



# **GOsC Education Quality Assurance**

## **Renewal of Recognised Qualification Report**

This report provides a summary of findings of the provider's QA visit. The report will form the basis for the approval of the recommended outcome to PEC.

Please refer to section 5.9 of the QA handbook for reference.

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**Provider:** College of Osteopaths

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**Date of visit:** 21–23 May 2021

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**Course reviewed:** Staffordshire University:  
Bachelor of Osteopathy (B.Ost part-time)  
Masters of Osteopathy (M.Ost part-time)  
University of Derby:  
Bachelor of Osteopathy (B.Ost part-time)

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**Visitors:** Ceira Kinch  
Bob Davies  
Marvelle Brown

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### **Outcome of the review**

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**Recommendation to PEC:**

☐ Recommended to renew recognised qualification status

☒ Recommended to renew recognised qualification status subject to conditions being met

☐ Recommended to withdraw recognised qualification status

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**Date of review approval:**

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**Date of expiry (if applicable):**

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**Date of next review:**

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### Abbreviations

BoG	Board of governors
B.Ost	Bachelor of Osteopathy
CCA	Clinical Competence Assessment
CoO	College of Osteopaths
CPD	Continuous Professional Development
DBS	Disclosure and barring service
DSA	Disabled students' allowance
ESO	Education support officer
FHEQ	Framework for higher education qualifications
FSC	Finance sub-committee
FtP	Fitness to practise
GOPRE	Guidance for osteopathic pre-registration education
GOsC	General Osteopathic Council
LOs	Learning objectives
MMT	Middle management team
M.Ost	Masters of Osteopathy
OfS	Office for students
OPS	Osteopathic practice standards
PEC	Policy and education committee
PER	Programme evaluation report
PDR	Personal development reviews
PPP	Personal and professional portfolio
PSRB	Professional and statutory regulatory body
QA	Quality assurance
QRB	Quality review board
RQ	Recognised Qualification
SEEC	Southern England Consortium for Credit Accumulation and Transfer
SMT	Senior management team
SPP	Student protection plan
SSLM	Staff student liaison meetings
SU	Staffordshire University
UoD	University of Derby



WG	Working group
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### Overall aims of the course

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The aims for both of the CoO programmes are provided below.

Staffordshire University programme – B.Ost/M.Ost (Integrated Masters programme):

- To provide students with the knowledge, skills and experience to prepare to work as an osteopath.
- To provide an environment for effective learning which will encourage and motivate students to learn, and promotes autonomous learning.
- To enable students to develop lifelong learning and research skills.
- To enable students to develop as reflective practitioners within the field of osteopathy.
- To enable students to develop an awareness and understanding of the wider political, social and economic context of osteopathy.
- To enable students to develop criticality, professional judgement and autonomy of action.
- To provide students with the business skills required to run a successful osteopathic practice.

University of Derby programme – B.Ost (Hons):

- To provide an opportunity for learners to gain a qualification at Honours Degree level in osteopathy that will meet the demands of the OPS.
  - To provide learners with the knowledge, skills and experience to prepare them to work as an osteopath.
  - To provide an environment for effective learning which will encourage and motivate learners to learn, and will promote autonomous learning.
  - To enable learners to develop lifelong learning and research skills.
  - To develop learners as reflective practitioners within the field of osteopathy.
  - To enable learners to develop an awareness and understanding of the wider political, social and economic context of osteopathy.
  - To enable learners to develop criticality, professional judgement and autonomy of action.
  - To provide learners with the business skills required to run a successful osteopathic practice.
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### Overall Summary

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The faculty, students and patients were all very forthcoming with useful information to support with the visit process. The SMT were very professional and supportive throughout the process and were very accommodating with additional requests during the visit.

Additionally, the teaching and clinical team were very motivated and have made efforts to improve student experiences across the campuses.

#### Strengths and good practice

The self-initiation of a financial audit to ensure policies, procedures and processes are appropriate to support effective governance and management. [1.2]

The self-initiation of a governance and management audit to ensure policies, procedures and processes are appropriate to support effective governance and management. [1.4]

The self-initiated patient focus group meetings to enhance the CoO's patient/practitioner partnership. [1.6]

The CoO has maintained relationships with Middlesex University, a previous academic partnership. This allows for continued support in a 'critical friend' capacity outside of the current partner relationships, and expands the specific higher education and allied health profession expertise available to the CoO. [3.1]

Student education outside of the classroom setting links in future employment opportunities through the osteopath observation scheme. The CoO have identified additional complementary healthcare skills amongst their student population, and provided a platform during the recent pandemic in the delivery of wellbeing sessions for the students to volunteer and showcase their skills as an adjunct to osteopathy. [3.2]

Risk assessments have been conducted in relation to the clinical environment and the clinical education setting, and are available to all stakeholders on the CoO website. Clinical appointment adaptations have included telephone consultations and COVID-19 screening questions as part of the patient consultation process prior to face-to-face consultation, reflecting Public Health England and other relevant professional requirements. [3.2]

A proportion of the faculty work within the classroom and clinical settings. This helps students to consolidate learning from the theoretical into the practical environment with a continuity of learning. [3.3]

CoO patient cases are anonymised and used in theoretical learning and clinical case-based study throughout the programme delivery to give students the opportunity to relate their learning to the professional encounter. [3.3]

Follow-up monitoring of previous conditions and areas for development from the 2016 RQ review. [4.1]

Posters visibly available to signpost patients to provide feedback, and also students actively encourage patients to give feedback as part of the clinical encounter. [4.2]

Practical demonstrations, adapted for COVID-19 measures, allow for all students to have consistent demonstrations from the lead lecturer, and are then supported with practical skills development with the 1:10 teaching support ratios. [4.3]

The use of in-house practical skills videos has been developed as supporting materials for theoretical learning, practical skills development and revision resources for students. In addition, an external online learning platform to support technical skills learning has been purchased for level two and three; students have to purchase level one at an additional cost. [4.3]

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Many of the faculty are also clinical tutors, which offers an informal opportunity to ensure consolidation of learning between the classroom and clinical environments. [4.3]

A student on the last cohort of the SU programme, currently in their second year, has independently explored the opportunity to become the allied health profession student representative for the school of health at SU. The student has been appointed in this role and aims to raise the profile of the osteopathy course and students. [4.4]

Review of assessment processes as part of student stakeholder feedback. The COVID-19 pandemic has given staff the opportunity to adapt and develop alternate assessments, and for students to experience this and provide feedback. [5.1]

Clear and accessible signposting of individual course academic regulations for each partner university. [5.2]

Non-osteopathic lecturers undertake primary research and have been involved with GOsC research, increasing their knowledge of osteopathy. [7.2]

Students with particular skills providing peer learning on complementary therapies. [8.2]

### **Areas for development and recommendations**

#### **Areas for development:**

To maximise the patient/practitioner partnership, hold patient/practitioner focus groups on a regular and consistent basis. [1.6]

For consistency and comprehensive educational standard alignment of programmes, reference the FHEQ (2018) within programme specifications. [2.1]

To provide complete and comprehensive accessibility of all key programme documentation, enable access to the programme specifications, and show important information in clearer locations on Blackboard. [2.2]

Incorporate more inter-professional learning opportunities for students in the curriculum. [3.1]

To allow all students an opportunity to participate in wider healthcare settings, expand the provision for osteopathy in specialist populations at both clinical sites. [3.2]

To help identify and raise any differences in the student journey, combine the SSLM meetings with each clinical and education site. [3.2]

Expand the curriculum review process to include patient stakeholders and reflect current external factors for osteopathic education delivery. Consider as part of the curriculum review process the updated GOPRE and Standards for education and training, which are due for implementation in September 2022. [3.3]

Formalise the educational support to faculty and lecturers with the opportunity to complete educational specific courses such as a Postgraduate Certificate in Education. [3.3]

The use of alternative methods of signposting students to actions that have developed because of their direct feedback. [4.1]

Embed patient involvement into academic process, including course development activities and governance processes. [4.2]

Raise awareness of resulting actions from patient feedback. [4.2]

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Consideration of PDRs on an annual rather than biennial basis to enhance the staff development processes. [4.3]

Consider collating feedback on the use of Zoom education to ensure it is fit for purpose. [4.3]

To support in identifying students who are struggling, and to monitor engagement with learning, monitor student engagement at module level with online learning. [6.1]

To support with student growth and development, adapt the PPP to accommodate student life experiences. [6.1]

Consider documenting outcomes from progression meetings with students to support continuation and monitoring. [6.2]

To embed actions within the CoO, identify clear reporting mechanisms for the equality and diversity WG. [7.1]

Improve communication with students at SU regarding continuance with the programme at SU. [7.2]

Consider training for students on telehealth. This would be a supplement to the document on the process of setting up a telehealth consultation. [8.1]

