Education Committee 27 February 2013 Preparedness to Practise Research Report

Classification Public

Purpose For noting

Issue Taking forward the findings of the Preparedness to

practise research undertaken by Professor Della Freeth

and team.

Recommendation To note the preliminary analysis of the dissemination and

implications of the preparedness to practise research.

Financial and resourcing implications

None arising from this report.

Equality and diversity implications

None arising from this report.

Communications implications

None arising from this report.

Annexes None

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Background

- 1. Corporate Plan Aim 1.3 provides for a review of students' transition into practice as newly qualified osteopaths and determination of whether any further regulatory interventions are necessary to protect patients.
- 2. The 2012-13 Business Plan requires us to 'scope out the parameters for a review of transition into practice including possible regulatory interventions' by March 2013.
- 3. This paper outlines progress with this disseminating the findings of the research and how it might feed into various projects being undertaken both by the GOsC and partners. The Committee is asked to note the early scoping of this work and the changing context within which it is situated.
- 4. On March 2013, Professor Della Freeth presented the findings of the preparedness to practise research. The Committee were also presented with the draft final report and a précis of the findings.
- 5. The preparedness to practise research was published on our website in August 2012, following proofing and the full report is available at http://www.osteopathy.org.uk/uploads/new_graduates_preparedness_to_practise_report_2012.pdf
- 6. To assist the Committee to recall the rich and complex findings from the report, the Head of Professional Standards will provide a short presentation presenting an overview of the findings at the beginning of this item. This will centre around the different themes of the report and particularly the findings in relation to:
 - a. Clinical skills, knowledge and competence Chapter 4
 - b. Interpersonal and communication skills Chapter 5
 - c. Entrepreneurial and business skills Chapter 6
 - d. Professionalism Chapter 7
 - e. Supporting osteopathy graduates transitions into practice Chapter 8.

Discussion

Changing context

7. The consideration of the parameters for a review of the transition into practice should be interpreted in the current, ever changing context. At the time of the inception of the 2010-13 Corporate Plan, it was thought that the transition into practice was a challenging time for osteopaths who found it difficult to establish themselves in practice and who found themselves in positions of isolation with little support. This perception was based on anecdote. It was thought that there was a need to understand in more detail the challenges experienced by such graduates and also to explore a possible regulatory role in this context, for example a 'pre-registration' year or a formal period of mentoring, for example.

- 8. The Professional Standards Authority published their 'Right Touch Regulation' report in August 2010 which coincided with a more partnership based understanding of regulation and its impact in regulatory thinking. This thinking has traditionally been applied to a regulatory environment with more stakeholders for example, employers (usually the NHS), royal colleges and postgraduate deaneries and multi-disciplinary teams. It has taken a little longer to develop this concept in relation to the osteopathic environment which has none of these developed stakeholders and where leadership qualities are in the process of being developed. It is also of note that osteopathy is also a profession where up until very recently, most practitioners worked independently and, until recently, where there was no effective dialogue between the stakeholders that were in existence. However, this concept of partnership has gradually developed particularly since 2012.
- 9. In summer 2012, a number of pivotal osteopathic conferences took place across the UK. The afternoon of these conferences was set aside for a debate about 'Development'. The parties facilitating the debate were:
 - The British Osteopathic Association
 - The Council for Osteopathic Educational Intuitions
 - The General Osteopathic Council
 - The Osteopathic Alliance.
- 10. Since then, the above organisations, joined by the National Council for Osteopathic Research, have been in discussions to develop the debate and to consider further the emerging themes and how these organisations could work together on a shared development agenda for the benefit of patients and practitioners. This is a critically important change in context which affects the way that we develop the preparedness to practise research findings.
- 11. In February 2013, the organisations above published a joint statement which outlines a number of potential development projects. These projects include:
 - Evidence
 - Service standards
 - Advanced practice
 - Regional support
 - Mentoring
 - Career development
 - Leadership
 - International collaboration
- 12. Separately, we are also working in a much more partnership based way with the OEIs culminating in more seminar work, focussing on open questions and small group discussion and less directed discussion papers and recommendations. Feedback has indicated that this change has been received very positively and has contributed to a feeling of working in partnership between GOsC and the OEIs. For example, in May 2012, we held a seminar with the OEIs which explored

