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| <b>Peer Discussion Review Form Guidance</b> |
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## **Introduction**

Peer Discussion Review is a supportive process to help osteopaths to learn from each other and to demonstrate that they provide a quality experience for patients. It takes place between two or more people towards the end of the three year CPD (or continuing fitness to practise) cycle.

***The supportive approach that underpins peer discussion reviews relies on osteopaths (both reviewers and those being reviewed) to genuinely participate and show interest in activities, helping colleagues feel valued.***

***Both parties use skills of listening carefully and of giving and receiving constructive and helpful feedback and show attitudes of curiosity, being willing to embrace opportunities to learn from every encounter and valuing new knowledge and insights that all peers and colleagues can bring.***

This guidance is for osteopaths and reviewers undertaking the Peer Discussion Review at the end of the three year 'continuing fitness to practise' cycle.

This guidance includes:

- The continuing fitness to practise model (including the CPD Standards)
- An explanation about what the Peer Discussion Review is.
- Frequently asked questions.
- A Peer Discussion Review Template for completion by reviewers and osteopaths during the Peer Discussion Review in the annex to this Guidance. This template is self-contained and is designed to help to structure a supportive conversation providing a 'walk-through' of the discussion for both the reviewer and the osteopath.

### **The CPD model providing assurance of continuing fitness to practise**

The General Osteopathic Council CPD model aims to provide an assurance of continuing fitness to practise through:

- support and developing learning communities in osteopathy providing spaces for osteopaths to share their experience and expertise with one another and to learn from each other.
- By encouraging osteopaths to discuss interesting, difficult or unusual cases and exchange ideas about ways of handling them to support osteopaths.

The desired outcome is to enable continual enhancement practice and therefore ensure patient safety.

*CPD Standards*

The CPD Standards explain to others how we know that registrants are keeping up to date and meeting standards. Genuinely engaging with and completing the continuing fitness to practise activities below will enable osteopaths to show that they are meeting the CPD Standards and therefore be 'signed off' during a Peer Discussion Review.

The CPD Standards are:

|                                      |   |
|--------------------------------------|---|
| CPD Standard1 –<br>Range of practice | Demonstrate that activities are relevant to the full range of osteopathic practice.         |
| CPD Standard 2 -<br>Quality of care  | Demonstrate that objective activities have contributed to practice and the quality of care. |
| CPD Standard 3 –<br>Patients         | The registrant has sought to ensure that CPD benefits patients.                             |
| CPD Standard 4 –<br>Portfolio        | Maintain a continuing record of CPD   |

Further information about the CPD model is available in the revised draft *CPD Guidelines*. This section provides a short summary.

The continuing fitness to practise model comprises a three year cycle (30 hours of CPD each year and a minimum of 15 hours learning with others), of this there are four key activities which must be undertaken as part of the CPD cycle:

*Osteopathic Practice Standards –*

- CPD must be undertaken and recorded in all themes of Osteopathic Practice Standards:
  - communication and patient partnership,
  - knowledge, skills and performance,
  - safety and quality in practice and
  - professionalism.
- CPD should also support all areas of osteopathic professional practice (clinical practice, education, research and management).

Completion of these activities will enable the osteopath to demonstrate CPD Standard 1.

*Objective activity*

- At least one objective activity must be undertaken. This might include:
  - Patient feedback
  - Peer observation or feedback (involving two or more people)
  - Clinical Audit
  - Case based discussion (involving two or more people).
- The objective activity should be recorded to include:
  - a note of the method used,
  - the data or feedback gathered, and
  - how that data has fed into CPD and practice (this will usually include analysis, reflection and an action plan).

Completion of these activities will enable the osteopath to demonstrate CPD Standard 2.

*Communication and consent*

- CPD must be undertaken in communication and consent. There are a range of resources to enable the osteopath to undertake this CPD either through self study, through a course, or through e-learning, or through group discussion. A suggested guideline is around 3 hours.

This will enable the osteopath to demonstrate CPD Standard 3.

*Peer Discussion Review*

A Peer Discussion Review is undertaken towards the end of the three year cycle. Discussion and review of the CPD Folder as part of the discussion will enable the osteopath to meet CPD Standard 4.

GOSC will automatically audit the required number of hours and so this does not need to form a part of the Peer Discussion Review.

