

Council 12 July 2016 NCOR update Classification Public Purpose For noting Issue An update from the Director of the National Council for Osteopathic Research (NCOR) on the work of NCOR over the past year, May 2015 to May 2016. Recommendation To note the report. **Financial and** The GOsC made a contribution to NCOR in 2015-16 of resourcing £26,500 as part of an on-going funding commitment. implications Equality and diversity None implications Communications An update on NCOR activity is provided in each issue of The Osteopath. implications NCOR Director's Report 2015-16 Annex Author Brigid Tucker

Background

- 1. The GOsC continues to work with and financially support the National Council for Osteopathic Research (NCOR), the umbrella body promoting osteopathic research development. NCOR does this by fostering research, increasing research capacity and capability within the osteopathic profession, and raising the profile of osteopathic and osteopathic-relevant research findings.
- 2. NCOR is funded in approximately equal parts by the General Osteopathic Council, the Institute of Osteopathy, the Osteopathic Educational Foundation, and by all of the osteopathic educational institutions collectively. The GOsC's current annual financial commitment to NCOR is £26,500.
- 3. In 2012, an agreement was signed with Queen Mary University of London (QMUL) for the accommodation of NCOR over a three-year period; this agreement was renewed in May 2015 for a further three years.
- 4. In May 2014, NCOR became constituted as a charity (Registered Charity no. 1157217). The Trustees of NCOR include nominees from the Council of Osteopathic Educational Institutions, the Institute of Osteopathy, the Osteopathic Educational Foundation, and the GOsC. The GOsC's Chief Executive is the current Chair of Trustees.
- 5. NCOR's financial accounting is now independent of the GOsC and the first Annual Report and Accounts of the charity were approved by the NCOR AGM in November 2015. The audited accounts for 2015-16 will be presented to the NCOR AGM later in the year.
- 6. The Trustees meet approximately four times per year, serving also as a Management Board overseeing NCOR's strategic direction. A wider NCOR Research Council, representing all sectors of osteopathic practice, also meets approximately four times per year to advance NCOR's strategic objectives. NCOR has an executive team of four, operating on part-time contracts.
- 7. Council received a report on the work of NCOR in July 2015 and asked for an annual update on its work.

Discussion

NCOR 2015-16 update report

- 8. The Annex to this paper presents an overview of NCOR activities between May 2015 and May 2016, presented by the Director of NCOR. This report will inform the NCOR Annual Report 2015-16, including the Trustees' Annual Report and Accounts, which are not yet finalised.
- 9. NCOR reviewed its objectives in 2015 and those for the period 2015-18 are annexed to the Annual Report.

- 10. With regard to NCOR activities since May 2015, Council's attention is drawn in particular to:
 - a. Progress with the patient-reported outcomes (PROMs) data capture service developed and launched by NCOR which is now being used by a growing number of osteopaths.
 - b. The establishment of the Centre for Reviews and the recruitment of individuals to undertake a systematic review in the paediatric field as well as a range of other evidence summaries.
 - c. The wide range of presentations and speaking engagements being undertaken by the NCOR team.
 - d. The participation of the NCOR Director in the World Health Organization project looking at research in complementary and traditional medicines.
 - e. Coordination of the osteopathic profession's response to the draft NICE guidelines on the management of low back pain.
 - f. Continued take-up of the two adverse event reporting platforms: PILARS which allows osteopaths to anonymously report and learn from harmful or potentially harmful incidents occurring in practice; and PREOS which enables patients to report on their experiences of osteopathic services.
 - g. Other NCOR activities particularly the provision of information to osteopaths and patients via the NCOR website.
- 11. The NCOR Trustees and stakeholder organisations consider that this has again been a successful year for NCOR and its programme of work is proceeding well.

Recommendation: to note the report.



Annual Report May 2015 – April 2016

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- II. Background
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- IV. Future
- V. Financial accounts
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I. Director's Summary

NCOR in 2015-16 has had a year of consolidation, integration and some initiation.

