



**General Osteopathic Council review of osteopathic
courses and course providers**

**Master of Osteopathy (MOst)
Initial recognition review**

**BSc (Hons) Osteopathy
Renewal of recognition review**

The European School of Osteopathy

November 2009

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Foreword

Under the *Osteopaths Act 1993* the General Osteopathic Council (GOsC) is the statutory regulatory body for osteopaths and osteopathic education providers. The GOsC advises the Privy Council on which programmes of osteopathic education merit Recognised Qualification (RQ) status. The Privy Council grants RQ status to programmes where the governance and management of the course provider and the standards and quality of the programme meet the requirements laid down by the GOsC. In particular, students must meet the practice requirements of GOsC's *Standard 2000: Standard of Proficiency*.

Decisions concerning the granting, maintenance and renewal of RQ status are made by the Privy Council following reviews of osteopathic courses and course providers. The Quality Assurance Agency for Higher Education (QAA) manages certain aspects of these reviews on behalf of GOsC. The role of QAA, by its conduct throughout the UK of reviews and audits of higher education provision and providers, is to maintain public assurance that the standards and quality of higher education are being safeguarded and enhanced. In developing its methods for higher education audit and review, QAA has published a wide range of materials designed to provide a background against which scrutiny can take place.

GOsC review

GOsC review is a peer-review process. It starts when institutions evaluate their provision in a self-evaluation document. This document is submitted to QAA for use by a team of review 'visitors' who gather evidence to enable them to report their judgements on governance and management, the clinical and academic standards, and the quality of learning opportunities. Review activities include meeting staff and students, observing teaching and learning, scrutinising students' assessed work, reading relevant documents and examining learning resources. Full details of the process of GOsC review can be found in the *Handbook for the General Osteopathic Council review of osteopathic courses and course providers, second edition*, QAA 2005.

GOsC review may take one of three forms:

- review for the purpose of granting initial RQ status
- review for the purpose of renewal of RQ status
- review for the purpose of monitoring the operation of governance, management, standards and quality. Such 'monitoring review' normally explores the content of an annual report on provision, the fulfilment of conditions attached by the Privy Council to RQ status, or some important development in the provider or the osteopathic programme.

In Initial recognition review, in Renewal review, and in some instances of Monitoring review, visitors make one of the following recommendations to GOsC:

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| <ul style="list-style-type: none">• approval without conditions• approval with conditions• approval denied. |
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The recommendation made is that of the review visitors to the GOsC. In making its own recommendation to the Privy Council the GOsC may choose not to follow the recommendation of the visitors.

In some Monitoring reviews the GOsC does not require the visitors to make a formal recommendation for the programme.

Introduction

This report presents the findings of an Initial recognition review, incorporating a Renewal of recognition review, of aspects of governance and management, the academic standards proposed, and of the quality of the learning opportunities proposed in osteopathy at the European School of Osteopathy (the School). The programmes reviewed were the Master of Osteopathy (MOst), incorporating the BSc (Hons) Osteopathy. The review was undertaken by visitors appointed by the General Osteopathic Council (GOsC) in accordance with GOsC's regulatory responsibilities for safeguarding Recognised Qualification (RQ) criteria under the *Osteopaths Act 1993*. A prime focus of the review was the relationship of the programme to The *Standard 2000: Standard of proficiency (Standard 2000)* professional competence standard of the GOsC. The review was completed in the academic year 2009-10. The review visitors were Ms Fiona Hamilton, Mr Simon Browning and Professor Brian Anderton, and Mr Jeffery Butel (coordinator).

A Formal recommendation(s)

The recommendation given below is the recommendation of the review visitors to the GOsC. In making its own recommendation to the Privy Council the GOsC may choose not to follow the recommendation of the visitors

The recommendation of the visitors for the programme is:

- **approval with conditions.**

The conditions are:

- inclusion of a detailed financial progress report in the School's Annual Report to GOsC for the academic years 2009-10 and 2010-11
- the School's curriculum review must be concluded by 31 August 2010 to enable implementation of the proposed scheme for the start of the 2011-12 academic year
- the School must change its procedures relating to resit assessments in order to provide the opportunity for external examiners to moderate this work appropriately and to attend resit examination boards; this should be completed to commence with the summer 2010 assessments.

