



Council
18 July 2018

Support for the Council of Osteopathic Educational Institutions

Classification	Public
Purpose	For decision
Issue	The paper proposes making a small annual grant to COEI over the next three years as a part contribution to their employment of a part-time staff member to support COEI's development.
Recommendation	To agree to make a grant of £3,000 per annum to COEI for the next three years, subject to a matching commitment from COEI and the Institute of Osteopathy, and progress being made against agreed objectives.
Financial and resourcing implications	Funding is available for this work from a recent legacy payment made to the GOSc.
Equality and diversity implications	None.
Communications implications	None
Annex	Outline proposal and funding request from COEI
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Background

1. One of the objectives incorporated in the GOsC's 2016-19 Corporate Strategy is 'to ensure that the osteopathic profession continues to develop its capacity to improve patient experience and high quality care'. In our 2017-18 Business Plan we have identified an action to:

'Work with the Council of Osteopathic Educational Institutions (COEI) to support their proposals to develop the organisation to better meet the needs of the sector including develop mechanisms for bringing together faculty from different OEIs to identify challenges in the delivery of osteopathic education'.

2. This paper explores a mechanism for encouraging the development of COEI and proposes making a small annual grant for COEI to employ a part-time staff member to support this work.

Discussion

3. Over the past five years significant development activity has taken place within the osteopathic profession. In particular, the Institute of Osteopathy (iO) has taken on a far higher level of responsibility for the future development of the profession which will in future be aided by its stewardship of funds contained within the Osteopathic Foundation.
4. In addition, all of the members of the Osteopathic Development Group (ODG) – which includes COEI, the iO, the Osteopathic Alliance, and the National Council for Osteopathic Research, as well as the GOsC – contribute to the ODG's development projects.
5. However, what has become increasingly clear is that despite the establishment of the ODG, COEI has continued to struggle to develop itself and provide a collective voice on behalf of osteopathic education, whether within osteopathy or more widely.
6. There are a number of reasons for this including:
 - a. The competitive environment within which the osteopathic educational institutions operate
 - b. A lack of capacity at institutional level to contribute to collective goals
 - c. A loss of momentum following the untimely death of the past Chair of COEI.
7. COEI appointed a new Chair earlier this year who is keen for COEI to develop a more strategic role within osteopathy and more widely within the healthcare education sector. This would include:
 - a. Engagement with a variety of external stakeholders
 - b. Development of activities aimed at improving professional and educational practice

- c. Contributing to policy development in osteopathy and health education more broadly
- d. Sharing best practice and developing the osteopathic education faculty.

The ultimate long-term objective would be for COEI to become a 'Faculty of Osteopathic Educators'.

- 8. We have had a number of discussions with COEI and the iO about these ideas and how we might support COEI's development. This has resulted in the development of an outline proposal by COEI (attached at the Annex) which includes a request for financial support to enable COEI to employ a part-time staff member for an initial period of three years.

The Executive's view

- 9. The Executive has a good relationship with COEI and its constituent members. We hold regular meetings to discuss issues of mutual interest, with the chair rotating between COEI and the GOsC. However, we are aware that it has sometimes been difficult for COEI to engage effectively with initiatives generated by ourselves and from elsewhere within education and healthcare.
- 10. The pace of change in these areas continues to grow. The recent recognition of osteopathy alongside allied health professions within NHS England is starting to open up a range of new opportunities for the profession, including within Health Education England. The GOsC continues to set an ambitious policy agenda including new CPD, revising standards and exploring new areas around values and professional boundaries. We believe it is essential that the osteopathic education sector is able to contribute fully to these initiatives.
- 11. We are also aware that a high proportion of registrants are engaged in osteopathic education and there is increasing mobility of those educators between institutions. However, there is little common understanding of what it means to be an osteopathic educator and the standards required of such individuals and how they might be obtained. This would appear to be an important objective for an aspiring 'Faculty of Osteopathic Educators'.
- 12. In other professions some of these roles are undertaken by organisations such as the Medical Schools Council (www.medschools.ac.uk) and the Council of Deans of Health (<https://councilofdeans.org.uk>); organisations that have an established track record of working collectively on behalf of their sectors of health education and having resources to match.
- 13. The proposal presented by COEI is modest. If all three parties commit to funding it will support one individual working for one day a week. However, it does indicate clear intent and may well be better to build up this work over time rather than being over-ambitious from the start.