### **Recommendations:**

Consider reviewing the teach out agreement to ensure documentary accuracy and that all details contained within it are up to date and consistent with the period in question. [1.3]

In preparation for the start of the academic year 2021-2022, when the new governance and management structure becomes operational, it is recommended that the roles and responsibilities of all bodies and groups that constitute the new governance and management structure are placed in writing and made accessible to all stakeholders. [1.4]

In order to maximise the QA processes and to integrate such processes into the CoO's new and updated governance and management changes operating from September 2021, it is recommended that the quality audit is undertaken as soon as possible. [1.5]

Consider appointing an external examiner for the start of academic year 2021-2022 that has current professional experience and is on the GOsC register. Consideration could be made to appointing a subject specific external examiner either as a replacement or as support alongside the currently appointed UoD external examiner, in line with UoD academic and quality regulations. [3.3]

Consider developing a support structure for students with specific academic learning requirements, to enable students with academic challenges to be successful in their studies. [6.1]

To provide clarity to prospective students who have a disability, it is recommended that the application form is adapted to have section on disability. [7.1]

### **Conditions**

To ensure that the delivery and management of the CoO programmes are not compromised, and that the delivery of the OPS are not compromised, the actions from the governance and management audit should be monitored and implemented in line with the agreed timeframes. An update should be provided to the PEC in October 2021, followed by monitoring at the March 2022 PEC. Ongoing monitoring of implementation should be through the annual reporting process. [1.4]



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To ensure there is clear direction for the CoO's ambitions in developing osteopathic education, a 2021-2026 strategic plan must be produced for the beginning of the 2021-2022 academic year. The plan should be agreed by the BoG and subsequently disseminated to all stakeholders by January 2022. An update should be provided to the PEC in October 2021, followed by monitoring at the March 2022 PEC. Ongoing monitoring of implementation should be through the annual reporting process. [1.4]

Minimum standards of clinical education, such as the inclusion of patient numbers and clinical hours in student logs, relating to the attainment of the OPS should be monitored on a regular basis. An update should be provided to the PEC in October 2021, followed by monitoring at the March 2022 PEC. Ongoing monitoring of implementation should be through the annual reporting process. [4.3]

To ensure that the student voice in the maintenance of academic standards is realised, and that there is ongoing evaluation and monitoring of any risks to the OPS, student feedback should be monitored from SSLMs and the implementation and monitoring of actions arising demonstrated. An update should be provided to the PEC in October 2021, followed by monitoring at the March 2022 PEC. Ongoing monitoring of implementation should be through the annual reporting process. [6.2]

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## Assessment of review criteria

### 1. Governance and management

#### Commercial and financial management

**1.1 an understanding of current commercial and financial issues and how these are managed** ☒ **MET**

☐ **NOT MET**

#### Findings and evidence to support this

The CoO is established as a charitable trust whose management is overseen by the BoG, who meet four times per year. As well as considering and making decisions relating to the academic, resource and QA of the programmes, the BoG scrutinises all financial affairs of the CoO. It is directed by well-defined terms of reference that provide explicit guidance for the oversight of all CoO matters, including monetary.

The BoG is made up of eight governors, with each governor having specific roles and responsibilities at the CoO. One governor in particular has extensive financial experience. In general, the BoG's collective experience in professional, osteopathic practice, wider clinical practice in health and social care, legal and business considerations ensure effective management of all CoO matters, including financial.

The BoG is supported with its financial responsibilities by the CoO's FSC. This committee meets four times per year and reports to the BoG on all issues relating to financial planning and accounting. Meeting minutes of the BoG and FSC confirm the regularity of the meetings, considerations of broad financial matters and actions undertaken relating to monetary concerns.

#### Strengths and good practice

None identified.

#### Areas for development and recommendations

None identified.

#### Conditions

None identified.

### 1.2 the ability to maintain financial stability

☒ **MET**

☐ **NOT MET**

#### Findings and evidence to support this

The CoO recently initiated three audits to ensure its policies and operating practices were appropriate to support effective governance and management. In order to ensure financial arrangements were operationally robust and sustainable, one of the audits assessed the CoO's monetary policies, procedures and processes.



The audit highlighted no areas of concern, but there were some recommendations. The governance and management action plan highlight that these recommendations are at an advanced stage of being addressed.

The CoO's five-year business plan (2021-2026) has recently been approved by the BoG. It includes clear plans relating to clinic marketing, risk and monitoring. It also has a brief section on financial appraisal and concludes that CoO finances are sufficient to cover any deficit as a consequence of COVID-19. The CoO confirmed that key stakeholders had input into and contributed to the development of its business plan.

The CoO produces annual and independently audited financial statements. The statements for years 2019 and 2020 were scrutinised and have been verified as authentic and highlight stable finances.

### Strengths and good practice

The self-initiation of a financial audit to ensure policies, procedures and processes are appropriate to support effective governance and management.

### Areas for development and recommendations

None identified.

### Conditions

None identified.

### Risk management

**1.3 the use of risk management processes to ensure programme delivery can continue if issues arise**

☒ MET

☐ NOT MET

### Findings and evidence to support this

The CoO has a comprehensive risk management policy that it utilises for both the SU and UoD programmes as well as its two osteopathy clinics. The policy emphasises an approach that is open and transparent, and risk items appear as standard topics on the agenda of all management meetings.

The CoO categorises risks under the broad headings of people, resources, health and safety, regulations and compliance, strategic plan, finance and engagement and external agencies. Risks are identified on a continual basis through a 'live' risk register, and a matrix is used to categorise a risk as being high, medium or low. The governance and management structure of the CoO supports appropriate reporting and escalation of any identified risk.

A specific risk-based policy is in place for safeguarding students. For students on the UoD B.Ost programme the CoO has a specific SPP established. For students enrolled on the SU B.Ost/M.Ost programme, they are covered by SU's SPP and a 'teach out' agreement until this programme concludes. The teach out agreement identifies that the SU programme is scheduled to conclude in 2028, which accommodates students currently studying on the SU programme and any student-initiated study break. The teach out agreement provides protection and assurance for SU students until that date, although the agreement itself needs some minor adjustment to ensure all details contained within it are up to date and consistent with the period in question.



The CoO has two FtP policies embedded within its overall risk management approach. One has been developed specifically for the UoD B.Ost programme, whilst the SU B.Ost/M.Ost programme is supported by general FtP regulations operated by the university. Both policies operate throughout the duration of each programme thus ensuring the reinforcement of robust practice standards and patient safety. Prospective new students for the UoD programme must sign and submit a self-declaration and DBS form on application to the programme, and students on both programmes complete a FtP form at the beginning of each year of study. This form confirms an understanding that changes to a student's health or status in relation to criminal convictions must be reported to the CoO.

Although the BoG has overall responsibility for the management of risks, the SMT ensures that actions in relation to risks are undertaken and appropriately realised. The CoO produces a risk management report each year, which details all identified risks, actions that were undertaken to mitigate such risks and those identified for further review by the CoO's governance and management teams. The risk report for 2020 confirmed that this approach was in place.

### Strengths and good practice

None identified.

### Areas for development and recommendations

Consider reviewing the teach out agreement to ensure documentary accuracy and that all details contained within it are up to date and consistent with the period in question. [recommendation]

### Conditions

None identified.

## Policies and processes

**1.4 an understanding of culture and practices with the provider that assure a responsive and reflective management of the overall programme**

☐ MET

☒ NOT MET

### Findings and evidence to support this

The SU B.Ost/M.Ost programmes are integrated and delivered as a franchised provision, and the UoD B.Ost (Hons) programme is validated by the UoD. The obligations of the collaborative agreements with both validating universities are clearly defined in detailed documentation that have been authorised by all appropriate parties. To promote effective communication between the CoO and the universities, there are liaison meetings in place.

The overall governance and management structure across both programmes provide for effective and clear communication pathways for the CoO and its BoG, the SMT and MMT) sub-committees and WGs. Documentation provided clearly details the responsibilities of these groups and their representatives, and meetings during the visit further re-enforced the CoO's clear communication routes.

One of the CoO's three self-initiated audits involved a review of governance and management structures. That audit provided a useful basis for the CoO to review its governance and management practices and how to enhance and develop them. A number of recommendations were made as a result of that audit which are captured in the governance and management action plan and governance management positional



statement. These documents highlight that a number of the recommendations appear to have been addressed or are soon to be, however, it is not clear which recommendations need to be completed urgently.

One significant recommendation arising from the audit included a new governance and management structure; the BoG confirmed that the structure has now been approved. However, when reviewing the accompanying documentation that outlined responsibilities of the new governance and management structure, details relating to the governance sub-committee, the new curriculum standards committee, the infrastructure WG, the student engagement WG and the equality and diversity WG were yet to be determined. Although confirmation was provided that these have been agreed, they were not identified in the documentation that outlines the groups' respective responsibilities.

