

**Education Committee
20 September 2012
Student Fitness to Practise**

Classification	Public
Purpose	For noting
Issues	An update about the progress of the Professionalism in Osteopathy Research Group Pilot.
Recommendations	To note the progress of the Professionalism in Osteopathy Research Project Pilot.
Financial and resourcing implications	The cost of the Professionalism in Research Group Project is £12 000. This money has been saved during the 2011/2012 financial year and provided the opportunity to develop tools to support the teaching and learning of professional behaviours within the osteopathic context. The resources are also involving the development of e-learning scenarios for registered osteopaths linked to findings in fitness to practise cases to support the implementation of the Osteopathic Practice Standards. Further information about this is provided in Item 7.
Equality and diversity implications	None at present.
Communications implications	None at present.
Annexes	<p><i>Annex A – Development of inventory for polyprofessionalism lapses at the proto-professional stage of health professions education together with recommended responses, Roff S. and Dherwani K. 2011, Medical Teacher, 2011; 33: 239–243</i></p> <p>Annex B – Association for Medical Education in Europe poster and oral presentation notes.</p>
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Background

1. In June 2012, the Education Committee noted an update on the work of the Professionalism in Osteopathy Research Group pilot designed to support the OEIs to develop the implementation of the student fitness to practise guidance including the teaching and learning of professional behaviours.
2. This paper provides an update on the progress of the project.

Discussion

Progress Development of Osteopathic Survey programmes for the OEIs

3. Existing surveys (or inventories) have already been developed and validated for use within medical schools for academic students, clinical students and also for registered practitioners. Attached at Annex A is an article about the validation of the original surveys.
4. The surveys were finalised with the OEIs using consensus methods.
5. Four OEIs currently have ethical approval with three more expected imminently.
6. The first data collection was issued from June 2012 to September 2012 with a small amount of data collected. This collection has now closed. One of the OEIs has agreed to collaborate with Sue Roff to prepare a development paper on this first data collection.
7. The surveys for the second data collection were finalised and sent out to the OEIs on 7 September 2012 and we will start collecting further data from more OEIs shortly.

Association for Medical Education in Europe (AMEE) Academic Poster

8. An abstract about the Professionalism in Osteopathy Research project was accepted for presentation at the AMEE conference in August 2012. A copy of the poster is attached at Annex B along with a summary of the oral presentation. The poster was displayed throughout the four day conference and presented to a small group comprising doctors, medical educationalists and others. Feedback on the poster about the potential national coverage was positive. It is important to ensure that osteopathy is represented in amongst other health professionals to increase awareness of this statutorily regulated profession and to share educational developments to enhance thinking in this area.

Progress Development of customised scenarios

9. As outlined in the Osteopathic Practice Standards implementation paper, the scenarios are progressing well and the Professional Standards Manager and the Regulation Officer are working together to provide appropriate input alongside that of the Fitness to Practise Policy Committee.

Next steps

10. We remain on track to achieve the expected outcomes of the project as follows:
 - A customised elearning/assessing/measuring programme for OEIS (fully owned by GOsC) to use for individual/progress/longitudinal/comparative teaching and monitoring of professionalism.
 - A customised elearning/assessing/measuring programme for osteopaths (fully owned by GOsC) to use for individual monitoring of professionalism.
 - Customised scenarios for registered osteopaths to explore how the values learned at undergraduate level endure in registered osteopaths.
 - Papers sufficient for submitting for publication on e.g. learning curve of osteopath students/trainees for submission to publications.
 - A report evaluating the costs and benefits of the process for stakeholders to feed into future thinking and development on this area.

Recommendation

11. To note the progress of the Professionalism in Osteopathy Research Project Pilot.

Development of professionalism learning tools in osteopathy

Annex B

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Objective

- To support understanding of views about professional behaviour within and between Osteopathic Educational Institutions (OEs) and more widely
- To develop e-learning tools to 'support students to learn professional behaviours, including appropriate knowledge, skills, attitudes and values' – a regulatory requirement

Methods

- Recruitment of 11 OEs into pilot
- Consensus methods (face to face meetings of all 11 OEs, followed by online refinement and review by the GOsC) to determine inventory items using expertise drawn from the OEs and the regulator
- Ethical review completed for four OEs, others in progress



31. Please suggest 3 to 5 items for anatomy / cadaver professionalism in the box below.

[View all responses](#) – There are too many responses to display on this page and so all the responses to this question are available on a separate page.