GOsC funding criteria

14. In June 2013, Council agree an approach to funding development projects within the profession. These criteria were:
- a. *Developmental*: the anticipated outcome would represent a clear development in osteopathic education, training or practice that aims to deliver a measurable and continuous improvement in the quality or safety of osteopathic healthcare.
 - b. *Public and patient benefit*: the initiative represents a clear public or patient benefit in terms of the enhanced quality and safety of osteopathic care.
 - c. *Cross-professional applicability*: the GOsC should support only projects that deliver developmental benefit that is applicable to the whole profession rather than for the benefit of a particular group or groups of practitioners.
 - d. *Collaboration*: initiatives should not be those of a single organisation but involve multiple partners and there should also be defined contributions from those organisations whether financial or in-kind.
 - e. *Clarity of outcome*: projects will only be considered for support if they include a clear plan for how the project outcomes are to be achieved and disseminated across the osteopathic profession.
15. It was also agreed that the GOsC would not provide support for any initiative that has the aim of promoting the commercial or sectoral interests of osteopathic service provision.
16. Where proposals met these criteria it was agreed that they might be considered worthy of grant funding by the GOsC with the money drawn from reserves. As reported at the last Council grants have been made in respect of four projects:
- a. Leadership – funding for the joint OU/ODG programme to run for three years (2017 is the third year of this project).
 - b. Mentoring – funding for initial research and a pilot project.
 - c. Evidence – funding was provided for the completion of NCOR’s two adverse event learning platforms – PILARS and PREOS – see www.ncor.org.uk. This work has been completed.
 - d. Advanced Clinical Practice (ACP) – funding for research to inform the development of an approach to advanced clinical practice in the context of osteopathy.
17. The proposal from COEI is somewhat different from those anticipated when the criteria above were established in 2013. However, it does appear to meet the majority of them. Importantly, it would also appear to meet our objectives under the Osteopaths Act and therefore our public purpose as a registered charity.

18. However, a grant to COEI would be for an organisation rather than a specific ODG project and it should perhaps be considered as a parallel activity rather than part of the ODG agenda.

Legacy of Miss Marjorie Smith

19. Some years ago the GOsC was informed that it was the beneficiary of the will of the late Marjorie Smith who left a portion of her estate to the British School of Osteopathy and the GOsC (and others). This legacy which included property in South Africa has only recently crystallised and we have received a total of £11,680.
20. We have no knowledge of Ms Smith's interest in osteopathy but we assume, given the other legacy to the BSO, that her interest was in osteopathic education. Therefore, we have concluded that it would be appropriate to apply these funds to an educational activity rather than simply use them to meet the GOsC's ongoing revenue needs. Making a grant for the development of COEI would appear to be such a suitable activity.

Matching funding and grant conditions

21. If Council were to agree to make a grant to COEI then it should be conditional on it being matched by COEI itself and the iO. COEI has confirmed that it will match the grant from its limited funds and the iO has indicated that in principle it would also make an equal contribution.
22. COEI will also need to be very clear as to the anticipated deliverables in taking forward its objectives over the three year period, and how it proposes to monitor progress for its own internal needs as well as to report to the external funders. This will need to be the subject of further discussion with COEI and the iO before any funds are released.

Recommendation: to agree to make a grant of £3,000 per annum to COEI for the next three years, subject to a matching commitment from COEI and the Institute of Osteopathy, and progress being made against agreed objectives.