B Findings

The following is a summary of the visitors' main conclusions:

Strengths

- the senior management team has been strengthened through the broadening of its experience and skills set (paragraphs 10, 11)
- the effective engagement of the School with the University of Greenwich's annual monitoring processes (paragraph 16)
- widespread canvassing of student opinion, including effective student representation, and responsiveness to student views (paragraph 19)
- the retention and development of the broad osteopathic curriculum to a level appropriate to M-level study (paragraphs 23, 26)
- the clear guidance given to tutors to ensure that summative assessments address intended learning outcomes (paragraph 31)

- the breadth of osteopathic approaches and skills demonstrated by students (paragraph 37)
- the template provided to lecturers to inform teaching sessions, which highlights the relevant level descriptor (paragraph 39)
- the provision of regular, continuous formal and informal feedback to students after every patient intervention (paragraph 41)
- the students' clinical experience which is well-supported by clinical tutors (paragraph 47)
- the School's range of formal and informal methods of providing academic and pastoral support to its students (paragraph 47)
- the team of experienced dissertation supervisors, which is enhanced by well-focused professional development activities (paragraph 51)
- enhanced access to library resources through the University of Greenwich, including remote electronic access by mean of Athens accounts (paragraphs 54, 55)

Areas for development

- external financial risks which necessitate continued monitoring of the School's financial position and regular reporting to GOsC of any developments that affect the School's financial standing (paragraph 9)
- procedures relating to resit assessments which do not provide external examiners with appropriate opportunities to moderate this work and to attend resit examination boards, with consequent risk to academic standards (paragraph 18)
- limited communication to students of the link between intended learning outcomes and assessment tasks, and an inconsistent approach to the provision of feedback on their assessed work to ensure that it highlights performance against intended learning outcomes (paragraphs 22, 30)
- conclusion of the School's curriculum review by 31 August 2010 to enable implementation for the start of the 2011-12 academic year (paragraph 24)
- the lack of explicit emphasis on the importance of preparing students for professional life and self-employment (paragraph 25)
- investigation of the impact of the timing and number of summative assessments on the student learning experience (paragraph 33)
- clarification with the University of Greenwich of the arrangements for students who transferred from the BSc to the MOst and who subsequently fail the M-level dissertation (paragraph 44)
- provision of focused staff development activities to ensure greater preparedness of academic and clinical staff for new teaching methods and facilitation of students' independent learning (paragraphs 50, 51)
- the library stock at Boxley and the Clinic requires augmentation and there is a need for improved Wi-Fi access on both sites to support student learning at M-level (paragraphs 53, 54)
- the limited space dedicated to students' private, autonomous, study on the Boxley site (paragraph 56).

C Description of the review method

The following section gives a general description of the GOsC review method. The full method is given in the *Handbook for the General Osteopathic Council review of osteopathic courses and course providers, second edition*.

The GOsC review method combines off-site consideration of written evidence by the visitors with at least one visit of two days to the provider. For Recognition and Renewal review, the review period is typically of six weeks.

The visitors are selective in their lines of enquiry and focus on their need to arrive at findings and a recommendation against clearly stated criteria. They refine emerging views on the provision against as wide a range of evidence as possible. For example, the perceptions expressed in meetings by students or by staff are tested against other sources of evidence.

Documentary evidence typically used includes financial accounts, strategic plans, financial projections, insurance schedules, student work, clinic management records, internal reports from committees, boards and individual staff with relevant responsibilities; and external reports from examiners, verifiers, employers, validating and accrediting bodies.

Meetings with students are strictly confidential between the students attending and the visitors; no comments are attributed to individuals. Teaching and learning observation is governed by a written protocol.

Visitors respect the principle of proportionality in their enquiries and emerging conclusions.

Key features of GOsC review include:

- an emphasis on the professional competencies expected of osteopaths and expressed in GOsC's *Standard 2000*
- peer review: review teams include currently registered osteopaths and, frequently, at least one lay visitor with higher education interests
- a focus on the students' learning experience, frequently to include the observation by visitors of clinical and non-clinical teaching
- flexibility of process to minimise disruption to the provider; there is negotiation between QAA and the provider about the timings of the review and the nature of evidence to be shown
- a process conducted in an atmosphere of mutual trust; the visitors do not normally expect to find areas for improvement that the provider has not identified in its own self-evaluation document (SED)
- an emphasis on governance and management, to include the maintenance and enhancement of standards and quality
- use of the SED as the key document: this should have a reflective and evaluative focus
- an onus on the provider to supply all relevant information: any material identified in the SED should be readily available to visitors
- evidence-based judgements
- ensuring that the amount of time taken to conduct a review is the minimum necessary to enable visitors to reach robust findings and recommendations
- providing transparency of process through the use of published GOsC criteria
- the role of the Institutional Contact, a member of the provider's staff, to assist effective communication between the visitors and the provider
- the facility to engage a further specialist adviser where necessary
- close monitoring by QAA officers.