Our patient reporting platforms were operationalised and utilised and our first analyses of data has shown that the Patient Incident Learning and Reporting System (PILARS) for use by osteopaths has produced a variety of interesting incidents and constructive comments. The Patient Reported Experiences of Osteopathic Services (PREOS) system has had a slow uptake but the content is useful to illustrate the patient perspective. The national database for patient reported outcomes is now implemented and we have around 63 osteopaths and their patients signed up to date.

Initial analysis of data shows that patients are responding well to osteopathic treatment and report positive experiences.

This year saw the emergence of our Centre for Reviews, we welcomed Dr Clare Miles to the NCOR team to do the paediatric review which was part funded by the crowd fundraising initiative from the previous year. We also have six volunteers who we are training in reviewing techniques, and who are updating some of our snap shot summaries and doing some new research.

We continue to disseminate research information to osteopaths using our website, the osteopathic magazines and social media which has in some instances generated lots of activity: one particular article generated nearly 5,000 views. In addition to osteopathic educational institution talks this year we have attended six regional society meetings to talk about the work of NCOR and how getting involved with the patient reported outcomes data collection exercise will help the profession. We continue to maintain a strong presence in the international arena and the NCOR Director was asked by the Osteopathic International Alliance to represent the profession at a World Health Organisation taskforce to discuss and address the issues surrounding research in complementary and alternative health throughout the world.

Queen Mary University of London, Barts and The London School of Medicine and Dentistry continue to support NCOR as do most of the osteopathic education institutions and this year we welcomed the Sutherland Cranial College of Osteopathy as members of NCOR.

Dawn Carnes Director

II. Background

The role of NCOR is to promote for the public benefit the advancement of education and the promotion of good health in particular but not exclusively by facilitating and promoting osteopathic research, representing the profession, and disseminating osteopathic relevant research information.

NCOR is funded by donations from the General Osteopathic Council (GOsC), the Institute of Osteopathy (iO), the osteopathic education institutions (OEIs), the Osteopathic Educational Foundation, and other generous donations from members of public, osteopaths and supporters.

Dr Dawn Carnes is the NCOR director (one day per week), Carol Fawkes is the Senior Research Officer and Austin Plunkett is the Research Assistant (both three days per week), Dr Clare Miles is our new systematic reviewer on a one year contract (2 days per week).

III. Key Achievements 2015 – 2016

1) Dissemination

Website

Approximately 1,600 people visit our website per month. Mobile and tablet access continues to grow, with access by these devices approaching 20% while desktop access has dropped to 80%.

Social media

We have now have 1,320 Twitter followers. Our Facebook page is well reviewed and liked with over 1,362 followers. We gain about one follower per day on both social media sites.

Our most popular post on Facebook in the past quarter has been viewed 4,800 times; additionally it was "liked" 48 times and "shared" 34 times. An average Facebook post by NCOR is viewed by 700-800 people.

Twitter attracts a higher average number of views compared to Facebook (~1,800 per tweet) although a lower max number of views (~2,500). This approximates to our tweets being seen 230 times per day.

Outreach visits

This year, we decided to increase the number of face to face contacts with the profession to promote NCOR and our projects for Patient Reported Outcomes and our adverse event learning platforms. We made presentations at the OEIs (five), Osteopathic regional societies (six), the Sutherland Cranial College conference and training day, and the GOsC regional communications network day.

Promotion of NCOR and Presentations

We have also presented our work at:

- The Institute of Osteopathy convention November 2015, Staines, UK
- The Osteopathic International Alliance conference, oral presentation on app development and quantitative findings 27th September 2015, Montreal, Canada

- William Harvey Research Day (poster presentation) 20th October 2015, QMUL, London, UK
- The Society for Back Pain Research conference (oral presentation) and poster presentation 5th and 6th November 2015, Bournemouth, UK;
- The PROMs summit (two posters describing quantitative and qualitative findings) 1st December 2015, Birmingham, UK.
- Royal College of Chiropractors AGM, talk about research initiatives in osteopathy 28th January 2016, London
- American Osteopathic Association convention, Keynote 15thto 17thMarch 2016, Orlando, USA
- British School of Osteopathy, Evaluation of the OsteoMAP programme April 2nd 2016 London.