The CoO has an established five-year strategic plan which runs from 2016-2021. However, although preparations for the 2021-2026 strategic plan have been initiated, it was confirmed through meeting with the SMT that these are in an early draft form only. Given the CoO recognises the requirement of its strategic plan as a priority, and in order to support future academic and business development, it is important that a clear framework to guide the operation of such development is available.

### Strengths and good practice

The self-initiation of a governance and management audit to ensure policies, procedures and processes are appropriate to support effective governance and management.

### Areas for development and recommendations

In preparation for the start of the academic year 2021-2022, when the new governance and management structure becomes operational, it is recommended that the roles and responsibilities of all bodies and groups that constitute the new governance and management structure are placed in writing and made accessible to all stakeholders. [recommendation]

### Conditions

To ensure that the delivery and management of the CoO programmes are not compromised, and that the delivery of the OPS are not compromised, the actions from the governance and management audit should be monitored and implemented in line with the agreed timeframes. An update should be provided to the PEC in October 2021, followed by monitoring at the March 2022 PEC. Ongoing monitoring of implementation should be through the annual reporting process.

To ensure there is clear direction for the CoO's ambitions in developing osteopathic education, a 2021-2026 strategic plan must be produced for the beginning of the 2021-2022 academic year. The plan should be agreed by the BoG and subsequently disseminated to all stakeholders by January 2022. An update should be provided to the PEC in October 2021, followed by monitoring at the March 2022 PEC. Ongoing monitoring of implementation should be through the annual reporting process.

### Management Structure

1.5 the ability to demonstrate delivery of the OPS through an appropriate governance structure

☒ MET

☐ NOT MET

### Findings and evidence to support this



The QRB provides an ongoing review of the CoO's provisions and is the main body for ensuring agreed actions for the practice standards of its programmes are undertaken and realised. Meeting annually, the QRB is comprised of members from the BoG, the SMT, the head of clinic education and ESOs. Each meeting has a standardised agenda that includes items that scrutinise the CoO's annual monitoring reports, the National Student Survey and actions relating to staff, student, and external input. This is evidenced through the 2019 and 2020 QRB minutes, QRB 2020 action plans and through staff meetings during the visit, confirming that such procedures are in place.

Both SU's and the UoD's continual monitoring processes enables an effective student feedback mechanism on teaching and learning, and clinic experience. The student feedback for programme modules are analysed by module leaders. The module leaders' reports form the basis for PER, which is completed by the programme leaders, and provides the basis for ongoing academic QA.

External examiners play an effective part in the management of academic standards, and feedback from external examiners indicates that academic standards are fair and consistent.

A quality audit was one of the three audits that the CoO had initiated to review its procedures and processes in place relating to its QA mechanisms. However, due to the effects of COVID-19 on the working environment of the identified reviewer, this has not occurred.

### Strengths and good practice

None identified.

### Areas for development and recommendations

In order to maximise the QA processes and to integrate such processes into the CoO's new and updated governance and management changes operating from September 2021, it is recommended that the quality audit is undertaken as soon as possible. [recommendation]

### Conditions

None identified.

### 1.6 focus on paramount importance of patient safety and working in partnership with patients

☒ MET

☐ NOT MET

### Findings and evidence to support this

Patient safety is maintained by the CoO's philosophy towards patient care and embedded within governance and management policies, regulations and practices. This was evidenced in the College's FtP policies and its policy relating to patient clinical consent to treatment.

The CoO's ability to respond to potential risks relating to patient care has recently been highlighted as a result of COVID-19. During that period, it was able to initiate a number of measures and practices that ensured the continued delivery of osteopathic healthcare within the CoO's two osteopathy clinics without compromising patient safety. Observations of patient treatment and clinical procedures confirmed adherence to such practices.



Patients are encouraged to provide verbal and written feedback (via email) to the CoO on their healthcare experiences during their consultation time in clinic. It was confirmed with patients, during the observed patient consultations, that these procedures are operating and working well. Patient feedback confirmed that the CoO listens to patient suggestions and, where appropriate, these are actioned. Patient feedback is also encouraged through signage appropriately displayed within the osteopathy clinics, which was seen through a tour of the clinic facilities and confirmed in a meeting.

In order to increase and maximise the patient/practitioner partnership, the CoO has recently initiated patient focus group meetings. One meeting has recently taken place, with a further two planned but not yet organised.

### Strengths and good practice

The self-initiated patient focus group meetings to enhance the CoO's patient/practitioner partnership.

### Areas for development and recommendations

To maximise the patient/practitioner partnership, hold patient/practitioner focus groups on a regular and consistent basis. [area for development]

### Conditions

None identified.

## 2. Course aims and outcomes

### Rounded development

**2.1 the ability to demonstrate a learning path with clear and incremental progression**

☒ **MET**

☐ **NOT MET**

### Findings and evidence to support this

The CoO's mission is "to produce autonomous and reflective practitioners who are capable of contributing to the healthcare needs of an ever-changing population as well as contributing to the shape of future health care provision". Each of the CoO's programmes place the student "at the centre of the learning process", encourage autonomy and provides those enrolled "with a cohesive and incremental learning path that ultimately leads to registration with the GOsC".

The UoD programme handbook and its programme specification reference an alignment of level four, five and six descriptors for the programme with the QA benchmark statement for osteopathy (2015). The SU programme handbook also references an external alignment to the United Kingdom quality code for higher education (FHEQ, 2018) but the programme specifications do not. However, each of the programme aims and outcomes are aligned to the OPS (2019) and the GOPRE (2015).

The CoO's overall and key course documentation (the programme handbook, programme specification, module descriptors and programme maps) provide clear learning and progression pathways. Additionally, the aims and LOs for each programme provide a benchmark for curricula design and underpin learning and assessment strategies throughout the duration of each programme. The programme aims and LOs for both the SU and UoD B.Ost (Hons) programmes are the same, although the UoD B.Ost (Hons) has an additional



aim that relates to the opportunity to gain an osteopathy qualification commensurate with OPS requirements. The M.Ost programme of study has three additional LOs that meet the level seven FHEQ educational pathway.

### Strengths and good practice

None identified.

### Areas for development and recommendations

For consistency and comprehensive educational standard alignment of programmes, reference the FHEQ (2018) within programme specifications. [area for development]

### Conditions

None identified.

### Structured approach

2.2 the use of a transparent and clear course structure, that supports the course aims

☒ MET

☐ NOT MET

### Findings and evidence to support this

Due to the SU B.Ost/M.Ost programme concluding, the CoO now only promote and advertise the UoD B.Ost programme on their website and at recruitment open days. The aims and LOs for students admitted onto the UoD B.Ost programme are re-enforced at recruitment open days and then within relevant documentation. All key documentation is available online via the CoO's Blackboard.

The aims and LOs for each programme are available to all CoO staff through the same, aforementioned documentation and Blackboard. During meetings with student representatives, students confirmed their awareness and understanding of the aims and LOs of the programme and their accessibility via programme documentation and Blackboard.

The CoO has clear and comprehensive procedures in place in relation to raising a cause for concern. They are used for raising a concern regarding a student or a member of staff during their time on any programme or whilst in the CoO's two clinics.

The procedures contribute to an ongoing assurance relating to the maintenance of high standards of professionalism, quality of practice and patient safety; staff and students confirmed they are aware of these procedures. Patients informed the visitors that feedback on clinic experience is continually requested, and information on raising a concern is displayed on signage in the CoO's two clinics.

### Strengths and good practice

None identified.

### Areas for development and recommendations

To provide complete and comprehensive accessibility of all key programme documentation, enable access to the programme specifications, and show important information in clearer locations on Blackboard. [area for development]

### Conditions





None identified.

### 3. Curricula

#### Cohesive framework of content

**3.1 the ability to identify a holistic programme of content that allows graduates to meet the OPS** ☒ **MET**

☐ **NOT MET**

#### Findings and evidence to support this

Although initial evidence of GOPRE mapping to the course content for SU and UoD was insufficient, this was rectified upon request and shared prior to the visit. This information must be kept up to date and be reflected in any course changes made in a timely manner, and the information disseminated to relevant stakeholders.

The SU programme's last full cohort is due for graduation in Summer 2023. Although the programme is currently in a teach out phase, minor changes to the curriculum are permitted during this period, in line with the SU academic and quality regulations for a programme in the teach out phase.

After the delay for OfS registration, the UoD programme commenced teaching delivery in January 2021. The UoD curriculum development involved CoO faculty, GOsC, external higher education experts and students in the process, using a range of activities including surveys. The initial consultation highlighted a desire amongst students for a condensed four-year part-time B.Ost programme, reflecting the student demographics and desire for completion of studies and gaining employment as soon as possible.