Completion of these activities will enable the osteopath to demonstrate CPD Standard 4.

**About Peer Discussion Review**

A peer discussion review (PDR) takes place towards the end of every three year cycle. (Some suggest that it could be undertaken in the **early part of year 3** to allow time for any further development to take place if needed.) The Peer Discussion Review is a discussion with a peer under the auspices of a regional group,

educational institution or Osteopathic Alliance (advanced practice or special interest) group or with another osteopath or health professional or with the GOsC.

The Peer Discussion Review is where osteopaths show that they have complied with the CPD / continuing fitness to practise framework and the *CPD Standards* using a combination of their CPD portfolio, patient notes and particularly discussion.

***It is important for the Peer Review Discussion to be conducted in a supportive way which emphasises and encourages engagement and enhanced practice.***

The peer discussion review template at the annex is self-contained and is designed to help to structure a supportive conversation providing a 'walk-through' of the discussion for both the reviewer and the osteopath

The template should be completed and agreed by both parties and then should form a part of the registrant's CPD portfolio for external review if necessary.

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## **Frequently asked questions**

### *1. Can I claim CPD for undertaking a peer discussion review?*

Yes, the peer discussion review can be CPD for both parties. CPD is 'any activity which maintains, enhances and develops osteopathic professional practice.'  
'Professional practice can include clinical work, education, research or management responsibilities.'

### *2. Do I need training to undertake a peer discussion review?*

Training may be provided for reviewers within the auspices of educational institutions or within some regional groups. Example videos and other resources will also be available. However, it is not necessary to undertake training. The template is designed to guide the reviewer and the osteopath through the process.

### *3. What if I am unsure whether the osteopath has done enough to meet a standard?*

The intention of the peer discussion review is to support osteopaths to undertake the process and to consider the effect of their CPD in relation to their practice with the aim of supporting quality of care and patient safety. If an osteopath is genuinely engaging, they are more likely to have met the CPD standards.

Ask yourself the following questions:

- a. Has this osteopath tried to undertake CPD across the range of their practice and have they tried to inform their practice and learned from the CPD?
- b. What more should the osteopath do to meet the standard.

### *4. What happens if I sign an osteopath off as meeting the standards and the GOsC take a different view when they audit?*

If the GOsC finds significant differences, the GOsC may provide advice about this to both parties. However, we recognise that this is not a precise science – the key outcome that we are after is to help osteopaths to have discussions together in a way that supports and enhances practice. The reviewer will not be penalised in any way unless there is clear evidence of collusion.

### *5. Will my CPD Portfolio be audited at the end of the three year cycle?*

We expect that GOsC will audit a significant number of CPD Portfolios at the end of the first three year cycle.

### *6. What resources are available to support osteopaths to undertake CPD in relation to communication and consent and also data analysis and reflection?*

See the CPD Guidelines for further information about resources and case studies.

### *7. How can I choose my peer discussion reviewer – and how do I find them?*

Many of the following organisations will put in place structures for peer discussion reviews. You can contact your local regional group (contact details are available on the ozone at: <http://www.osteopathy.org.uk/ozone/get-involved/regional-network/regional-groups/>)

You can contact osteopathic educational institutions (contact details are available at: <http://www.osteopathy.org.uk/practice/becoming-an-osteopath/training-courses/>)

You can contact Osteopathic Alliance groups at: <http://www.osteopathicalliance.org/members/>

However, you can also undertake peer discussion reviews with local colleagues. The important thing is to select a reviewer who will help you to feel comfortable and who you will be able to discuss your practice openly and honestly to enhance quality of care and patient safety.

Some new graduates may benefit from undertaking a peer discussion review external to the practice setting that they are working in, for example, with an educational institution to consolidate their experiences of education as they make the transition into practice.

*8. What should I take to my Peer Discussion Review?*

You should take your complete CPD Portfolio including both your CPD Annual Summary Forms and also all other documentation (e.g. patient feedback forms and analysis, your CPD on communication and consent and your notes on other aspects of CPD that you have undertaken during the three year cycle).

*9. How should I choose a peer discussion reviewer?*

*10. What happens if I have a personality clash with my peer discussion reviewer and I disagree with their opinions?*

It is open to you to seek a further Peer Discussion Review with another reviewer within the same cycle.