D The overall aims of the provider

1 The School was founded in 1951 and originally operated in Paris. In 1965 it relocated to the United Kingdom, first to London and then, from 1971, to Kent. The franchise agreement with the College International d'Osteopathie was phased out in 2007. The medium of instruction is English. The School's main site, used for administration and teaching, is located at Boxley, near Maidstone, Kent. Its teaching clinic is some four miles away in Tonbridge Road, Maidstone. At the time of the review there were 185 students enrolled on the MOst programme which is studied full-time and is of four years' duration. There were a further 62 students enrolled on the final year of the BSc (Hons) Degree in Osteopathy. There were three full-time and 116 part-time teaching staff, representing some 21 full-time equivalents. Included in the 116 are 32 part-time clinical staff, representing some 5.5 of the 21 full-time equivalents. Many staff contribute to both academic and clinical teaching.

2 The School's mission statement states that:

The European School of Osteopathy is dedicated to the provision of the highest quality in:

- Osteopathic under- and postgraduate education
- Clinical care to the community
- Osteopathic research.

The School is committed to:

- concern for the individual
- respect for the origins and philosophy of osteopathy
- the need to embrace the wider community of Europe and the world.

The School motto is: Tradition with Vision in Osteopathy.

3 The aims of the MOst are, as stated in the SED:

'The Integrated Master's Degree in Osteopathy, and the main alternative award, the BSc (Hons) in Osteopathy, aim to fulfil *Standard 2000* requirements, and comply with the *Subject benchmark statement* for Osteopathy [published by QAA]. In satisfying these two standards, the School is concerned that both degrees maintain an osteopathic breadth, combining traditional philosophies with current research and models of practice'.

With this in mind the educational aims of the two programmes may be summarised as follows:

- provide the student with knowledge, skills and clinical training reflective of advancing healthcare standards in osteopathy
- develop the student's competence in applying clinical skills to osteopathic practice
- develop the reflective, critical and analytical powers of the students allowing them to deal, in a self-directed manner, with complex issues, making sound judgements in the absence of complete data, dealing with the unpredictable
- linking the latter powers with general problem-solving and research skills
- provide students with the skills to respond positively to change
- enhance interpersonal skills, enabling clear communication with all audience levels
- develop the skills for autonomous practice and teamworking

- develop the skills to advance knowledge and understanding by independent learning.

E Commentary on the provision

Management and governance: Strategic

4 Osteopathic Education and Research Limited is a company limited by guarantee and a registered charity. It operates as the European School of Osteopathy. At the time of the review, the Board of Trustees was finalising new Articles of Association for the company, designed to ensure continuing compliance with current requirements under Companies and Charities legislation.

5 Legal responsibility for the overall management and control of the School is vested in the Board of Trustees, the members of which are directors of the company. The Principal of the School was, ex officio, a member of the Board of Trustees, but recent changes to the Articles of Association have removed this provision. The Principal is charged with managing the day-to-day administration of the School together with other members of the Senior Management Team: the Vice-Principal (Academic), Vice-Principal (Osteopathic), the newly appointed Head of Corporate Services, and two co-opted members, the Heads of Clinic and the International Department.

6 The 2005 QAA/GOsC Renewal of recognition review found that the recent financial restructuring had placed the School in a stronger position. However, during 2008 the School experienced significant financial problems which threatened its survival, occasioned tensions in the management and governance of the School, and put into abeyance the strategic development of the School. The issue manifested itself as a severe cash flow problem caused by financing two exceptional items, a consequent requirement to rely much more heavily on overdraft facilities provided by the School's bankers, and the conversion of a modest projected year-end trading deficit into a substantial overall deficit of over £300,000.

7 The School's bankers became concerned at the deteriorating financial position of the School, and insisted on an independent review. The subsequent report concluded that the underlying trading performance of the School remained strong. It recommended that the bank should continue to support the School, and that the School's request to restructure its existing overdraft facility should be approved. The bank's lending was secured by a first legal mortgage over both of the School's freehold properties. It was recommended that the bank should also take a floating charge over the School's general assets, but the visitors were informed this had not happened.

8 With the encouragement of its bankers, the School has engaged in a cost-cutting exercise affecting staffing, catering and maintenance. Cutting staff costs has involved voluntary redundancy, reduction in the scale of some staff contracts and a voluntary 10 per cent reduction in the salaries of members of the senior management team. The Principal informed the visitors that staff cut-backs had fallen very largely on administrative and support staff, and there had been a minimal reduction in academic and clinical staffing and hence minimal impact on the student learning experiences. Expenditure reductions have been successful in easing cash flow problems for the School, and the draft accounts for 2008-09 show a surplus of income over expenditure of over £130,000 compared with an overall loss of £313,080 in 2007-08. Staff and students were kept informed of the School's financial difficulties and the action being taken to address them.