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- one aspect of the preparedness to practise research and facilitated group discussion within the OEIs around the findings in the report.
- 13. We are also working with the OEIs, patients and students around Guidance for Osteopathic Pre-registration Education (GOPRE) with a joint working group comprising OEIs, students, and patients, which enables us to consider the themes identified in the report as part of specific guidance:
- 14. Whereas perhaps previously we may have framed the regulatory role as something that GOsC undertook and others 'received'; now the concept of osteopathic regulation is becoming much broader and involves stronger relationships between GOsC and the stakeholders with the profession. Through the revalidation pilot, we have also developed a stronger concept of 'self-regulation' perhaps also leadership. It is vitally important that osteopaths understand the value of 'regulatory interventions' because otherwise they simply won't be motivated to put these into practice and then it becomes ineffective. Regulation is not just about policy but about implementation as it is actual implementation which contributes to enhanced quality of practice and thereby enhanced patient safety.
- 15. So it is within this shared context of partnership that we are beginning to reframe our approach to 'scoping the parameters for a review of the transition into practice including possible regulatory interventions.'

The recommendations of the Preparedness to Practise Research Report

- 16. The table attached outlines the main recommendations arising from the report and the ways in which these findings are being taken forward in partnership with others.
- 17. In summary, there are a number of aspects of the reports that will be taken forward in project led by other organisations, or developed in partnership with other organisations. This is entirely in keeping with the PSA thinking on Right Touch Regulation outlined above.

Next steps

- 18. In light of the differing projects being led by others and in partnership with others, it is suggested that it is not the right time to take forward an independent project stream about appropriate regulatory interventions about the transition into practice indeed to do so without testing out non-regulatory forms would be contrary to the right touch regulation principles and it could also have unintended consequences in terms of the relationships with our stakeholders and our commitment to facilitating leadership and development within the osteopathic profession.
- 19. Nevertheless, as progress is made within the development work and the GOPRE work particularly, in partnership with our stakeholders, it will become clearer how

- we have managed each of the recommendations of the report and whether there are gaps that GOsC need to consider further.
- 20. We therefore propose to review the research findings, the work of the development group and also the work of GOPRE in autumn 2013 to explore progress and identify any potential gaps.

Recommendation: to note the preliminary analysis of the dissemination and implications of the preparedness to practise research.

Recommendation	Action taken forward	Possible action moving forward	Interested organisations
CPD requirements during first year of registration – GOsC – The GOsC should not have an exemption from CPD for newly registered graduates as this gives out the wrong message about the transition into practice.	Finding identified as relevant to the CPD Discussion Document Review.	GOsC to feed into CPD Discussion Document Analysis and subsequent proposals for amending the CPD scheme.	GOsC.
Supporting access to journals and other resources to support CPD – GOsC	GOsC has highlighted access to a range of journals through the o zone, the e-bulletin and The Osteopath. The Readership Survey in 2012 also raised awareness and contained evidence of raised awareness. Access to the journals is also highlighted as part of our final year presentations to all osteopathic students.	GOsC to continue to highlight access to a range of journals. GOsC to work with partners including the Osteopathic Educational Institutions (OEIs), the Osteopathic Alliance (OA), National Council of Osteopathic Research (NCOR) and the Council for Osteopathic Educational Institutions (COEI) to enable all to highlight the availability of this resource to registered osteopaths.	GOsC – and also in partnership with the BOA, COEI, OA, NCOR.
Reviewing the practices of other healthcare and wellbeing professions or occupational groups in relation to supporting novice	Professor Della Freeth will be speaking at the BSO International Education Conference where she will be speaking about preparedness to practise.	The GOsC, in partnership with others should review the transitions into practice of other healthcare professionals – particularly, perhaps, through the 'mentorship' project or in	GOsC/BOA/COEI/ OA/NCOR with the OEIs who are already implementing
practitioners' transitions into practice – GOsC	Analysis of the 2012 Annual	conjunction with the work that the OEIs are already undertaking.	forms of post- registration

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	Reports demonstrates that one of the OEIs has built in the development of Business Plan as part of an assessment portfolio bringing, for the first time, education about business development into an assessed module and therefore making it more of a focus for learners. We are also aware that other OEIs are preparing more regular CPD drop in groups specifically for new graduates to support them with a peer group as they take their first steps into practice. We also know that employing new graduates in student clinics is another way of supporting graduates as they take on clinical responsibility for the first time as a registered practitioner.	It is of note that regulatory options considered through the research paper include: • the role of clinic-based and placement-based learning; mentorship during the early months of qualified practice; • conditional registration • a supported foundation period; • early engagement with CPD; • working in group practices and multidisciplinary environments; • formal or informal ongoing support from OEIs and faculty. Some of these are matters for the GOsC (eg conditional registration), however, most of these mechanisms are about working in partnership with OEIs and the profession. The research identifies that a conditional or pre-registration year was supported and rejected in almost equal measure. (p132). However, it would be important to check the effectiveness of other mechanisms before taking this regulatory action.	support and clinic placement to support transitions into practice. GOsC will also consider the finding in relation to CPD as part of the CPD review.