However, it is important that you record the first Peer Discussion Review that took place and file it in your CPD Portfolio. The second Peer Discussion Review will take account of your response to earlier Peer Discussion Reviews.

*11. Will I be at a disadvantage if I have two or three incomplete Peer Discussion Review templates in my folder indicating that I have not been successful within the cycle at earlier stages?*

No – it does not matter if you have a number of incomplete Peer Discussion Review templates in your folder. On the contrary, if you have been able to complete the areas of development identified in previous Peer Discussion Reviews, this can be good evidence of meeting CPD Standard 2 – 'Seek to ensure that activities have

contributed to the quality of care through analysis and consideration of how it might influence practice and consideration of a range of types of evidence including objective evidence and discussion with peers.' It does not matter if the reviewer signing off your Peer Discussion Review form is different to the reviewer who undertook an incomplete Peer Discussion Review form.

*12. What if I can't find a reviewer who agrees to sign off my Peer Discussion Review during this cycle?*

It is open to you to ask GOsC to undertake a Peer Discussion Review with you.

*13. What happens if I do not get a Peer Discussion Review signed off before the end of my three year cycle?*

It will be possible for you to apply for an extension to your cycle in 'exceptional circumstances'. However, if you are unable to undertake 'Peer Discussion Review' demonstrating that you have met the CPD Standards within the three year cycle, you are at risk of being administratively removed from the Register until you are able to do so.

*14. Will I have to pay for my peer discussion review?*

Some organisations may choose to charge a small fee for undertaking a peer discussion review. Payment will not guarantee that a Peer Discussion Review template will be signed off as complete.

Many organisations choose not to charge for undertaking Peer Discussion Reviews. Further information is provided in the *CPD Guidelines*.

Organisations that charge are more likely to train their reviewers, to provide quality assurance activities around the Peer Discussion Review and to provide a complaints process.

Individuals may choose to charge a small fee for undertaking a peer discussion review.

However, charging is not a mandatory requirement.

*15. Do I need to disclose any fees paid?*

Yes – any fees paid must be disclosed on both complete and incomplete Peer Discussion Review templates.

*16. How long does Peer Discussion Review take?*

Pilots have shown that the Peer Discussion Review takes between an hour and an hour and a half. It should not take longer than an hour and a half.

*17. Can I undertake a Peer Discussion Review with more than one person?*



Yes. There are different models to undertaking a Peer Discussion Review. Some people will undertake their Peer Discussion Review within a group setting or with two or even three reviewers. The format is not prescribed. However, it is important that all reviewers are able to sign the declaration at the end of the form. There is a case study in this guidance about how to undertake a peer discussion review within a group setting.

### **Guidance on concerns about practice**

*18. What should I do if I am concerned about an osteopath's practice during a review?*

In most cases, if concerns are identified, these will be discussed between the reviewer and an osteopath and together they will identify further CPD or training that will support the osteopath to improve practice.

In some circumstances, it may be appropriate for the reviewer to suggest that the osteopath completes the further CPD or training suggested before completing the Peer Discussion Review in that cycle. Alternatively, it may be sufficient to note the discussion and to identify appropriate CPD or training in the next three year cycle, signing off this Peer Discussion Review cycle.

If there are concerns identified which may cause harm to patients as they will not be immediately remedied, the reviewer should seek external advice about the appropriate action to take.

The *Osteopathic Practice Standards* (2012) state:

C9: Act quickly to help patients and keep them from harm.

1. You should take steps to protect patients if you believe that a colleague's or practitioner's health, conduct or professional performance poses a risk to them. You should consider one of the following courses of action, keeping in mind that your objective is to protect the patient:

1.1 Discussing your concerns with the colleague or practitioner.

1.2. Reporting your concerns to other colleagues or the principal of the practice, if there is one, or to an employer.

...

1.5. Where you have immediate and serious concerns for a patient, reporting the colleague to social services or the police.

Advice may be sought from the General Osteopathic Council calling 020 7357 6655 x 248. Advice may also be sought from the British Osteopathic Association or from an insurer. The GOsC will be developing further advice about this shortly.

## **Case study for carrying out a group peer discussion review**

### **Belfast Regional Group**

**April 2014**

#### *Introduction*

The Belfast pathfinder group are a group of up to 26 osteopaths who meet together regularly in Belfast to discuss practice. The osteopaths have different experiences of practice ranging from newly qualified osteopaths to those who have been in practice for over forty years. The osteopaths practise using a range of different approaches and treatments with a variety of patients.