9 The anticipated financial outturn for 2008-09 is encouraging for the School, and has permitted some relaxation in cost reductions. Moreover, budgetary projections over the

period 2008-09 to 2012-13 indicate an anticipated growth in income from the programme of 17 per cent. However, a number of factors may have an adverse impact on these income projections. The School estimates around 17 per cent of its students would not be eligible for HEFCE funding through the University of Greenwich because they already hold equivalent or higher level qualifications. It is anticipated that the development of the integrated master's programme will mitigate this problem. At the beginning of 2009-10, the University of Greenwich notified the School of the withdrawal of the London weighting which it had received as part of its Higher Education Funding Council for England funding, representing a loss to the School of around £120,000. Other developments may well impact negatively on the School's finances. The School will need to monitor these developments closely and ensure that GOsC is kept informed of its financial position on a regular basis.

10 The independent review also made recommendations for the management and governance of the School. Specifically, it recommended that both the senior management and the Board should take a more 'robust approach going forward' to avoid a repetition of the type of problems the School had encountered previously. The principal response to this was the creation of the post of Head of Corporate Services, with a remit covering both financial management and human resources management within the School. The changes have created the potential for the Senior Management Team to operate within a framework of more broadly based skills and experience than had been the case at the time of the financial crisis in 2008.

11 At the time of the financial difficulties, the Board of Trustees had moved well beyond a governance role and into the day-to-day management of the School. The blurring of responsibilities created tension. An external change management consultant was engaged to work with the Principal to enhance the management structure of the School and to develop a Strategic Development Plan. Both the Chair of the Board of Trustees and the Principal expressed a view that this had been a successful process and that the respective responsibilities of the Board of Trustees and Senior Management Team had been re-established. The Strategic Development Plan has been discussed at the Board of Trustees and is expected to be ratified at its December meeting.

12 The School maintains a comprehensive and appropriate range of insurances providing cover for risks arising through employment, commercial legal protection, fidelity guarantee, professional indemnity, medical malpractice and charity trustees. The College also maintains a risk management register, and the Board of Trustees considers the risk management issues arising from items of business at the end of every Board meeting.

13 The financial position of the School is now more soundly based and there is a reasonable expectation this will remain the case. However, the School will need to monitor its financial position closely and, through regular detailed reporting, assure GOsC of its sustainability. The visitors consider that changes in the management structure of the School have addressed earlier concerns, and that there are now clearly delineated responsibilities for governance and management.

Management and governance: The maintenance and enhancement of standards and quality

14 Academic Board has overall responsibility for quality assurance and academic standards. The previous Renewal of recognition report in 2005 noted that the School had set up a Learning and Quality Committee to have responsibility for quality assurance, but this was seen as unsustainable in a small institution and it had been remerged into Academic Board. The School retains a significant number of academic committees. The School has reviewed these with a view to further streamlining, but has concluded there is a

case for retaining the present structure. In relation to the MOst programme, the principal committees include the Programme Committee and the Board of Examiners, both of which report to Academic Board, and the Examinations and Assessments Subcommittee which acts as a working group for the Programme Committee. These are effective in maintaining and enhancing academic and clinical standards.

15 The School has changed its awarding body from the University of Wales to the University of Greenwich. At the time of the visit, all students enrolled on the MOst were enrolled as University of Greenwich students; a small number of students were completing their BSc (Hons) as University of Wales' students. A key advantage for the School was that it had access to the Higher Education Funding Council for England's funding as the University of Greenwich allocated funded student numbers to the School. Since the last Renewal of recognition review the School has experienced two validations of its programmes, culminating in approval of the MOst by the University of Greenwich in January 2009.

16 The School utilises the University of Greenwich procedures for annual programme monitoring and periodic programme review. The School makes effective use of these procedures, producing reflective annual monitoring reports with effective action planning. The implementation of University of Greenwich quality assurance procedures in order to provide the School with effective oversight of the quality and standards of its programmes is regarded as good practice.

17 The MOst programme has two external examiners who are appointed under the regulations of the University of Greenwich. They produce annual external examiner reports using the University's standard pro forma. These reports receive detailed consideration at Programme Committee and are also discussed at Academic Board. Responses to these reports by the School are well documented. The reports for 2008-09 were generally very favourable, confirming the comparability of standards with other similar programmes and that the requirements of GOsC were being satisfied. Both external examiners identified problems with over assessment on the programme, a lack of development of critical thinking, and high failure rates in some modules.

18 Generally, the operation of the external examiner system at the School provides the necessary external verification of academic standards. However, there is an absence of external verification of academic standards on resit assessments. In responding to one 2007-08 external examiner report the School indicated that, because of the rapid turnaround required on resit papers and marks, resit papers are not normally sent to external examiners, and the School believes that the University does not expect external examiners to be present at resit boards. This view was confirmed in meetings with the Senior Management Team and academic staff. However, the visitors' scrutiny of the University's regulations leads them to the view that they require that external examiners should have access to all assessed work. This means that currently, given the high proportion of students who resit in some modules, a substantial element of assessment contributing to the award is not subject to external scrutiny. The visitors regard this as a matter of serious concern and consider that the School must change its procedures relating to resit assessments in order to provide the opportunity for external examiners to be able to moderate this work appropriately. In addition, the School should seek a definitive answer on this issue from the University of Greenwich.