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			organisations
Considering the particular needs and vulnerabilities of New Registrants working as lone practitioners.	See also above. GOsC highlight the availability of Regional Groups to all final year graduates and provide advice to graduates to make contact with colleague osteopaths in the local area to join the learning community.	One of the recommendations of the research was to consider specifically the individual issues surrounding new registrants as lone practitioners. It was apparent from the research that many new registrants were mentored by colleagues within group practices – although other forms of mentoring from other colleagues and also from OEIs was mentioned. However, the quality and / or availability of the mentorship was variable. It was suggested that organisations consider further how to support particularly newly qualified osteopaths who may experience feelings of professional isolation.	GOSC/BOA/COEI/OEIs/OA/NCOR – all could play a role in relation to this aspect. Key development projects that could meet the needs of these practitioners might include: Career development Regional support Advanced practice. Again it will be important to work together with the relevant parties to ensure that appropriate policies and also implementation approaches meet the needs of

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			these groups.
All practising osteopaths regard high quality support for the development of student and novice osteopaths as a duty of the wider profession – all practising osteopaths	In many respects the development debate is starting a change in culture recognising the responsibility of all osteopaths towards the future development of the profession. Providing supportive mentorship to others is	GOsC could consider recognising the teaching and learning qualities involved in mentoring more explicitly as part of the GOPRE work – to ensure that graduates moving forward are trained in the necessary skills which has not previously taken	GOsC/BOA/COEI/ OEIs/OA/NCOR
This is about culture change	a part of this.	place.	
and a change in values and	•	•	
norms within the osteopathic		The development projects include a	
profession. Some of the		career development. Perhaps the	
challenges in the research		BOA or others could consider	
identified poor quality		encouraging, training and accrediting	
mentorship and a mis match		professional mentors, which could in	
between the expectations of		turn, be recognised in a future CPD	
graduates and the		scheme thus giving more value to	
expectations of experienced		mentoring within the regulatory	
principals. For example, some		structure. In turn, this could drive up	
principals provided a supportive induction for their		standards of mentorship and practice support for associates thereby	
associates, whereas for others		creating a market for good quality	
the issue of competence must		support lead by the profession itself.	
be guaranteed at the point of		Achieving the desired regulatory	
graduation or the osteopath is		interventions without direct changes	
incompetent. In other words		by GOsC.	
there was no recognition of		2, 2333.	
the need for a critically		Although the current CPD Guidelines	
intensive learning period to		recognise CPD in the preparation	

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support the associate into practice in some cases.		aspect of being a mentor, the actual act of mentoring is not regarded as CPD, for those that choose to do it. The unintended consequence of this is that mentoring is not valued as a professional activity. This could be recognised as part of the CPD review. GOsC may have a role to play in making the responsibility to others part of the OPS – as other regulators have done – however, this should augment culture change instigated by the profession itself.	
All osteopaths to recognise New Registrants' transitions to practice (and indeed any practitioner's move from one work environment to another) as Critically Intensive Learning Periods (CILPs)60 (see sections 10.2.2 and 10.2.5), during which performance will be impaired by the need to acquire context-specific knowledge and understanding	See comments above	See comments above	See comments above
More proactive support during CILPs and the eradication of	See comments above	See comments above	See comments above

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workplace practices that impede everyone's performance, should promote better transitions and an overall improvement in performance: even small changes can make a worthwhile difference.			
Reviewing clinic and placement learning - OEIs	OEIs are exploring the possibility of clinic placement learning. The OPS makes clear that clinic placement learning is permitted. (See standard D8 and the associated guidance within the Osteopathic Practice Standards).	OEIs to consider providing quality assured placement learning with osteopaths in practice to support some of the findings in the research around: • Managing communication in difficult cases. • Support longitudinal learning – and managing patient expectations. GOSC / OEIs may wish to make this more explicit as part of the GOPRE work. There may also be a role to play with organisations such as the BOA, COEI and the OA working together to support osteopaths to have the appropriate training mechanisms in	GOsC/OEIs/BOA/ COEI/OA