#### *Summary*

This case study outlines how to undertake a peer discussion review within a group forum.

#### *Planning*

Preparation for the group session involves the osteopaths who are planning to undertake the peer discussion review to bring along their CPD portfolio and to prepare a presentation to the group about their practice. All osteopaths who are taking part should take the opportunity to look through the Peer Discussion Review Guidance and materials before the meeting.

#### *How did they do it?*

1. An introduction setting out the purpose and process to be followed. The scene is set and it is important and imperative for everyone to agree to a trusting and supportive environment.
2. The osteopath(s) being reviewed do a 15-30 minute presentation which is designed to cover the questions in the peer discussion review document, whilst the peers take notes, which includes:
  - a. A general presentation of material covered over 3 years worth of CPD
  - b. A more in depth presentation of the material's usage in their professional life now, or why it wasn't useful for them personally/professionally – this will aid in gauging certain CPD event's usage for future participants and will allow them knowledge to understand whether it is worth their while participating in it.
3. At the end of the presentation, there is a 15-20 minute discussion back and forth between peers in relaxed interview process to explore further professional development and reasoning behind CPD chosen. This will help peers to make sure all aspects of the CPD standards have been met but also provides an opportunity for clinical discussion around particular cases and approaches enabling a learning forum for all.

4. Following the peer discussion, there is a 5-10 minute peer feedback session to discuss what were good/bad, strong/weak about the person's ability to understand the concept behind CPD use and whether they cover important aspects that keep their professional standards and skills up to date. It will highlight areas that need to be worked on or areas of strength that could be shared with others to aid in their development through use of the group review system.

5-10 minute informal discussion relating to what needs to be addressed if anything. This time will allow for each individual to learn from their peers and as a group for everyone to understand the process and develop the process in more detail leading to a better understanding of what is expected from everyone. By this stage hopefully, certain protocols will be available so that the person can address their weaknesses and prove that they have done so after the meetings if it is felt by the peers that they had not.

*What were the concerns / barriers and how were these overcome?*

Within our group, we recognised that some people do not function well in groups or discussing in larger numbers. Until process of reviewing is understood the peer review may seem like a trial of sorts with a jury but an understanding must be made so that this does not happen. Personally, I felt willing and able to share my practice in this way as it provides a great learning experience which enables a variety of perspectives to focus on my practice.

*What did the participant learn?*

I got the opportunity to get feedback from more than one peer and more opinions on whether my CPD is helping me to keep up to date. It also makes the process more objective for me as it decreases the chance of 'friends' ticking the boxes.

It also allows individuals to learn from others taking part in the process and builds confidence for others to discuss their own work within a group setting.

*Was it useful*

Yes it enables up to 7 or 8 osteopaths to undertake a peer discussion review on one day, should they feel confident to do so and hopefully provides a learning experience for all taking part, regardless or whether they are being reviewed or doing the reviewing. It also enables a community to understand standards of practice of colleagues and promotes togetherness and strong sense of professionalism.

*How long did it take?*

About an hour for each osteopath.

*Would you do it again? Yes.*

**Peer Discussion Review Template****Instructions for completion of the peer discussion review template**

This section of the template is designed to be completed at the review in discussion between the osteopath and the reviewer. Use the template as a 'walk-through' to guide your conversation.

***The aim of the discussion is to provide a supportive and constructive discussion about practice in a 'safe space'. Osteopaths are encouraged to discuss their practice openly and honestly in way that supports enhancement of quality of care and ensures patient safety.***

The template is self-contained. Simply discuss each question in turn. Brief notes of what is discussed should be included on the template – these include both areas of strength and achievement and areas of development and any future action agreed.

If, at the conclusion of the discussion, it is felt that the osteopath needs to engage further, undertake specific CPD or seek specific advice about a particular issue in order to meet one or more standards, the reviewer should ensure that the reasons for this are documented sufficiently clearly for the osteopath to understand clearly what needs to be done before the next Peer Discussion Review.

**Peer Discussion Review Template**

|  |
|--|
| <b>Peer Discussion Review Template</b> |
|--|

Name of osteopath:.....

Name of reviewer(s):.....