19 The School canvasses student opinion extensively. Students on each year of the programme elect between two and four student class representatives. These representatives attend Programme Committee and Academic Board, and are able to present student views through these forums. Relevant minutes provide evidence of student representatives attending and contributing. There is also a student-run Staff-Student Liaison Committee

which is attended by key members of the School's staff. Module feedback questionnaires are also used. Acknowledging that response rates on these are low, the School has also introduced group feedback sessions held at the beginning of the second, third and fourth years to provide an opportunity for students to reflect on the previous academic year. In discussion, students were very positive about their opportunities to feedback on their experiences. They confirmed that the student voice is heard and the School is responsive to their views. They were able to give examples of changes which have resulted from student feedback and of explanations given when change was not possible. The visitors consider arrangements for canvassing and responding to student feedback to be a strength of the provision.

20 The SED is a well-written and clear statement about the School's provision, and it makes a genuine attempt to be evaluative. As such, it formed an effective starting point for the review process. Students confirmed they had seen copies of the self evaluation, although none had been involved in its writing.

An evaluation of the clinical and academic standards achieved

Intended learning outcomes

21 Curricular 'themes' show the progression in intended learning outcomes through the four years of study, matching the appropriate level descriptors. These reflect *Standard 2000*, and *The framework for higher education qualifications in England, Wales and Northern Ireland*, published by QAA.

22 The programme specification has appropriate, detailed level descriptors. However, the very brief e-syllabus available on the School's intranet does not provide students with easy access to this information. There are plans to place course profiles on the School intranet. Students were not always aware of where intended learning outcomes could be accessed. The level of information available to students is dependent upon the lecturer. Placing the programme specification and associated course specifications, incorporating intended learning outcomes, on the School's intranet would assist students in linking these with their assessments. The very brief e-syllabus is not available off site, where much self-directed learning is expected to take place.

Curricula

23 A strength of the provision is the breadth of its osteopathic curriculum and the desire to retain this breadth in the M_{OST} programme. All aspects of the programme have been mapped against *Standard 2000* and the appropriate level descriptor terminology has been used in the programme specification. Level descriptors have been updated to reflect M-level study. However, indicative texts are often of old, sometimes very old, editions, offering the potential to provide students with incorrect or outdated information.

24 The need to reduce contact hours has been identified in previous reviews and the School has accepted that such a change is overdue. A thorough and systematic curriculum review is planned for the academic year 2009-10 with implementation expected in the academic year 2010-11. The School explained that this review had been delayed because of identified skill gaps within lecturing staff. These are to be addressed. The visitors consider it imperative that the curriculum review be completed and implemented for the start of the academic year 2010-11, when all four years of the M_{OST} will be running.

25 Graduates informed the visitors that the programme prepared them exceptionally well for the osteopathic element of professional life, but was lacking in its coverage of aspects of business management that would offer effective preparation for self-employment.

The visitors concur with this view. The one session provided on business management occurs at the end of the fourth year between two important assessments, so many students choose not to attend. Consideration within the new curriculum should be given to developing students' preparedness for running a business and being self employed.

26 The programme specification links the components of the programme to *Standard 2000* competences: knowledge and understanding, intellectual skills, professional practical skills and transferable key skills. The 2009-10 programme overview also links the 20 modules against *Standard 2000*. Detailed analysis of the curriculum using these documents against the *Standard 2000* Framework of Capabilities, identified the following.

Knowledge and understanding

A Knowledge relevant for the safe and competent practice of osteopathy

This category was present in all modules with an emphasis in the more theoretical, academic modules, such as anatomy in years one and two.

B Concepts and principles of osteopathy

This category is emphasised in the practical and osteopathic modules, particularly in the practical and clinical informing patient analysis and management strategies.

E Communication skills

F Information and data handling skills

J Identification and evaluation of the needs of the patient

K Acquisition and enhancement of the skills of osteopathic palpation

M Conducting osteopathic treatment and patient management

Categories F, J and M are addressed largely in the final two years of study.

Students receive a sound grounding in these areas and students acquire and develop their clinical and professional skills progressively through the four years of study.

Intellectual skills

D Personal and individual skills

This category is emphasised in the third and fourth year in clinical sciences

E Communication skills

F Information and data handling skills

These categories are addressed primarily in the new M-level module, Research Methods and Statistics, although they are present from the first to fourth year. The intended learning outcomes develop progressively through the years, showing development of the student to that of an M-level learner able to self-direct his/her own learning.