2) International relations

The director of NCOR was also asked by the Osteopathic International Alliance to represent osteopathy and contribute to a World Health Organisation project on the development of research in complementary and traditional medicines. This was an important working group on an international platform that will influence the global health agenda by recognising that a vast proportion of people do not have access to western medicine and rely on traditional and complementary therapies, but we do not know enough about their effectiveness and safety, how widely they are accessed, and what the type of conditions they are used to aid.

3) Centre for reviews

In February 2016 we appointed a systematic reviewer to conduct the 'non-clinical' outcomes paediatric review that is in part funded from money donated by our crowd fund raising campaign in 2014/15. We have also recruited six volunteers, who we have trained and are supporting to undertake some research updating our snapshot summaries of evidence. These snapshots are provided to osteopaths on our website.

4) Adverse event learning and reporting platforms

Our adverse events learning platform: PILARS (for collecting data from practitioners) and PREOS (for collecting data from patients about their experiences of osteopathic care) have now been available for use for just over a year.

PREOS (Patient reported experience of osteopathic services)

PREOS is the learning resource for osteopaths so they can see how patients perceive osteopathic care and report their experience of practice (<u>www.ncorpreos.org.uk</u>). To date we have had 16 patient reports submitted. Reports have been largely positive.

PILARS (Practitioner incidences, learning and reporting system)

PILARS – Patient Incident Learning and Reporting System allows osteopaths to upload information about difficult situations experienced in practice with the aim that other practitioners can learn from the way they dealt with these situations. This platform can be found at: <u>www.ncorpilars.org.uk</u>. To date we have had 15 incidence reports submitted and all comments posted have been constructive and informative and indicate professional maturity. We hope that the osteopaths have found this service helpful.

The incidents reported cover widely varying themes. Most common themes are:

• Managing patient expectations

Worries about side-effects of osteopathic treatment

Next most common are themes including:

- Discussing consent with patients
- Clinical tests
- Undetected pathology

Less-frequently reported issues include:

- Dealing with unsatisfied patients
- Challenging patients (dealing with patient aggression and unusual demands)

Comments in PILARS mainly addressed managing patient expectations. They also covered: anatomy; symptom duration; involvement of the patient in decision-making; risks associated with thrust techniques. Less-frequently occurring themes were wide-ranging and included: patient-clinician boundaries; identifying patients who have challenging needs; the value of clinical judgement; side-effects and benefits of treatment.

One incident was highlighted in the report, wherein a patient experienced cervical artery dissection after treatment by an osteopath. The patient had been examined by their GP and ophthalmologist and medicated for migraine. The osteopath undertook a peer-supervised critical incident review.

More information can be found in our <u>summary report</u>.

5) Patient reported outcome measures (PROMS)

NCOR with Clinvivo and the financial support of the iO have developed an IT solution for data capture of patient reported outcomes after osteopathic treatment. Data are collected using a smartphone app or online facility. This project was initiated to gather data to provide evidence for the profession about the outcomes of osteopathic care on the patient population that we treat.

During the last year the PROM data collection facility has progressed, we:

- completed all the qualitative interviews;
- completion of the piloting of the app;
- modified the app based on the findings of the pilot;
- implemented the app in clinical practice.