Is this review taking place:

| <b>Organisation</b>   | <b>Please tick</b>       |
|---|--------------------------|
| Within a framework put in place by your regional group. If so, please explain which regional group here:<br>.....                 | <input type="checkbox"/> |
| Within a framework put in place by an osteopathic educational institution. If so, please explain which institution here:<br>..... | <input type="checkbox"/> |
| Within a framework put in place by an Osteopathic Alliance group. If so, please explain which group here:<br>.....                | <input type="checkbox"/> |
| With another osteopath you work with  | <input type="checkbox"/> |
| With another osteopath known to you (but who you do not work with directly)   | <input type="checkbox"/> |
| With another osteopath not known to you   | <input type="checkbox"/> |
| With another health professional  | <input type="checkbox"/> |
| Other   | <input type="checkbox"/> |

Date of review:.....

Location of review.....

Fee paid (if any): .....

## Peer Discussion Review Template

### About the osteopath undertaking the review (to be completed by the osteopath undertaking the review)

Please describe your practice (consider including a description of your osteopathic practice, e.g. clinical, teaching, research and / or management) the patients you see, how often you practice, where and how you practice, and perhaps also an indication of why patients consult you).

This section encourages the osteopath to introduce themselves to the review by providing a brief summary of how they practice and how they approach their CPD Practice to the reviewer.

The review will use this information to guide the conversation and explore your CPD together.

(maximum 40 words)

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**Peer Discussion Review Template**

*CPD Standard 1: Demonstrate that activities are relevant to the full range of osteopathic practice. (OPS and breadth of practice)*

Guidance:

This standard is **met** when the activities that the osteopath has undertaken incorporate all the four themes of the Osteopathic Practice Standards (communication and patient partnership, knowledge, skills and performance, safety and quality in practice and professionalism) and appears to cover all aspects of their osteopathic practice (e.g. clinical practice, teaching responsibilities, research or management). *[DN: Need case study about balance between clinical, management, etc.– incorporate into Angela Noreen portfolio appended to the CPD Guidelines?]*

This standard **may be met** but with additional advice provided if the osteopath has undertaken CPD in all the themes of the Osteopathic Practice Standards, but has minor gaps in relation to their practice. (For example, if they undertake management responsibilities but have very little CPD in this area).

This standard is **not met** if the osteopath has not undertaken CPD in all the themes of the Osteopathic Practice Standards.

1. Has the osteopath undertaken CPD activities in relation to each of the themes of the Osteopathic Practice Standards and also CPD appropriate to their osteopathic practice (for example, if the? Yes / No

|  |
|--|
| <p>Comments:<br/>If yes – please explain how: If no – please explain where the gaps are and how they could be met.</p> |
|  |

**Peer Discussion Review Template**

*CPD Standard 2: Demonstrate that objective activities have contributed to practice and the quality of care.*

Guidance:

This standard enables the osteopath to show that activities have contributed to the quality of care through analysis of the objective evidence and consideration of how it might influence practice and consideration of a range of types of evidence including objective evidence and discussion with peers.

This standard will be **met** by the osteopath showing clearly that feedback gathered objectively and analysed has informed CPD and practice. The objective activity is a way of way of enhancing practice. Osteopaths should demonstrate genuine attempts to inform their own practice through the use of information or data generated objectively. Examples may include: patient feedback, peer observation, clinical audit, case based discussion in a group or even a previous Peer Discussion Review (where the osteopath can show that their practice has been informed by such a discussion based on evidence).

Please note that some osteopaths may choose to seek help to analyse their data – there are many packages and resources enabling them to do this which is perfectly acceptable. In order to demonstrate this standard, the important aspect is demonstrating how evidence gathered objectively has influenced practice.

This standard **may be met** if the osteopath has taken documented steps to inform and enhance practice as a result of external feedback, but if there are still areas of development to be completed.

This standard is **not met** if the osteopath has not undertaken any objective feedback or activities during the three year cycle. It will also not be met if the osteopath is unable to show how they have learned from objective feedback and how this has been applied to their practice.