Professional practical skills

- C Therapeutic and professional relationships**
- E Communication skills**
- F Information and data handling skills**
- G Intra and interprofessional collaboration and co-operation**
- H Professional identity, accountability, ethics and responsibilities**
- J Identification and evaluation of the needs of the patient**
- K Acquisition and enhancement of the skills of osteopathic palpation**
- L Planning, justifying and monitoring osteopathic treatment interventions**
- M Conducting osteopathic treatment and patient management**
- N Evaluation of post treatment progress and change**
- O Advice and support for the promotion and maintenance of healthy living**
- P Managing an efficient and effective environment for the provision of osteopathic healthcare**

These categories are all identified in the third and fourth-year clinical studies modules.

Transferable key skills

- C Therapeutic and professional relationships**
- D Personal and individual skills**
- E Communication skills**
- F Information and data handling skills**
- H Professional identity, accountability, ethics and responsibilities**
- I Professional self-evaluation and development by means of reflective practice**
- P Managing an efficient and effective environment for the provision of osteopathic healthcare**

These categories are identified across the four years and demonstrate students' increased responsibility for their development in the third and fourth years.

27 The MOst includes alternative awards. The BSc (Hons) degree is subsumed within the MOst and is to be awarded in the event of a student who has insufficient M-level credits associated with the dissertation element, but has accrued a sufficient number of credits to be awarded the current BSc award.

Assessment

28 There are many assessments, with multiple components and sub-components for each module. Intended learning outcomes are often assessed in more than one format, for example, written and practical. The modular course specifications identify key transferable skills, and there is repetition of assessment of these at each level.

29 Assessment occurs at each level, and increases in the demands it places on students through the years of the programme. This is confirmed by external examiners' reports, although these currently do not relate to the year three and four MOst elements, as students have only just commenced year three of the MOst.

30 There is a lack of explicit links between assessment components and intended learning outcomes in course specifications and the assessment indications on the Course Profiles are misleading. There is some evidence of assessment feedback being mapped to intended learning outcomes, but this is not managed in a comprehensive way.

31 Significant care is taken to ensure that each tutor, most of whom are part-time and not necessarily professional teachers, devises assessments which address the intended learning outcomes. A full and appropriate process of internal and external moderation occurs for examination scripts. Marking schemes and model answers are prepared by tutors and used by internal and external examiners.

32 Practical assessment is central to the setting of standards on the programme, and all students are required to pass every summative practical component and sub-component. The School has obtained exemptions from the normal University regulations to continue maintaining these high standards in summative practical examinations. The standards are rigorously applied, and contribute to the high number of students requiring reassessment.

33 Formative assessment is not used extensively, and is identified in less than 10 per cent of course profiles. While feedback may occur in practical classes and in clinic, it is not presented as formative assessment. Over-assessment in general is commented upon in external examiner reports. Student and graduate feedback confirms summative assessment overload with, at times, insufficient time for adequate student preparation. The visitors concur with these views and consider that the timing and number of summative assessments impacts negatively on the student learning experience. Staff regard the high number of resits as the outcome of strategic decisions by students who seek to maximise their overall performance. That students opt for this action may be a reflection of the summative assessment overload.

34 Assessment in clinic is well embedded, closely monitored and provides opportunities for students to demonstrate M-level skills. Regular, continuous formal and informal feedback is provided after each patient intervention.

35 Documentation indicates that personal development portfolios are to move from a peripheral to a more central role in the assessment regime. Few students or staff are aware of them, or their purpose; and their relationship to the published course specifications remains unclear.

Student achievement

36 At the time of the review visit, no students had undertaken assessment in M-level modules in years three and four and, as such, measures of student achievement are based on the BSc (Hons) which is now subsumed within the MOst. The School has an excellent

record for student completion, in spite of the high number of students requiring reassessment.

37 The programme equips students to develop a broad range of osteopathic skills. Proficiency is reached in a number of specialist areas, for example, involuntary mechanism studies and visceral approaches, which are often found in postgraduate study elsewhere.

38 The current continuing professional development model used by GOsC requires osteopaths to be able to identify their own limitations, and plan and monitor remedial activities. While some elements of this are incorporated in the clinical assessment, and students are shown how to use patient progress as a trigger for action, most input appears to come, not from the student, but from external sources, for example tutor feedback and summative assessment. As a result, there is limited development of self-awareness and critical self-analysis.

The quality of the learning opportunities provided

Teaching and learning

39 At the time of the review visit M-level teaching had not commenced. The visitors therefore reviewed current teaching schemes and proposed changes to these rather than teaching sessions. A template provided to lecturers to inform their teaching sessions highlights the relevant level-descriptors. This is particularly helpful, given the large number of part-time teaching staff, in ensuring that teaching is at the appropriate level and is regarded by the visitors as a strength.