The module learning outcomes for both the UoD and SU curriculums enable students to meet the OPS. Following an extended period of closure until March 2021, the CoO's clinics are now open for patients and student practitioners. Priority for patients is given to final year students for them to fulfil the PSRB requirements. Other student cohorts are supportive of these measures to allow their colleagues to complete graduation, which was voiced in student meetings.

There are a range of osteopathic and non-osteopathic modules that reflect and support the student journey in their ongoing professional development, as evidenced in the programme specification. The professional portfolio is a formal record of reflective practice providing an opportunity for critical incident analysis. The clinic audit tools reflect the ongoing GOsC CPD requirements.

#### Strengths and good practice

The CoO has maintained relationships with Middlesex University, a previous academic partnership. This allows for continued support in a 'critical friend' capacity outside of the current partner relationships and expands the specific higher education and allied health profession expertise available to the CoO.

#### Areas for development and recommendations

Incorporate more inter-professional learning opportunities for students in the curriculum. [area for development]

#### Conditions

None identified.





### 3.2 the use of non-academic/extra curricula opportunities

☒ MET

☐ NOT MET

#### Findings and evidence to support this

Through meetings with faculty, management and students it was identified that CoO offer a wide range of extra-curricular activities to support all cohorts of students in their journey towards becoming an osteopathic graduate.

The CoO has two clinics, one based in Stoke-on-Trent and the other in Boreham Wood. Student meetings identified that there is consistency in tutorial delivery across both clinical sites, however on occasion, the students at the Boreham Wood clinic have received additional opportunities. The dedicated clinic websites advertise osteopathy and cranial osteopathy appointments to the general population at both sites. In addition, the Stoke-on-Trent clinic also offers a foot and paediatric clinic once per week. Students who are unable to attend the Stoke-on-Trent clinic will not have access to this specialist clinic setting. The limited time opportunities of the cranial osteopathy clinics may also be a barrier to some students learning as they balance their working and personal lives around their part-time study opportunities.

#### Strengths and good practice

Student education outside of the classroom setting links in future employment opportunities through the osteopath observation scheme. The CoO have identified additional complementary healthcare skills amongst their student population, and provided a platform during the recent pandemic in the delivery of wellbeing sessions for the students to volunteer and showcase their skills as an adjunct to osteopathy.

Risk assessments have been conducted in relation to the clinical environment and the clinical education setting, and are available to all stakeholders on the CoO website. Clinical appointment adaptations have included telephone consultations and COVID-19 screening questions as part of the patient consultation process prior to face-to-face consultation, reflecting Public Health England and other relevant professional requirements.

#### Areas for development and recommendations

To allow all students an opportunity to participate in wider healthcare settings, expand the provision for osteopathy in specialist populations at both clinical sites. [area for development]

To help identify and raise any differences in the student journey, combine the SSLM meetings with each clinical and education site. [area for development]

#### Conditions

None identified.

### 3.3 the integration of educational offer

☒ MET

☐ NOT MET



### Findings and evidence to support this

The QA of the curriculum is monitored as part of the academic quality cycles and annual monitoring processes. This is supported by delivering the breadth of the GOPRE requirements across both the SU and UoD programmes. There has been a recent change in external examiners for UoD, however, the newly appointed external examiner is no longer listed on the GOsC register. External osteopathic input should be an ongoing consideration to support the QA of the curriculum.

As part of ongoing QA processes the CoO programme leader and UoD partnership tutor are due to complete an initial curriculum review as part of ongoing monitoring outside of the annual programme monitoring processes.

The faculty confirm that CoO utilise Zoom education to deliver the curriculum with the same subject areas, either delivered by the same member of faculty at each site or in a small team, where materials have been developed together. Curriculum and syllabus development are reserved for those at module lead level and above, with lecture material and content provided directly to lecturers for consistency of teaching and learning. Expansion of course development could include faculty who do not currently hold academic management positions.

The faculty report a delay to the formalised CPD programme for faculty in development of educational training due to the COVID-19 pandemic; there is no clear date identified for this project to resume. Ongoing educator training will overall help to enhance the student education journey.

Students can provide feedback on each module as part of annual monitoring processes. Strengthening the SSLM identification and monitoring of action points would help to strengthen this process overall and provide more in-year opportunities for change. Patient feedback is limited to service delivery with no current opportunity for direct input on curriculum delivery.

### Strengths and good practice

A proportion of the faculty work within the classroom and clinical settings. This helps students to consolidate learning from the theoretical into the practical environment with a continuity of learning.

CoO patient cases are anonymised and used in theoretical learning and clinical case-based study throughout the programme delivery to give students the opportunity to relate their learning to the professional encounter.

### Areas for development and recommendations

Consider appointing an external examiner for the start of academic year 2021-2022 that has current professional experience and is on the GOsC register. Consideration could be made to appointing a subject specific external examiner either as a replacement or as support alongside the currently appointed UoD external examiner, in line with UoD academic and quality regulations. [recommendation]

Expand the curriculum review process to include patient stakeholders and reflect current external factors for osteopathic education delivery. Consider as part of the curriculum review process the updated GOPRE and Standards for education and training, which are due for implementation in September 2022. [area for development]

Formalise the educational support to faculty and lecturers with the opportunity to complete educational specific courses such as a Postgraduate Certificate in Education. [area for development]

### Conditions



None identified.

#### 4. Teaching and learning

##### Teaching outcomes

##### 4.1 the ability to identify how the curriculum is translated into teaching and learning

☒ MET

☐ NOT MET

##### Findings and evidence to support this

There are a range of formal and informal mechanisms for students and staff to feedback on modules and the curriculum embedded into the annual monitoring cycles or as standalone surveys. These gather ongoing monitoring information such as curriculum development or the patient survey on the informed consent process. CoO develop action plans as a result of module evaluations and National Student Survey data.

Teaching staff who work within the clinical and classroom setting enhance the curriculum delivery, and provide clarity cross-departmentally by observing students in each setting and gauging an understanding of their clinical application of classroom materials.

The peer observation teaching scheme provides an opportunity for teaching faculty to observe each other to provide feedback on an individual basis and to ensure consistency in teaching delivery.

The SSLM meetings provide an opportunity for students and staff to liaise directly on programme and education matters. However, action points and the monitoring process require a consistent approach with further signposting opportunities for students. There is limited knowledge amongst students as to what happens to their feedback outside of a limited number of 'you said, we did' emails. The BoG has a direct opportunity to meet with students through the BoG student liaison meetings, which occur on a biannual basis.

##### Strengths and good practice

Follow-up monitoring of previous conditions and areas for development from the 2016 RQ review.

##### Areas for development and recommendations

The use of alternative methods of signposting students to actions that have developed because of their direct feedback. [area for development]

##### Conditions

None identified.

##### 4.2 patient experience of teaching clinics is used to inform development of the course

☒ MET

☐ NOT MET



### Findings and evidence to support this

Patient feedback is actively sought, however, the feedback gathered is used more in a context for service improvement rather than to inform course development and decision-making processes. The patient interviews revealed an awareness of the patient group meetings that are run a few times per year, but those interviewed have not actively participated in these. Neither patients nor students have an understanding of what impact any patient feedback has had in the clinics or on the curriculum.

At present there are currently no patients involved in the governance processes or at board level in the CoO structure. The SMT have indicated that this stakeholder group, along with students, are a consideration for the future but do not currently feature in the newly designed governance and management structure for 2021-2022.

Clinic observations demonstrated that students are consistent in delivering the informed consent process within the clinical environment, and involve patients in the decision-making process for their ongoing care. This is an area which has been improved and maintained since the last RQ visit in 2016; monitoring of this area has taken place through a patient survey in November 2019. There is appropriate use of lay language to gauge a patient's understanding in the clinical setting and medical terminology used in the clinic tutor exchange.

Patients have found the COVID-19 adapted telephone consultations prior to patients entering the clinic useful. Students receive communication training in their clinical osteopathy modules. However, no formalised training for telehealth has taken place to date but should be considered in line with future GOPRE requirements.

### Strengths and good practice

Posters visibly available to signpost patients to provide feedback, and also students actively encourage patients to give feedback as part of the clinical encounter.

### Areas for development and recommendations

Embed patient involvement into academic process, including course development activities and governance processes. [area for development]

Raise awareness of resulting actions from patient feedback. [area for development]

### Conditions

None identified.

### Quality of teaching

4.3 the use of appropriate methods to monitor the quality and consistency of teaching

☐ MET

☒ NOT MET

### Findings and evidence to support this

There is a strong collegiate feel across both educational and clinic sites. The teaching teams have regular formal and informal contact to ensure consistency of the teaching provision. There is good faculty retention on the programme. There are informal opportunities for the faculty to develop their education skills, including peer review and staff development days. There is limited offering in a formal capacity but the SMT have indicated that upcoming plans include Postgraduate Certificate in Education training in the education field



and higher education academy membership for those seeking an experiential learning pathway. PDRs are conducted on a biennial basis.

