over a period of 6 to 12 months.
- d. It is intended to launch the resources softly during the summer with a more formal launch at a hybrid event in Autumn / Winter 2022/23 which would be co-hosted with the Collaborating Centre for Values Based Practice at St Catherine's College, Oxford.
- e. A communications campaign is being devised to disseminate the resources and promote their use among osteopaths and osteopathic patients.
- f. The General Dental Council (GDC) have expressed an interest in collaborating on this next phase of the project and the GOsC will be keen to share learning and expertise as the GDC are also in the process of piloting their own shared decision-making resources which came out of the joint work undertaken in 2019.

26. In discussion the following points were made:

- a. The report and the developments to date were welcomed. It was commented that what had been developed would be valuable to students in developing skills in working with patients.
- b. The Chair commented that the report and guidance demonstrated the success of the work undertaken in conjunction with the patient groups today and good example of policy change.

Noted: The Committee consider and provided feedback on the approach to implementing and evaluating the shared decision-making resources.

Agreed: The Committee agreed the approach to implementation and evaluation of the suite of shared decision-making resources as part of the Values project.

Item 10: Update on registration assessment and registration assessor training

27. The Policy Manager introduced the item which provides an update on registration assessment activity and recent registration assessor training.
28. The key messages and following points were highlighted:
 - a. A registration pathway has been established for internationally qualified applicants. In the quarter to 30 April, fewer enquiries have been received, although numbers tend to low in any event.
 - b. A training session event was held for registration assessors on 13 May 2022. The session was run by former osteopath, Manoj Mehta.
 - c. The session was informed by feedback from the Registration Assessors.
 - d. The session was positive, with feedback from the assessors that they seek clarification around clinical responsibility, insurance, and the appeals process.
29. In discussion the following points were made and responded to:
 - a. In response to a comment as to whether it might be better perceived, and provide a level of assurance, if an osteopath with the requisite experience conducted the assessor training the Committee was advised that there was no requirement for an osteopath to lead the session and previous sessions had been undertaken in-house.
 - b. In response to the question as to whether the number of available assessors (currently 12) was sufficient to ensure that assessments are managed effectively members were informed that there is currently no evidence to suggest that assessors were overburdened but would be an area to take into consideration.

- c. It was suggested that 'shadowing' by other assessors might be a useful way of ensuring consistency when assessments are conducted.

Noted: The Committee noted the update on Registration Assessment activity including recent application and assessment numbers, and assessor training.

Item 11: Policy and Education Committee Annual Report

30. The Director of Education, Standards and Development introduced the item which concerned the Annual Report of the Policy and Education Committee to be presented to Council at its meeting on 14 July 2021.
31. Members commented that the Committee's scope of work has been impressive. It was asked if the report might be more widely disseminated to the profession once reviewed by Council?
32. It was explained that the work of the PEC would be disseminated through the Observers with Speaking Rights (COEI, the OA, the iO, and NCOR) under normal circumstances but it was agreed that this could be considered.

Agreed: The Committee agreed the Policy and Education Committee Annual Report to Council for 2021-22.

Item 12: Updates from Observers

33. The observers with speaking rights were invited to give updates on their respective organisations. The highlights from each contribution appear below.

Council of Osteopathic Education Institutions (COEI)

34. The following areas were highlighted:
 - a. COEI is continuing its working on becoming more strategic moving forward.
 - b. The Group is working to on more cohesive. Progress is being made in combatting individuality and developing COEI working together as a group.
 - c. COEI is working with the iO on the challenges in recruitment to the profession. The group is also working with the University of Middlesex on the modelling of the profession.
 - d. Work is being undertaken with the Osteopathic Development Group (ODG) on developing and improving the accessibility to and the visibility of the profession.
 - e. COEI is linking with other areas of healthcare to provide students with opportunities to be multidisciplinary.

Osteopathic Alliance (OA)

35. The following areas were highlighted:

- a. The group is looking at issues concerning long COVID and clinical implications for osteopathy.
- b. Working with the colleges to widen the scope of research opportunities and working with COEI to consider the work of clinical tutors.
- c. Working with the iO on promoting mentoring and shadowing observation days.
- d. Considering the recruitment of Visitors: The main barriers are that the roles are not fully understood therefore shadowing would be a valuable tool.

Noted: The Committee noted the updates from the Observers with Speaking Rights.

Item 13: Any other business

36. Cost of living and hardship in the profession: an issue was raised for consideration and begin a conversation about the impact of the cost-of-living crisis on the students, tutors, and registrants. Like the impact of COVID there may be issues which should be anticipated and prepared for like the fall-out from economic pressures.
37. In discussion the following comments were made:
 - a. The raising of this issue was welcomed and considered vital. It was pointed out that there were situations where groups/businesses had come close to collapse impacting not only on the profession but also patients and the wider public.
 - b. It was suggested that support might be provided by the Osteopathic Foundation (OF) and efforts should be made to highlight the fund. It was also suggested that a benevolent fund was something that the iO might consider. It was pointed out that the OF are in the process of publishing their new strategic direction which will include elements of what has been suggested.
 - c. It was recognised that the cost of living, and hardship issues are outside of the regulatory remit, but it should also be recognised that the GOsC and other regulators are not and cannot be divorced from the issues raised. How these issues can be addressed will be areas for consideration at future meetings.

Date of the next meeting: 6 October 2022 at 10.00