40 The need to reduce contact hours has been previously identified and has become more pressing with the MOst programme, which requires that students develop as autonomous learners. One reason cited for the slow progress in reducing lecture contact hours is the reluctance, or inability, of some lecturers to change their lecturing style. This problem has been exacerbated by abandonment of the planned in-house Staff and Education Development Association teacher training programme, due to the illness of the programme leader. The School accepts that staff development is necessary to develop teaching skills in relation to the new level descriptors and, in particular, the need to encourage students' powers of critical evaluation. With this in mind, a new staff development programme is being planned in conjunction with the University of Greenwich. The need for this programme and the planned in-house teaching training days is evident as poor and inconsistent teaching has been identified at an annual staff conference. This need was highlighted during the meeting with clinic and academic staff where there was a difference of opinion on the nature of self-directed learning. The added benefit of the planned in-house training days is that curriculum review and any necessary changes will be firmly based on modern teaching practice.

41 The availability of continuous, formal and informal feedback in the clinic is a strength. Formal feedback through the six-weekly assessments is greatly appreciated by the students and the informal feedback following every patient interaction is effective in reinforcing student learning. That clinic tutors are able to respond to individual student needs, offering one-to-one support or producing, at short notice, topics of interest for the regular sessional tutorial sessions, is a strength and it is highly effective in underpinning student learning.

Student progression

42 The School claims to review its admissions policy regularly and to ensure that this is aligned with the *Code of practice for the assurance of academic quality and standards in*

higher education, Section 10: Admissions to higher education, published by QAA. It operates a complaints procedure in relation to its application processes. Students applying with GCE A-Levels are required to have a pass in biology and at least one other science related subject. Other science and health related entry qualifications are also accepted. The School offers a Summer Science Course for non-science-related GCE A-Level applicants. This is a one month bridging programme covering aspects of biology, chemistry and physics. It incorporates some practical work and also provides an opportunity to observe in the School's teaching clinic. For 2007-08 and 2008-09, 25 per cent and 40 per cent of the intake respectively entered from the Summer Science Course. The SED states that the School is seeking approval from the University for its Summer Science Course, and the visitors were informed that this has now been granted. Mature students without the normal entry qualifications may also be considered for entry.

43 The School recruits a small number of international, non-European Union, students each year and plans to increase this to compensate for a reduction in HEFCE-funded places through the University of Greenwich. The School Prospectus states that fluency in written and spoken English is expected, but the School does not specify that a formal qualification in English should be held. All students are normally interviewed face-to-face or by telephone, and an evaluation of English language competence is made as part of this. If there is a doubt as to their competence, the School requires a formal English qualification, equivalent to an International English Language Testing score of 6.5.

44 The School promotes the programme through a paper-based prospectus and on its website. Neither of these sources gives any indication of the RQ status of the MOst. Students met confirmed that the information they had been given prior to joining their programme had been accurate. Those who had attended taster sessions offered by the School had found them particularly helpful, and all students confirmed they had been interviewed. First-year students were fully aware of the requirements of the MOst programme from the outset. Students in later years who had entered the School to take the BSc Osteopathy, had been told they were required to transfer to the MOst. However, students saw the benefit of gaining a master's level qualification and they understood that, should they not achieve the required standard in the M-level dissertation, they would be able to have their work re-assessed for the BSc award. However, senior School staff stated that while this was their recommendation to the University of Greenwich, it had not yet been confirmed. The School needs to obtain a definitive decision from the University on whether students will be allowed to have a dissertation originally submitted for the MOst reassessed for the BSc award without further work.

45 From the 2009-10 academic year induction has been extended from one day to a full week's programme. This is in response to students reporting information overload and staff considering that students were not acquiring sufficient information on study skills. The new induction programme provides an appropriate balance of study skills sessions and introductions to the principal areas of study and has been well received by students.

46 The SED provided little information about academic and pastoral support. Students receive a hardcopy Student Handbook which provides a good range of information about the School and its facilities, the programme and its assessment requirements, as well as providing useful contact names. The School monitors student attendance and students are expected to achieve at least 80 per cent of possible attendances. There is effective monitoring, through tutor meetings, of students with poor attendance records, as they are regarded as potentially at risk. At assessment points, students identified as being at risk are seen by the Vice-Principal (Academic) who also acts as the Programme Leader, or by the Academic Registrar. The School is seeking to extend this so that all students will have a formal progression meeting after each assessment point, but this has significant staff resource implications and there is no timetable for its implementation.