Annual monitoring processes, data collation from students and external examiner reports provide an opportunity for the development of the quality and consistency of learning.

The teaching and learning observations, both pre-recorded and live, demonstrate a link between the theoretical and practical elements of the course curriculum relevant to the OPS. Learning aims and outcomes are available at the start of each class. Teaching materials are published in advance of lectures on Blackboard for students to view content and prepare for lectures.

The academic team recognised that the use of multi online lecture delivery platforms provided a potential barrier to learning in the online environment. The purchase of Zoom education has allowed faculty and students to have a consistent delivery method for theoretical class delivery. Zoom education has also been used for pre-recording materials and practical demonstrations.

Clinical sessions are booked by students on an individual basis through a paper-based booking system, which has been modified during the COVID-19 pandemic with a view to return to an electronic booking system in the future. This system collates data on the student clinic hours. Students are required to self-monitor their student logs with patient numbers and there is no centralised monitoring of this information in the governance structure.

### **Strengths and good practice**

Practical demonstrations, adapted for COVID-19 measures, allow for all students to have consistent demonstrations from the lead lecturer, and are then supported with practical skills development with the 1:10 teaching support ratios.

The use of in-house practical skills videos has been developed as supporting materials for theoretical learning, practical skills development and revision resources for students. In addition, an external online learning platform to support technical skills learning has been purchased for level two and three; students have to purchase level one at an additional cost.

Many of the faculty are also clinical tutors, which offers an informal opportunity to ensure consolidation of learning between the classroom and clinical environments.

### **Areas for development and recommendations**

Consideration of PDRs on an annual rather than biennial basis to enhance the staff development processes. [area for development]

Consider collating feedback on the use of Zoom education to ensure it is fit for purpose. [area for development]

### **Conditions**

Minimum standards of clinical education, such as the inclusion of patient numbers and clinical hours in student logs, relating to the attainment of the OPS should be monitored on a regular basis. An update should be provided to the PEC in October 2021, followed by monitoring at the March 2022 PEC. Ongoing monitoring of implementation should be through the annual reporting process.



#### 4.4 the development of a culture of student curiosity and empowerment

☒ **MET**
☐ **NOT MET**

##### Findings and evidence to support this

The use of research articles and journals to explore subject areas in relation to osteopathy and the wider healthcare sector is embedded into the curriculum in various modules, and is evident in teaching and learning materials.

Students are actively encouraged to participate in their autonomous learning through reflective practice and professional autonomy, evidenced in LOs, assessment criteria, their personal portfolios and student logs.

##### Strengths and good practice

A student on the last cohort of the SU programme, currently in their second year, has independently explored the opportunity to become the allied health profession student representative for the school of health at SU. The student has been appointed in this role and aims to raise the profile of the osteopathy course and students.

##### Areas for development and recommendations

None identified.

##### Conditions

None identified.

## 5. Assessment

### Assessment strategy

#### 5.1 the use of a fair and effective assessment strategy

☒ **MET**
☐ **NOT MET**

##### Findings and evidence to support this

The SU and UoD programmes have been developed in line with their respective partner university academic regulations, and reflect any PSRB requirements for completion of studies.

The SU programme can complete minor changes to the programme on the teach out, but this does not extend to changes in assessment strategy. However, GOsC and SU have granted an adaptation for the current year five students to complete one final CCA and the clinical hours have been reduced from 1200 hours on the SU programme, in line with PSRB requirements of 1000 clinical hours.



The assessment strategy for each programme is fair and effective in assessing the LOs, as has been commented in the external examiner reports for each programme. The external examiner reports also allow opportunity for comment on the achievement of the OPS.

There are a range of assessment methods across modules, which are accessible to students with individual learning needs. There is an over reliance on course work as a summative assessment method, however, some coursework reflects ongoing professional development and employability requirements such as business skills and the learning portfolio for critical reflection. The range of skills used in osteopathic practice should reflect the assessment methods.

Students who require adaptations for their assessments have individual learning needs applied to the relevant assessments; these measures may include additional time or the use of a scribe.

The formative learning opportunities are outlined in the SU module documentation, but not the UoD documentation. Through meetings with academic staff and student observations, a range of formative opportunities have been identified including draft essays and practical skills formative assessments with peer feedback.

No detriment policies are available for either programme in line with current higher education sector influences because of the COVID-19 pandemic.

### Strengths and good practice

Review of assessment processes as part of student stakeholder feedback. The COVID-19 pandemic has given staff the opportunity to adapt and develop alternate assessments, and for students to experience this and provide feedback.

### Areas for development and recommendations

None identified.

### Conditions

None identified.

## Assessment processes

### 5.2 the use of relevant assessment processes and routes of escalation

☒ MET

☐ NOT MET

### Findings and evidence to support this

There is a fundamental link between the curriculum delivery and assessment strategies, with an appropriate reflection of the SEEC level descriptors in the FHEQ.

The assessment criteria clearly reflect the LOs and the requirements to achieve each assessment. The assessment schedules are available on Blackboard along with assessment guidance and criteria, and are posted at the beginning of each academic year.



There are clear second marking and moderation processes in place with the use of Urkund (SU) and Turnitin (UoD) as effective means of assessing plagiarism and collusion. Assessment results and overall module results are reviewed and ratified at assessment boards for SU and UoD respectively.

CoO utilise the relevant partner university policies in relation to any assessment processes and academic appeals. There are clear links to these external policies available as external links on the CoO website.

### Strengths and good practice

Clear and accessible signposting of individual course academic regulations for each partner university.

### Areas for development and recommendations

None identified.

### Conditions

None identified.

## 6. Achievement

### Achievement

#### 6.1 the ability to identify a clear structure of achievement

☒ MET

☐ NOT MET

#### Findings and evidence to support this

The B.Ost and the M.Ost programme maps demonstrate that CoO delivers programmes which present a structure of progression for students. There is a clear pathway of achievement from level four to level six (B.Ost) and level seven (M.Ost). In addition, evidence was provided to confirm that, on successful completion of year four, students achieve the Diploma in Soft Tissue Massage.

Mapping of the modules addressing the OPS across the different academic levels was transparent. Further opportunities to develop the UoD programme, to include business planning and employability, were identified when writing the UoD validation document.

The CoO has continued to improve its monitoring of students' experiences, building on information in the CoO 2019-2020 annual report, by establishing an internal process, namely the internal assessment board. This board sits outside the main committee structures but is a process established by CoO this year with the key remit of reviewing module results, and to identify students who are under achieving and to establish an action plan. It is unclear whether the programme leader or the module leader is responsible for the referral to support structures.

The establishment of the ESO role offers academic and pastoral support to students, and signposts students to appropriate service. However, there are distinct differences in what is available to SU and UoD students who may have academic challenges such as dyslexia or dyspraxia. SU students access learning support directly through the university, whereas the UoD provides collaborative support to the CoO but not directly to students. Students on both the SU and UoD programmes have reported barriers to access relevant funding for student support services to gain access to a DSA. The SU students have reported issues in processes at





SU directly, but the UoD students do not have access to the same funding in the partnership agreement. In some instances, individuals have self-funded diagnostic reports to facilitate access to the correct student support mechanisms. The barrier to student support may delay a diagnosis, leaving faculty unaware of individual requirements within a classroom setting. The SMT have now confirmed that they have agreed a suitable level of funding accessible to UoD students for learning support and diagnosis with the CoO governors, which is to be published for the UoD students.

The 2019-2020 annual report raised issues regarding different learning experiences between the London and Stoke students. The teaching team have aimed to address this by ensuring that teaching materials and content for teaching sessions are made available via Blackboard. However, student representatives did raise concerns about different learning experiences in relation to additional learning that was available in London but not available to Stoke students. Furthermore, students have highlighted that the new Blackboard site is disorganised and takes some time to navigate. This is in contrast to the views of the module team. There appears to be no monitoring of the frequency of students accessing Blackboard. This could be a useful endeavour to undertake at module level to identify early students' engagement with the module materials as another potential means of flagging students who might be struggling.

The students at CoO are mainly mature students, with many choosing osteopathy as a second career. The PPP is used to help students appreciate the student journey as a lifelong learning experience and to prepare students for what is required by the GOsC for osteopaths to undertake CPD. Mature students have a wealth of experience that could be utilised with the PPP to assist with lifelong learning beyond exams. The PPP handbook is primarily exam focussed but could be adapted to enable students the flexibility of drawing on life experiences in relation to their growth and development in osteopathy.

The evidence of ongoing graduate support and integration of student experiences into forming course development is an aspiration of the CoO. The SMT have indicated this will form part of their strategic plan for 2021-2026.

### Strengths and good practice

None identified.