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		place to take students. (For example, GP practises are accredited as 'training practices' by the Royal College of General Practitioners).	
Examining the rhetoric of 'safe, if not always effective' - OEIs	None at present Although a recent article (Vaughan B et al – 2012) in the International Journal of Medicine notes the move to different, ongoing forms of assessment throughout osteopathic education which could allow for less of a focus on passing the final examination.	This rhetoric was evident in the research and is in part a throwback to the old FCCA and the assessment drives learning. GOsC and the OEIs will need to work together to eliminate this rhetoric and in part the GOPRE work will help us do this.	GOsC/OEIs
Supporting access to journals and other resources to support CPD – OEIs	Unfortunately, discussions with the OEIs have made it apparent that university regulations do not allow former students to benefit from access to journals.	However, there remains an opportunity to flag the accessibility if the range of journals available to registrants.	GOsC/OEIs
To examine the rationale and contexts provided for reflective practice – OEIs	As indicated above – assessment strategies within OEIs appear to be using a wider range of tools, for example reflective portfolios.	Further exploration of this issue within OEI seminars and within the GOPRE work may support further consideration of the detailed	GOsC/COEI/OEIs/ OA
This recommendation is about the principle that enhancement of practice requires 'effortful practice, supported by feedback (from others and from the		recommendations. In part, this is also about culture change and training established osteopaths in reflection and feedback and analysis. We discovered through	

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environment), with the deliberate intention to improve'. The research found that reflective practice was present in all OEIs but was variable. The recommendation is that OEI should 'review how reflection is introduced to students and whether the rationale for its use is clear to faculty and students at each relevant point in the curriculum.' The research also recommends that focussed reflection is more efficient than unfocussed reflection and that this should be supplemented with third party feedback on practice.		our revalidation pilot that considerable support in these areas is still required and this should be taken forward in partnership with the BOA, COEI, OA and OEIs and the finding should also be explored further as part of the GOsC continuing fitness to practise consultation later on 2013.	
Strengthening support for the development of high quality interpersonal and communication skills - OEIs	A seminar took place in May 2012 at the GOsC OEI meeting to explore the findings of the report and implications for osteopathic education.	We propose to undertake a more detailed evaluation of changes made the communications to better equip students to deal with challenging situations with patients.	GOsC/OEIs
	A further GOsC/OEI seminar took place in September 2012 exploring the role of the patient in osteopathic education. Part of the	The joint GOsC/OEI Guidance for Osteopathic Pre-registration education working group will also consider this aspect as part of its	

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	outcome of this seminar was a recognition of the need to normalise the giving and receiving of feedback from all parties to the consultation.	work.	
	Whilst formal evaluation of these seminars has not been undertaken, the following changes have been reported:		
	 Introduction of learning journals to bring out critical reflections more effectively. Formative group assessments with simulated patients allowing students to experience challenging situations in a safe environment. 		
Strengthening preparation for entrepreneurial and business aspects of osteopathic practice – OEIs	Although we have not yet had a specific seminar about this – as part of the general feedback OEIs have reported the following actions:	Seminar for OEIs about the particular findings in this category to be planned – GOsC/OEI. We will also explore this finding as	GOsC/OEIs – possibly BOA
	 Construction of a business plan for setting up in practice assessed as part of a Portfolio module. 	part of the joint GOsC / OEI work on the Guidance for Osteopathic Pre- registration Education Working Group.	

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		There may also be some work as part of this with the British Osteopathic Association – although no relevant projects have been identified in the development work stream as yet.	
Preparing tomorrow's mentors – OEIs	See comments above	GOSC/OEI – As part of this finding, we held a seminar on 12 September as part of the GOSC/OEI meeting about providing constructive feedback. It is not 'the norm' for constructive feedback to be given and received between students and peers or from students to tutors although this is gradually changing. This is an issue to be explored further with the OEIs exploring how we might encourage the giving and receiving of feedback. The GOSC and the OEIs can take this forward as part of the GOPRE work.	GOsC/OEIs
Preparedness for alternative career path – OEIs	None that we are aware of.	This is an aspect for the OEIs to consider further – the transferability of the osteopathic degree to other career paths.	OEI/COEI – supported by GOsC.