47 The relevant module or clinic tutor is the students' initial contact for academic support. Students are aware that part-time academic staff are not as accessible as full-time staff. They identified the Academic Registrar as an important source of academic advice, directly or by referring them to other sources of help. Third and fourth-year students have a clinic tutor who supports learning within a small group of students. Additionally, practical support is available in the clinic from 0800 for students who need help with technique. Some students referred to a mentoring scheme, although many students are unaware of this facility. In discussion with senior staff, the visitors were advised that the mentoring scheme is primarily reactive, with students needing to seek help, but it was sometimes proactive, with students being advised they should request a mentor. All students are aware of a student buddy system whereby students in later years help new students settle into the School and the programme. They regard it as a helpful form of support that worked for most students. Pastoral support can be sought from individual tutors, but most students consult the Welfare Officer or Academic Registrar who they regard as most supportive. The School does not operate a personal tutor system. This has been tried but had not worked well as the vast majority of academic staff are employed part-time. Overall, students had high regard for the effectiveness of both the academic and pastoral support they receive at the School. The visitors concur and consider the School's range of formal and informal methods of providing academic and pastoral support to its students to be a strength.

48 Careers advice and guidance is provided formally in the final year of the programme, although students can seek advice at an earlier stage. Students regard the clinic as a key source of professional development, and informal advice and guidance is provided by clinic tutors who are also practitioners. However, current and former students believe that more formal and earlier advice and guidance on careers and the profession, would be helpful in preparing them for, and easing their transition to, employment.

Learning resources

49 The programme is delivered on two sites: Boxley House, where the majority of class-based learning occurs; and Tonbridge Road, where the clinic is sited. Both sites have benefited from recent refurbishments, which are continuing at Tonbridge Road.

50 There are over 100 academic and clinical staff contributing to the programme, 97 per cent of whom are engaged part-time, with qualifications including PhDs and teaching qualifications. Recent graduates are employed as teaching assistants. There is a need for increased awareness among tutors of the demands of teaching at M-level and the increased emphasis this places on facilitating and supporting students' independent learning. It is essential that all academic and clinical staff are given opportunities to update their teaching skills in order to provide effective support for student learning when, from the 2010-11 academic year, all four years of the MOst are running. A planned staff development programme in conjunction with the University is not yet operational.

51 There is an induction programme for new staff, but according to staff it is not always provided. Peer review of teaching has been introduced, and is welcomed by some staff. In the coming year the plan is for academic and clinic staff to review each other, having been reviewed separately last year. There is currently no systematic training of staff for this role. Dissemination of examples of good practice for wider application is limited, due to the confidential nature of the process. There is a team of well qualified and experienced dissertation supervisors. Less experienced supervisors are receiving training in preparation for their role in supporting M-level research.

52 The clinic has 23 treatment rooms, each equipped with a hydraulic plinth. While many of the upstairs rooms are not accessible to the infirm, there are accessible rooms on the ground floor. The uppermost floors in the original building are in the process of being

refurbished for student use. The clinic is staffed by a range of osteopathic staff, providing experience and a range of approaches to support the student experience. Good communication between clinic tutors helps to support and guide student development.

53 The well-established nature of the clinic, along with recent marketing activities, has enabled students to be provided with a sufficient number of patient encounters, in spite of the economic downturn and local competition. While some students would prefer exposure to a wider variety of patients, there are established clinics for obstetrics, children, and sports injuries. The acquisition and use of a clinic software package for patient booking, and account keeping to facilitate practice audit has been delayed, but close monitoring of student activity ensures that the benchmark statement on student exposure to clinical experience is met. The clinic site has full, although intermittent, Wi-Fi access. There are four computers for student use; in addition they can access the internet from their own laptops. There is no library facility at the site, although there are a few texts in the student area and in the clinic office.

54 The library at Boxley is well managed and contains relevant texts. It is open from 0830 to 1930 hours weekdays during term-time and 1000 to 1400 hours on some Saturdays. Opening hours outside term-time are 0900 to 1700 hours. Its stock requires augmentation if it is to support M-level work effectively. The adjacent computer room houses 10 new computers with flat screens, as well as two TV/video players. The cafeteria accommodates five new computers. In all, these facilities represent a significant improvement on the previous provision. The site still suffers from being 'at the end of the line' in terms of broadband speed, and this limits the provision of Wi-Fi. Students speak highly of the University of Greenwich library facilities at the Medway Campus, although for many students its location is not convenient.

55 The School is developing its own bespoke intranet. This is at an early stage and there is relatively little currently available to students. However, students have access not only to the University of Greenwich extranet, but also extensive online electronic resources through the ATHENS portal. This support for coursework and research activities is appreciated by students.

56 The classrooms are sufficient in size to accommodate half a year group, with one large classroom which can accommodate over 60. There are sufficient plinths for practical classes, which are used as desks in lectures. Classrooms are equipped with visualisers and ceiling mounted data projectors; tutors usually bring their own laptops. A classroom in the clinic is used primarily for third and fourth-year students so they do not need to change site half-way through a day. The research laboratory is staffed, and contains some sophisticated equipment including a Kistler Force Platform and EMG equipment for student use. The move towards M-level student provision expressly anticipates the use of greater facilities for independent student learning. However, at Boxley there is a lack of quiet space for individual and small group study.

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