### Areas for development and recommendations

To support in identifying students who are struggling, and to monitor engagement with learning, monitor student engagement at module level with online learning. [area for development]

To support with student growth and development, adapt the PPP to accommodate student life experiences. [area for development]

Consider developing a support structure for students with specific academic learning requirements, to enable students with academic challenges to be successful in their studies. [recommendation]

### Conditions

None identified.

## 6.2 the ability to demonstrate an inclusive approach to achievement

☐ MET

☒ NOT MET



### Findings and evidence to support this

Both programmes offer the same academic assessments and the professional and personal development module is incorporated into each year of the programmes, which enables students to continue to reflect on their learning.

The CoO support progression through the programme through communication with students from academic level four to level six and seven using a number of strategies which include, email, one-to-one tutorials and return to study meetings. It is not clear if the progression meetings are mandatory or optional and whether the meetings are recorded.

The CoO has endeavoured to incorporate the UoD's support structures, with the ESOs gaining training to support in identifying student academic needs and assist with improving their studies. Evidence of the improved degree classification in 2019-2020 would have benefitted from examples of addressing what reasonable adjustments had been made for students against their performance to triangulate the improvement on student performance.

The draft business plan makes reference to its expansion from London to the Midlands needing a review of how it delivers its programmes in an equitable manner. Documentation highlights the comprehensive efforts made by the teaching team to ensure parity of learning for both London and Stoke students. This includes using the same lecture content across both sites delivered by the same or a different lecturer, some instances of virtual meetings at the beginning of the module to explain the assessments delivered by the module lead, and formative feedback provided to students across both sites.

The SSLM and the COVID-19 WG during the COVID-19 pandemic offered a platform for students and academic management to raise programme matters across all sites and programmes. Additionally, the students have two meetings with the CoO's BoG that occur throughout the year. There is limited evidence of how the actions from these meetings are identified and monitored, and the SSLM meetings occur separately for each location.

The use of technology has been a significant feature in supporting alternative learning opportunities. COVID-19 has created the necessity for adapting the delivery of face to face teaching to online. This change in the delivery of theoretical content has been a very positive development for students. The increased use of technology continues to build on the area for development outlined in the 2018-2019 annual report.

### Strengths and good practice

None identified.

### Areas for development and recommendations

Consider documenting outcomes from progression meetings with students to support continuation and monitoring. [area for development]

### Conditions

To ensure that the student voice in the maintenance of academic standards is realised, and that there is ongoing evaluation and monitoring of any risks to the OPS, student feedback should be monitored from SSLMs and the implementation and monitoring of actions arising demonstrated. An update should be provided to the PEC in October 2021, followed by monitoring at the March 2022 PEC. Ongoing monitoring of implementation should be through the annual reporting process.



## 7. Student progression

### Recruitment and admissions

#### 7.1 the use of appropriate recruitment and admissions processes

☒ MET

☐ NOT MET

#### Findings and evidence to support this

The recruitment and admissions processes and procedures have been validated by both partner universities and the OfS. Evidence confirmed that marketing is meeting consumer protection law. Information on entry requirements and the selection process is presented in both programme specifications.

The SMT has identified there is a maximum number of 26 students for course delivery; once this number has been reached prospective students are placed on a waiting list. At present it is reported that there is a waiting list for the 2021-2022 intake for the UoD programme which, in part, is thought to have been influenced by the current economic influences of the COVID-19 pandemic.

Through meetings with the SMT, it was stated that applicants are given the opportunity to declare any disability that may require adjustments to the interview process and the applicant's learning. However, the application form does not explicitly ask an applicant to declare a disability, if they wish to do so, but the SPP is visible on the CoO webpage. The SU SPP is available on the SU website, and is signposted to from the CoO website. Documentation identified that joint decisions are made between the programme leader and the UoD on outcomes from the selection process. However, in meeting with the SMT it was confirmed that the partner university makes the final decision.

Information for students with a disability can be found in both the programme specifications. However, the SU document has a clear 'disability statement' with a hyperlink to access information to its 'AccessAbility services' which is very informative. The UoD programme specification makes reference to gaining advice and support from the CoO's support coordinator, which would seem to limit resources available in comparison to what SU offers its students. This aligns with comments from students in the differences in support for students with additional needs provided by the partner universities.

The CoO's efforts in widening participation, encouraging applicants from diverse background both academically and culturally, aligns with the CoO's statements of offering opportunities to a wider demographic of students. The action and participation statement clearly outlines actions taken to encourage applications from these groups but also what measures are in place to support those students, including 'preparing to study programme'. At a strategic level, changes to organisational structure are to reflect greater acknowledgement and monitoring of equality and diversity and therefore the equality and diversity WG is to replace the access and widening participation committee. Terms of reference and membership of the equality and diversity WG were not seen. It is not clear where in the CoO governance structure the equality and diversity WG will sit or its reporting mechanism.

#### Strengths and good practice

None identified.

#### Areas for development and recommendations



To provide clarity to prospective students who have a disability, it is recommended that the application form is adapted to have section on disability. [recommendation]

To embed actions within the CoO, identify clear reporting mechanisms for the equality and diversity WG. [area of development]

### Conditions

None identified.

### Student Journey

#### 7.2 an understanding of the student journey and support available

☒ MET

☐ NOT MET

### Findings and evidence to support this

The SSLMs enable student representatives to meet with lectures to discuss the programmes. Through meetings with the UoD representative, it was stated that action points are fed back to students, there is a good response to student issues and there were no concerns in terms of support. Students' view was that they were listened to, access and response from the programme leader was very helpful in addressing issues and therefore they felt supported. There was no student representation from the London cohort in the student meetings. As such it was difficult to draw conclusions around the London student journey and support available. SU students highlighted their views of feeling unheard by the university; students stated challenges with classrooms and difficulties accessing refreshments at the weekends. Minutes from the SU SSLM have identified students raising concerns previously which have not been addressed.

The main form of communication to students, highlighted through meetings with the student representatives, is via email. The volume of emails has been an issue, with some students feeling overwhelmed. A suggested request was made by a student to have one point of contact at CoO for each cohort where concerns/issues could be raised. All students have found the support from CoO very good and responsive, and students report being aware of feedback presented as 'you said, we did' being available. There were concerns regarding the lack of anonymity in providing feedback since all students are contacted via their university email address. This potentially limits objective concerns students may wish to express and there is a potential for a lack of confidence in the process.

With the SU programmes concluding, students have raised concerns about being able to complete their studies. There is some potential disconnect in communication between CoO and the students, who were unaware of the extension of the contractual arrangements with SU to 2028. The SMT stated they had written to students who had deferred and students who might defer or need to retake the year offering a one-to-one to advise on options. A pros and cons outline of transferring to the UoD was sent to all students, but there are some potential difficulties for students who have been deferred. SU's policy for students who defer essentially deems the students to have broken their contract with the university and therefore on returning to their studies, they may not return to the same course. This policy differs from the CoO which does allow students to return to the same programme. This discrepancy could have reputational consequences for the CoO. The SMT stated there are supplementary guidelines available to reflect that students are able to continue their course returning from deferral.



Through meeting with the module team, it was evident through discussions that non-osteopathic lectures were very aware of the OPS and linked their research module content to those standards. The non-osteopathic lecturers undertake primary research and have stated being involved with GOsC research. It was evident that module teams are a very cohesive group of lecturers, working as a cohesive group which assists non-osteopathic staff in embedding osteopathic standards into their teaching content.

### Strengths and good practice

Non-osteopathic lecturers undertake primary research and have been involved with GOsC research, increasing their knowledge of osteopathy.

### Areas for development and recommendations

Improve communication with students at SU regarding continuance with the programme at SU. [area for development]

### Conditions

None identified.

## 8. Learning resources

### Resource strategy

#### 8.1 the use of a diverse and appropriate offering of accessible resources

☒ MET

☐ NOT MET

### Findings and evidence to support this

In addition to theoretical content being delivered online, there have been virtual simulated clinic sessions to address the reduced practical hands on experience as a result of COVID-19. Lecturers aim to upload teaching materials prior to an online teaching session, unless the materials are not to be seen prior to the session, for example, problem-based learning. Student representatives stated that guidance from lecturers was good and the accessibility of recorded teaching sessions assisted significantly with capturing information and having the opportunity to review at their own time which would not have been available from face to face sessions.

Through meetings with the UoD student representative, it was shared that access to the library is restrictive, as it closes at 17:00 at weekends and the online library resource is not helpful. Students from SU have a more positive library resource experience with good accessibility. The CoO has invested in external learning facilities, the Daryl Herbert series of videos on practical application in osteopathy, which students have found very helpful. Through viewing the live teaching session, there was practical use of models to visually enhance learning. Adherence to COVID-19 safety measures was in place with relevant infection control practices evident. Students have stated that module leaders had sent them 'plug-ins' to assist with accessing appropriate research resources. Prior to COVID-19 students were encouraged to visit the different clinical sites to gain additional experience of patient demographics.