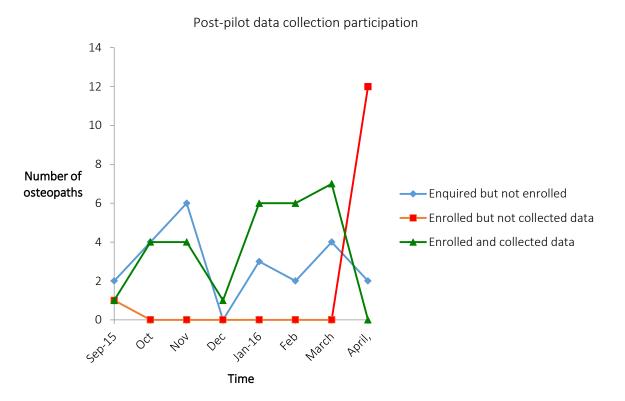
Implementation of the app

A modified version of the app was launched for the profession to use in September 2015. Although uptake has been slow it is increasing coinciding with outreach visits, and the opportunity for osteopaths to hear about the experiences of their peers when using the app. To support individual osteopaths when using the app, a resource pack is sent to them and considerable support is given by the NCOR team.

The NCOR website related to PROMs has been revised to coincide with the implementation stage of the app, and areas for clinicians and patients are available describing the developmental process, and including a section on Frequently Asked Questions.

Since the implementation of the app began, data returns are continuing to rise steadily. The number of osteopaths now equipped to use the app is 63, we have had 102 patients complete a baseline questionnaire with 41 returns for a one week follow up and 18 at six weeks, to date.

Annex to 15



The phone app is now available on Android, Windows and iOS (Apple) smart phone operating systems. The peer-review process required by Apple has been extensive, but having the app also available in iOS format for use on iPhones and iPADs which should help uptake among patients.

Encouraging uptake.

Communication about the development of the PROM app, the findings of our qualitative research and quantitative analysis have appeared in the osteopathic press (published and electronic bulletins) on a regular basis. In addition we have attended six regional society meetings, talked to students at five OEIs and presented the work at the GOsC regional society day in March 2016.

6) Advice and guidance

Information requests and advice

We have had 107 formal and informal enquiries between May 2015 and April 2016 for information and advice about research, using the app, where to locate information, and requesting support in providing evidence to different stakeholders.

NCOR have been providing advice and support to the profession with regard to the Advertising Standards Authority's Code of Advertising Practice and acceptable and unacceptable claims made about osteopathy in adverts promoting osteopathic services. This work has largely been in reaction to a campaign by a group seeking to highlight pseudo-science and false claims made by practitioners about the therapies they deliver. This work is ongoing.

In addition, the National Institute for Clinical and Health Excellence (NICE) produced new draft guidance for the management of low back pain with and without sciatica, NCOR as a stakeholder gave very detailed comments on behalf of and in the interest of the osteopathic profession.

7) Miscellaneous developments

Future of the Profession

NCOR are one of the five bodies contributing to the initiative for the development of the profession (the Osteopathic Development Group). NCOR's role is to develop the evidence base and relevant research for osteopathy which we are continuing to provide.

Regional hubs

The regional hubs continue, there are five active regional hubs. Hub meetings are run via Skype or teleconference where possible. Topics for hub meetings are selected by attendees, and are relevant to clinical practice.

Engagement with OEIs

The NCOR team continues to support the promotion of research in the OEIs through a number of methods. Talks have been delivered at six of the OEI throughout the year. Members of the NCOR team also act as external examiners and assess research presentations within some of the OEIs.

IV. The Future

1) Dissemination of information

We continue to try and make research more user-friendly and are disseminating information through the website, social media, OEI talks, and conference presentations.

2) Conference and CPD

We plan to promote NCOR and the latest research via two, one day conferences one in London and one in the northern counties. Multi-modal care is going to be a future focus of care delivery based on new guidance, and Osteopaths may need to more formally recognise the multi-component aspect of the care they give their patients to align themselves closer with NICE recommendations.

3) Web site re-design

Our website has grown extensively over the last three years and we will need to spend both some time and money updating and re-organising this resource to ensure that it is user friendly and accessible for all online devices, for example standard and smart phones.