2. How has the osteopath used CPD to inform their practice?



## Peer Discussion Review Template

3. Has the osteopath undertaken at least one piece of objective evidence and provided a summary comprising:

| Description  | Yes | No | Comments (If yes – please explain how. If no, please explain the gaps that need to be filled and how this could be done). |
|--|-----|----|---|
| a. Aim of activity   |     |    |   |
| b. Description of method used and discussion of why method was chosen  |     |    |   |
| c. Summary of results  |     |    |   |
| d. Conclusion which must include a review of the method chosen, a summary of the strengths identified and a summary of the areas for development |     |    |   |
| e. An action plan about how those areas of development will be met.  |     |    |   |

|  |
|--|
| <p>Comments:</p> <p>If gaps have been identified, please discuss options for seeking support to meet the development need with the osteopath. (Note – resources to support the osteopath are outlined in the CPD Guidance)</p> |
|  |



**Peer Discussion Review Template**

*CPD Standard 4: Maintain a continuing record of CPD*

This standard is about the registrant demonstrating documented CPD for the activities discussed during the peer discussion review. It is not necessary for the registrant to show that they have completed the 90 hours of CPD (with at least 45 hours of learning with others). This last aspect will be verified through the GOsC automated system.

This standard is **met** when the osteopath is able to show documented evidence of compliance with the continuing fitness to practise framework.

This standard is **not met** when the osteopath is unable to show documented evidence of compliance with the continuing fitness to practise framework.

- 5. Does the CPD portfolio demonstrate documented CPD for this CPD Cycle including notes of all activities discussed in this Peer Discussion Review?

Yes / No

Comments: If not, please indicate gaps here:

|   |
|---|
| <p>Comments: If not, please indicate gaps here:</p> |
|---|

## **Peer Discussion Review Template**

### **Conclusion**

This section allows the reviewer and the osteopath to summarise their overall views of the osteopath's CPD and practice.

Overall discussion and feedback:

|                        |
|------------------------|
| Comments:              |
| Strengths:             |
| Areas for development: |

*Discuss CPD Action plan for the next three year cycle*

This section is designed to consolidate the discussions already undertaken by identifying potential CPD activities to address areas of development identified over the course of the next three CPD cycle.

CPD activities do not need to be restricted to courses. Consider the following types of CPD activities:

- Seeking out a mentor to support development of business skills, clinical skills or communication skills.
- Undertaking GOsC e-learning to consolidate understanding and practical implications of the Osteopathic Practice Standards.
- Learning about and undertaking clinical audit to gain a picture of practice to improve understanding of prognosis.

## Peer Discussion Review Template

Comments:

Plans for CPD over the next three years – practitioner directed:

Plans for CPD over the next three years – to meet areas for development identified throughout the three year cycle?

**Conclusion:**

Have the CPD standards been met?

| <b>CPD Standards</b>   | <b>Yes or No<br/>(please delete<br/>as<br/>appropriate)</b> |
|--|---|
| CPD Standard 1: Has the registrant demonstrated that activities are relevant to the full range of osteopathic practice?        | Yes / No  |
| CPD Standard 2: Has the registrant demonstrated that objective activities have contributed to practice and the quality of care | Yes / No  |
| CPD Standard 3: Has the registrant sought to ensure that CPD benefits patients?  | Yes / No  |
| CPD Standard 4: Has the registrant maintained a continuing record of CPD activities?   | Yes / No  |

**Note:** The standards can still be met even though areas of development have been identified.

**Peer Discussion Review Template**

However, if the osteopath has not addressed area of development flagged at the last peer discussion review, or there is evidence that the osteopath is not engaging e.g. finding difficulty in demonstrating how they intend to enhance their practice moving forward and therefore some doubt that the osteopath is able to fully demonstrate Standard 2, that osteopath should be advised to seek their Peer Discussion Review from another reviewer or from GOsC.

**Declaration by Reviewer (to be completed by the reviewer only where the Peer Discussion Review has been completed successfully).**

I confirm that I have conducted this Peer Discussion Review and that, in my opinion, the CPD Standards have been met and that the person I am reviewing appears to provide good quality and safe patient care. I confirm that all information provided on this form is correct to the best of my knowledge.

Signed: .....

Print name: .....

Registration number (if applicable): .....

**Declaration by Osteopath (to be completed in all cases)**

I confirm that I have participated in this Peer Discussion Review, and that the information provided on this form is correct to the best of my knowledge. I confirm that I will retain a copy of this form in my CPD Portfolio.

Signed: .....

Print name: .....

Registration number: .....