Since the COVID-19 pandemic, patient initial assessment is undertaken by students as a telephone consultation. Patient feedback has been positive about this approach. However, it is unclear if students were trained/prepared for undertaking assessments in this format. The heads of clinic indicated there is a document on telehealth which sets out the link to telehealth and Cliniko which is an encrypted system for security. However, there does not appear to be a document related to training for undertaking telephone consultations with a patient. Through meetings with the faculty, it was confirmed that there was not any training in this area.

Students have access to highly skilled, experienced teaching and clinical staff to enhance and support their learning. Documentation outlines the CoO strategic plan for 2021-2026 to have distinct aspirations in enhancing and utilising technology, monitoring quality of teaching personnel and financial and technical support for students. The strategic plan should identify how the CoO intend to achieve these aspirations, and how progress on achievements will be monitored.

### Strengths and good practice

None identified.

### Areas for development and recommendations

Consider training for students on telehealth. This would be a supplement to the document on the process of setting up a telehealth consultation. [area for development]

### Conditions

None identified.

### Non-academic provisions

#### 8.2 the ability to identify clinical practice and education opportunities

☒ MET

☐ NOT MET

### Findings and evidence to support this

A number of examples of non-academic learning opportunities were highlighted, some of which were undertaken by students through peer learning for those who had skills in particular areas such as complementary therapies. Students are encouraged to meet former students for local peer support in their locality. Additional lectures in pharmacology and wellbeing, as well as particular trips to organisations of interest have been arranged as an annual event. There are plans as indicated by the SMT to engage with other allied professionals and have an inter-professional approach which offers further learning opportunities to students.

Students have the opportunity to choose clinics and there is good flexibility of timings of clinic sessions, with clinics open on certain days from 09:00-21:00. Evidence presented demonstrated a good distribution of a similar demographic of patients in terms of gender, age and clinical conditions, across both clinics, thereby providing all students good access of clinical learning opportunities. Availability of administrative staff who are middle managers offering pastoral support is an additional support for students.



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**Strengths and good practice**

Students with particular skills providing peer learning on complementary therapies.

**Areas for development and recommendations**

None identified.

**Conditions**

None identified.

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## A. Evidence

### A.1 Evidence seen as part of review

78+ INT OTP Guidance for lecture
Academic Report to Board of Governors October 2020
Academic Review - Staff Development 21.12.20 and 22.12.20
Academic Year 2020 - Ensuring parity of module outcomes FINAL
Administration - Staff Development 10.02.21
AGM minutes of 13.10.20
Angela Carryer - Application for Accredited Lecturer StatusACarryer (1)
Annual Risk Management Report CoO 19-20
Audit Action Plan update March 2021
Audited Accounts 2020
Award Board Profile notification
Becoming an Osteopath
BOG - Student Meeting London 15.02.20
BoG & Student Rep Feedback Action Plan
BoG & Student Reps ToR_ 2019
BoG mins 02.02.21
BoG mins 13.10.20
BOG-Student Meeting Derby students 16.05.20
BOG-Student Meeting Stoke 17.11.18
Borehamwood Patient Journey Through Clinic Reception v1 Oct 2020
BOst (Hons) - Assessment Table UoD
BOst (Hons) Osteopathy EE Report 2020-21
BOst (Hons) SU_Programme Map
BOst (Hons) UoD_Programme Map
CASE PRES+ Guideline REF OTP c16
Changes to Delivery and Assessment 2020-21
Clinic Induction -PPP
Clinic Log Book 2020 2021 v4 CO1
Clinic Position Statement vs5 13.5.21
Clinic Report October 2020
Clinic Staff development day
Clinic Team ToR_ 2019
Clinical Learning Module Handbook 2020-21
Clinical Osteopathy 5 CCA New Patient V1 Jan 2021
Clinical Osteopathy 5 CCA Follow Up Patient V1 January 2021
Clinicians meetings October 2020
Cliniko Instructions
CM JD update July 2020 vs 2





CO1 c19 Module Evaluation report
CO2 Session 4 - Communication Skills
CO2 Virtual Clinic Handbook
CO3_Session 1-1_Interviewing Skills 2020-21 (DB)
CO3_Session 1-2_Introduction to Motivational Interviewing 2020-21 (DB)
CO5 Reflective Assessment V1 Jan 2021
CofO RPL Admissions pathway
CofO RPL Credit Agreement Entry Y1 S2
CofO RPL Credit Agreement Entry Y2 S1
CofO RPL Scheme Y1 S2 Credit Claim Form
CofO RPL Scheme Y2 Credit Claim Form
College CMA Guidance
College of Osteopaths - Monitoring Report 2019-20
College of Osteopaths AMR 2017-18
College of Osteopaths COVID Outbreak Cluster Protocol v1 Oct 2020
College Staffing Structure FINAL
College Video
companies_house_document
Confirmation from Staffs re TO
Consent Form Fitness to Practise AY 2021 SU
Consent Form Fitness to Practise AY 2021 UoD
consent to treatment during COVID BWOOD v2 Oct 20
Consent to treatment during COVID NSMI v2 Oct 20
Continuation Sheet New Version 1Sept2020
CoO - Bachelor of Osteopathy (BOst)- Ops Manual - v3
CoO Clinic admission declaration v 6
CoO Student data
CoO_Virtual Teaching Clinic Introduction
CoO-2020-21-Virtual Teaching Clinic-Y 1 2 -Learning Objectives and Sessions Goals
CoOAccessParticipationStatement_19-20
Copy of Risk assessment infection control (8.9.20)
Course Handbook - Staffs Programme 2020-21
Course Handbook - University of Derby Programme 2020-21
Covid Patient Journey Risk Assessment
COVID Symptoms or positive test Flow Chart for Students
COVID-19 Academic Programme Working Group
COVID-19 Academic Programme Working Group Terms of Reference
COVID-19 Academic Programme Working Group ToR
CPD Policy V1 061118
Current Commentary Committee Structure FINAL 300919
Current Committee Structure V5 300919



DBS & FtP Process V2 260220
DD c19 Module Information
Degree Classification 2017-2020
Demographic Pie Charts
DERBY Induction Presentation 2021
Derby Lease Jan 2020
Derby PPD 1 Student Support Briefing 9.1.2021 FINAL
Diploma in Soft Tissue Massage - IO Students Practice Criterion 2018'19
DP - PPP 1
DP - PPP 2
DP - PPP 3
Draft Business Plan vs 7 11.3 2021
Draft QRB 1.12.20 mins
Draft QRB 1.12.20 mins (v002)
Email sent from ML for Intro OTP to lecturing staff
ESO Minutes 1.5.2020
ESO Minutes 1.5.2020 FINAL
ESO Minutes 11'9'20
ESO Minutes 15th Jan 2021 FINAL
ESO Minutes 26.2.21
ESSAY Guideline INT OTP c17
EXT AGENCIES QRB 2020
Extract 6.1 to 6.2 BoG mins 02.02.21
Extract from Strategic Plan Survey February 2021
Extract UoD&CoO_OpsManual_v3
F&D c19 Module Information
F&D c19 VIVA EXAM Guideline
F&D c19 VIVA ONLINE on the day Guideline
FD Module Monitoring Form Y2 c18
Feedback - ANA OTP18025417 ANA OTP Written mark Sheet c18
Feedback - INT OTP S2 London feedback
Feedback D&D 18025421 DD Written mark Sheet c18
Feedback F&D 100537244 FD Written ex mark sheet c19
Feedback REF OTP Pres Moderated mark sheet c16
Final version ESO Minutes 15.11.19 2 (3)
Fitness to Practise Policy
Form & Function Example Urinary_System
FSC Minutes 11.05.21
FSC Minutes 16.02.21
FSC Minutes 20.10.20
Full Staffs TO & sigs