32. Please suggest 3 to 5 items for Social Media Professionalism.

[View all responses](#) – There are too many responses to display on this page and so all the responses to this question are available on a separate page.

33. Are there any other areas of professionalism that you would like to see included in the Osteopathy instrument?

Yes:		41.7%	5
No:		58.3%	7



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Results

- Two inventories developed:
 - Professionalism in Osteopathy (Academic) – with 34 items
 - Professionalism in Osteopathy (Clinical) – with 45 items
- Analysis in late 2012
- Comparisons should be possible with medical, dental and nursing respondents to the Dundee Professionalism Inventories

16. A fellow student asks you to help cover up a mistake in patient record keeping/care. (Optional)

a. How wrong do you think this behaviour/attitude is? (1 = not very wrong, 5 = very wrong) (Optional)

1 2 3 4 5

b. If a student becomes aware of this behaviour/attitude should they in the first instance: (Optional)

Ignore it

Challenge the person about the behaviour/attitude

Discuss the person's behaviour/attitude with peers to find a way of addressing it

Report the person's behaviour/attitude to a more senior person without trying to address it oneself or with peers

Take another course of action

i. If you selected 'Take another course of action', please specify: (Optional)

c. How frequently do you think this behaviour/attitude occurs among osteopathy students? (1 = not at all frequently, 5 = very frequently) (Optional)

1 2 3 4 5

d. How frequently do you think this behaviour / attitude occurs among qualified osteopaths? (not relevant or 1 = not at all frequently, 5 = very frequently) (Optional)

not relevant

1

2

3

4

5

Take home messages

- Embedding professional guidance is important. Few tools exist to support learning of professional behaviours in osteopathy
- These tools may help to identify differences within and between OEs and across the profession
- Comparisons may be possible with other healthcare students
- This gives potential to trace a learning curve for professionalism in osteopathic students in the UK

Oral Poster presentation notes

Background

- Description of osteopathy: Osteopathy is a form of manual medicine, taught as a four or five year undergraduate degree typically with 2 years academic, 2 years clinical or protoprofessional, and then registration and practise as an autonomous primary contact practitioner (referring where appropriate).
- Context: Osteopaths worked mainly in the independent sector with no teams or employers. Sometimes they reported feelings of professional isolation.
- Issue: If professional behaviours are learned in context - developing, maintaining and updating those professional behaviours in a more isolated profession would be challenging.
- Guidelines: Introduction of GOsC Student Fitness to Practise Guidance which required a 'continuing dialogue about professionalism' and that students 'must be supported to learn professional behaviours.'
- Theoretical background: GOsC and Sue Roff working together drawing on her use of the directional hypothesis drawn from Kohlberg's Theory of Moral Development and also Friedman Ben-David who said that self assessment against peer standards was useful to compare self-assessment as well as comparison with standards set by experts.
- Development of tools to support implementation of guidance: Tools validated in the medical context by Sue Roff to explore responses and appropriate sanctions to observed lapses in professionalism - both within and outside the direct clinical context.
- Processes for developing tools included:
 - undertaken a literature search for professional attitudes and behaviours
 - undertaken observational studies
 - undertaken an analysis of observations, informal and structured interviews
 - created online inventories
 - Refined the inventories through an expert UK group and a local Dundee group including a variety of health professionals.

Osteopathic development of tools:

- Context: Professional behaviours change over time and it was interesting to us as a regulator to explore how these changes are taught and learned in a relatively isolated profession to better support this process.
- Development method: Consensus methods to determine face validity for osteopathic inventories. We had used a face to face meeting to explore inventory items and suggest new ones. We administered an online survey completed by all OEIs to respond to the following questions on each item:
 - Should a version of this item be included in the osteopathic inventory?
 - Should this item be reworded for osteopathy?
 - If yes, please suggest wording.

- We also explored additional items and items suggested included:
 - Social media professionalism including, for example befriending patients on facebook
 - accuracy of research data
 - disrespect for others
- Data collection progress: a small amount of data has been collected.

Next steps

- More data is planned to be collected in September.
- We would be able to look at reliability of the inventories at a later stage when we had more data.
- Scenarios for registered osteopaths were also being developed to support the exploration of professional behaviours in practice.

Conclusion

- It would be interesting for the regulator to explore the development of responses to lapses in professional behaviours and norms across student years and OEIs and also with registered professionals and to trace the learning curve for professionalism with other professions as this would help us and OEIs to better target future educational interventions.