V. Finance

This financial year we lost income from three of the OEIs, Leeds Met, Oxford Brooks and the London College of Osteopathic Medicine, due to closure and financial constraints (the latter). However due to NCOR becoming a charity, Barts and The London School of Medicine and Dentistry no longer charge NCOR for their overhead costs. This has offset the losses from the donations of the three OEIs.

Income has been generated from the final payment from the British School of Osteopathy for our work on the Evaluation of chronic pain service OsteoMap (\pm 7,166), the GOsC for our work on the

analysis of claims and complaints arising from insurers, GOsC and the iO (\pm 1,100). In addition we have received \pm 4,363.25 in donations.

Financial summary

Full financial statements are in preparation and will be presented to the NCOR AGM later in the year.

| | Income | Outgoings |
|---------------------------------|--------------|------------|
| Contributions from stakeholders | £106,550.00* | |
| Donations | £4,363.25 | |
| Additional work | £8,266.00 | |
| QMUL | | £61,561.00 |
| Director Honoraria | | £12,000.00 |
| Expenses | | £1,809.62 |
| | | |
| Totals | £119,179.25 | £75,370.62 |

*n.b. this figure includes a one-off donation from the OEF of £50,000 which was not intended for use in the 2015-16 financial year.

VI. Appendices

NCOR objectives 2015 – 2018

To promote for the public benefit, the advancement of education and the promotion of good health, in particular but not exclusively by the objectives shown in column 2 Table 1. The final column indicates the operational and strategic tasks for 2015-18. The items in black are those that are undertaken by NCOR already, those in italics are projects that would require additional funding and are still to do.

| Area | Objective | Current and Future (red) |
|---|---|--|
| Development | Leading and facilitating osteopathic research development in the UK, including developing a comprehensive and cohesive research strategy providing both direction and coordination of osteopathic research | Continuing the development and implementation of existing projects Using the Delphi consensus study findings to prioritise studies for targeting research funding Day to day management of NCOR activity; responding to enquiries |
| Representing the profession | Representing the osteopathic profession on matters relating to the osteopathic evidence base and research development. Acting on behalf of the profession, in a research context, to the media, the public and patients, policy-makers, the inter- professional research community, other health professions and healthcare regulators | Actively seek opportunities for NCOR representation on relevant panels, development groups and professional advancement bodies, as opportunities arise Respond to requests about research as they arise and create a FAQ section about osteopathy the profession can use when discussing osteopathy in the wider health care arena |
| Promoting research capacity and scholarship | Providing a forum for osteopathic educational institutions (OEIs) through which to forge consistent standards in research governance, to share expertise, achieve economies of scale, and foster undergraduate and postgraduate research collaboration | Four charity member meetings per annum Encourage and coordinate cross-OEI research Raise funds for a new PhD studentship (2017) |
| Dissemination of relevant research | Providing osteopaths, the public and patients, healthcare professionals, and the research and academic community with a recognised, high quality and accessible resource of research-related information concerning the distinctive | Continue to update the website and use social media to inform the profession and others of relevant work Set up a blog |

Table 1. NCOR Objectives

| | body of knowledge within osteopathic practice | |
|--|---|---|
| Collaboration with a view to raising funds | Improving awareness of osteopathic research development amongst osteopaths and the wider community. Establishing links and build networks within the research fraternity, nationally and internationally, with a view to development through collaboration. Formulating and foster strategies for attracting funding for osteopathic research development. | Continue to work with the OIA as chair of the International Osteopathic Research Network Explore fund raising opportunities: NCOR conference CPD online Identify key projects for fundraising Undertake ad hoc research projects |
| Research governance | Providing systems relevant for grants governance and research governance for the benefit of all stakeholders. | Update research governance guidance as required and continue to advise in this area |
| Research projects and professional development | Fostering and disseminating outputs from osteopathic audit, evaluation, and research activities. | Continue with: The PROMS project Developing the PILARS and PREOS sites Initiate a systematic review centre for osteopathic relevant research |