FW Year 3
General Infection control policy 092020
Gov Dev Action Plan V1 200121
Gov Dev & Action Plan V1 200121
Gov Dev ^0 Action Plan V3 MF
Governance Management Position Statement FINAL
Guidelines for CoO Clinic admission declaration V 4
HCE JD vs 3Jan 2021
IC Osteo Assessments
IC Osteo Consultations
Information for Lecturers Clinicians
Internal Assessment Board
Internal Assessment Board - Terms of Reference
Internal Assessment Board 050321
Internal Assessment Board Terms of Reference
Internal Assessment Board ToR
Interprofessional Communication presentation 12Dec20
Intro OTP Lecture Example
Intro OTP Module Information 2020-21
Kerstin Rolfe (External Examiner Report) 2019
LONDON Assessment Schedule v13 Y3-Y5 2021
LONDON Assessment Schedule v16 Y3-Y5 2021 FINAL
LSA Degree Classifications 201819 to 201920
Mins BoG 27.04.20
Minutes of Covid-19 Academic Programme Working Group - 08.09.20
Minutes of Covid-19 Academic Programme Working Group - 08.12.20
Minutes of Covid-19 Academic Programme Working Group - 20.10.20
Minutes of Covid-19 Academic Programme Working Group - 26.01.21
Minutes of Covid-19 Academic Programme Working Group -10.7.20 (Final)
Minutes of Covid-19 Academic Programme Working Group -11.8.20
MMT (ESOs) ToR_ 2019
Module Evaluation Questionnaire
Module_Evaluation_Report_December2019
Modules Aligned to GOPRE - UoD programme
Modules Aligned to GOPRE - SU Programme
MOst SU_Programme Map
New Committee Structure Commentary
New Committee Structure V5 for_approval
NLP and Rapport CO1 Communication
No Detriment staff comms
No Detriment student comms



NP Case History Sheet 05 2021
OfS 5 year Income projections for BOG vs Feb 21
Open Day Powerpoint V3 FINAL
OPS Aligned to Modules SU programme
OPS Aligned to Modules UoD programme
Organisational Roles
OSTEOPATHS PEAP
Osteopathy in the NHS 12Dec presentation
Osteopathy NSS Award Action Plan 2018 (1)
Osteopathy Transition Meeting 31-05-19
Paperwork Intro OTP
PATIENT & PUBLIC QRB 2020 vs2
Patient appointment COVID information generic v1
Patient appointment information B Wood v1
Patient appointment information NSMI v1
Patient Case History
PATIENT FEEDBACK FORM
Patient Feedback Proforma
Patient Journey final vs 4
Patient Leaflet 2020 A6 leaflet BWood
Peer Review Guidance
Peer Review Guidance(1)
Peer Review Report Form 1
Peer Review Report Form 1 - Virtual Teaching Clinic (DB) 4.3.21
Peer Review Report Form 1 (EM - 14.2.21
Peer Review Report Form 1 (SW - 13.2.21)
Peer Review Report Form 1 Virtual Teaching Clinic (DB) 3.3.21
Peer Review Report Form 2
POP Lecture Example
POP Module Descriptor
PPD 1 Module Descriptor
PPD 1 Professionalism Assessment Details
PPD1 Example -Effective learning
PPP Briefing Powerpoint Yr 5 PPD4
PPP Handbook Derby Year 1 Cohort 20
PPP Handbook Derby Year 2 Cohort 19
PRACTICAL EXAM Guideline v3 INTRO OTP DIPLOMA 2021
Professional Behaviour 2021
Programme Aims and Learning Outcomes
Programme Comparisons
Programme Induction Presentation 2021



Programme Map, BOST (Hons) Derby
Programme Map, BOST (Hons) Staffs
Programme Map, MOST Staffs
Programme Specification - BOST (Hons) (Staffs)
Programme Specification - BOST (Staffs)
Programme Specification - MOST (Staffs)
Programme_Specification_B.Ost (Derby)
Programme_Specification_B.Ost (Hons) (Derby)
Progression Data 2019 20
Pros and Cons Year 3 Staffordshire University Students returning from a Break in Studies
Pt Information leaflet BWood Stoke
RA Matrix 2020-21
Raising a Concern Flowchart 2021
Reassessment Case History Sheet New V2 Sept2020
REF OTP Card 1
Registration decision 10023442 The College of Osteopaths page 1-2
Return to Study 2020 21 241120
Risk Assessments - Engagement v3
Risk Assessments - External agents 2020 v3
Risk Assessments -Finance v3
Risk Assessments - H&S 2020v4
Risk Assessments - people 2020 vs 4
Risk Assessments - Resources 2020 v3
Risk Assessments - Strategic plan v3
Risk Assessments people 2020 vs 4
Risk Assessments- Reg and Compliance 2020v3
Risk Management Policy vs2 290120
Risk management staff letter Jan2021
Risk Register Summary
Risk Registry Summary
Risk scenario testing by Board (FSC)
RPL e-mail following interest
Safeguarding Policy 2020 21 241120
Sample ESO Meeting Agenda 15.1.21
SHARMAN Graham (External Examiner Report 2017-18)
SHARMAN Graham (External Examiner Report 2018-19)
SHARMAN Graham (External Examiner Report 2018-19)RESPONSE
SMT mins 26.1.21
SMT Minutes 09.2.21
SMT Minutes 1.2.21
SMT Minutes 1.9.20



SMT Minutes 10.05.21
SMT Minutes 12.04.21
SMT Minutes 12.1.21
SMT Minutes 13.10.20
SMT Minutes 14.09.20
SMT Minutes 14.12.20
SMT Minutes 16.11.20
SMT Minutes 16.3.21
SMT Minutes 18.1.21
SMT Minutes 19.04.21
SMT Minutes 19.10.20
SMT Minutes 2.11.20
SMT Minutes 2.3.21
SMT Minutes 21.09.20
SMT Minutes 21.12.20
SMT Minutes 22.3.21
SMT Minutes 23.11.20
SMT Minutes 23.2.21
SMT Minutes 26.04.21
SMT Minutes 26.1.21
SMT Minutes 26.10.20
SMT Minutes 29.03.21
SMT Minutes 29.09.20
SMT Minutes 30.11.20
SMT Minutes 4.1.21
SMT Minutes 5.10.20
SMT Minutes 7.12.20
SMT Minutes 7.9.20
SMT Minutes 9.11.20
SMT Report to BOG & SMT FEB 2021
SSLM Minutes - London 270221
SSLM minutes 24.11.18
SSLM minutes Final 15.11.19
Staff Development Day 2020 (28.2.20)FINAL
Staff Letter 210121 V3
STAFF QRB 2020
Staffs TO Agreement
Stakeholder Business Plan Feedback (extract)
Stakeholder Engagement_Strategic Plan Feedback_Questions
Stakeholder Engagement_Strategic Plan Feedback_Strengths
Stakeholder Engagement_Strategic Plan Feedback_Threats



Stakeholder Engagement_Strategic Plan Feedback_Weaknesses
STOKE Assessment Schedule v10 Y3-Y5 2021 FINAL
Strat Ob monit 2021 (March 2021)
Strat Plan report (20-21)
Strategic Plan Activities (March 2021)
Strategic Plan report (February 2021)
Student Post lecture survey- Feedback Form
Student Rep Meetings Derby degree (Derby) 04.05.21
Student Rep Meetings Derby degree (London) 04.05.21
Student Rep Meetings Programme Committee UoD 170521
Student Rep Meetings Staffs degree (London) 29.04.21
Student Rep Meetings Staffs degree (Stoke) 29.04.21
Student-Charter-1
Student-Protection-Plan-2019-20
STUDENTS QRB 2020
SU - Module Descriptor - POP
SU - Module Descriptor - PPD2
SU - Module Descriptor - PPD3
SU - Module Descriptor - PPD4
SU Collaborative Agreement 8thSept14
SU Collaborative Agreement Schedule A1 8thSept14
SU Collaborative Agreement Schedule B1 8thSept14
SU Collaborative Agreement Schedule B2 8thSept14
SU Collaborative Agreement Schedule B3 8thSept14
SU Collaborative Agreement variation 18th July 2016
SU Programme Module Descriptors
SU student-protection-plan
The College of Osteopaths - Final Dated Accounts 2019
The Registered Osteopath
TST pre-recorded information
TSTs+ Staff Guidelines
TSTs+ Student Guidelines
UoD - Module Descriptor - PPD 1
UoD - Module Descriptor - PPD 2
UoD - Module Descriptor - PPD3
UoD 20-21 Y1c20 Assessment Schedule V3 17.01.21
UoD BOST (Hons) - Assessment Table
UoD BOST (Hons) - Assessments linked to Learning Outcomes
UoD Collaborative Agreement Annex c
UoD Collaborative Agreement Annex D
UoD Programme Module Descriptors



Year 1 Student Feedback - Curriculum questionnaire
Year 2 Student Feedback - Curriculum questionnaire
Year 3 Student Feedback - Curriculum questionnaire
Year 4 Student Feedback - Curriculum questionnaire
Year 5 Student Feedback - Curriculum questionnaire
You Said we Did 2021
You Said we Did Poster

## A.2 Videos shared as part of review

### College teaching clinics

Borehamwood Clinic Tour 2021

Stoke (NSMI) Clinic Tour 2021

### Online teaching examples

Level 4 Form-and-F\_1920x1080

Level 5 D&D Cranial Nerves

Level 6 INTE OTP 21 and 22

VTC for students from Year 3 and 2

VTC for students Year 1 and 2

### UoD Teaching Facilities

Walk Through T032a & T032b

Walkthrough K017