

Council 20 July 2023 Patient involvement in osteopathic education

Classification	Public
Purpose	For decision
Issue	Development of patient involvement in osteopathic education.
Recommendations	1. To consider the report and the recommendations outlined to inform our thinking regarding next steps.
	2. To agree to publish the report.
Financial and resourcing implications	All work has been conducted in-house.
Equality and diversity implications	Equality, diversity and inclusion (EDI) issues were explored during interviews with osteopathic educational institution (OEI) staff. Discussions focused on how to adapt engagement strategies to meet the needs of the patients they work with and ensure as many patients who want to get involved in osteopathic education can do so. For example, improving the accessibility of patient feedback resources (easy read documents) and trialling hybrid patient panel meetings.
Communications implications	Our intention is to publish and disseminate the report in due course. We will continue to work with the osteopathic educational institutions and patients to promote development in this area.
Annex	A. Patient engagement in osteopathic education report May 2023B. Survey report (2019)
Author	Rachel Heatley, Stacey Clift, Banye Kanon, Steven Bettles and Fiona Browne

Key messages

- Patient and public involvement in osteopathic education is part of our educational requirements outlined in our <u>Standards for Education and Training</u>. Such involvement can yield a range of benefits for patients themselves, students and educational providers including for example, improved quality of care, greater exposure to important issues for patients, and greater understanding of the patient / practitioner relationship.
- The purpose of this thematic review is to support patient involvement in osteopathic education with the aim of collaborating with osteopathic educational institutions (OEIs) to identify good practice in the sector, explore barriers and enablers to involving patients in osteopathic education and share the learning with institutions.
- The thematic review has spanned 2019-2023 and included a sector-wide survey, a second source literature review of patient involvement in healthcare education curricula, interactive workshops, a review of institution's annual reports and semi-structured interviews with representatives from all the providers.
- In April 2023, we hosted a workshop with OEIs to highlight the benefits of patient involvement, share findings from the thematic review and provide a chance to reflect. This workshop demonstrated the progress that had been made since we commenced the project and future actions for OEIs to further develop this area.

Background

- 1. Patient and public involvement in osteopathic education is a key feature of our <u>Graduate Outcomes and Standards for Education and Training</u> and our business plans and an essential part of the delivery of high quality osteopathic care which is in our <u>current Strategic Plan</u>.
- In 2019 a review into patient involvement in osteopathic education was undertaken by institutions in the context of the Guidance for Osteopathic Pre-Registration Education (GOPRE) (2015), which also mentioned students seeing patients for repeat sessions. GOPRE (2015) set out a range of presentations which students should be exposed to and have experience in managing.
- 3. As the project evolved so too did the context in which patient involvement was undertaken by OEIs. Osteopathic education is specifically referenced in the updated <u>Graduate Outcomes and Standards for Education and Training (2022)</u>.

Education providers must ensure and be able to demonstrate that: they involve the participation of students, patients and, where possible, the wider public in the design and development of programmes and ensure that feedback from these groups is regularly taken into account and acted upon (Theme 1).

4. The paper provides an overview of the project, explores findings from both the survey and interviews, and draws on the patient involvement activities discussed by education providers in their 2021 and 2022 annual report submissions.

Discussion

- 5. In 2019, to inform the thematic review we examined a series of secondary source literature so that we could compare osteopathic education with other examples of patient involvement in healthcare education curricula. The literature predominantly but not exclusively looked at patient involvement in undergraduate medical education because it had the greatest range of sources, as patient involvement 'has become common practice' in this field¹. It highlighted the benefits for students, patients and educational providers as well as the common barriers and enablers to involving patients.
- 6. Examining the second source literature enabled us to deliver a multi-pronged approach for undertaking a thematic review: (For full report see Annex A)
 - a. Survey (2019) and a multi-stakeholder workshop (2021)
 - b. Review of annual reports (2021 and 2022)
 - c. Semi-structured interviews (2022) and a quality assurance workshop (2023)

Thematic review findings

- 7. Key findings from this report are:
 - a. In 2019, initial findings highlighted that OEIs used a range of mechanisms seek patient feedback about the care received, the most common being compliments and complaints and paper-based surveys. There was limited involvement of patients in: curriculum development, teaching, governance structures and recruitment of prospective students. OEIs' plans centred on enhancing current patient involvement practices as opposed to diversifying engagement mechanisms. (This 2019 report is set out at Annex B for information).

¹ <u>Dijk W, Duijzer E, Wienold M. Role of active patient involvement in undergraduate medical education: a</u> systematic review, en. 2020

- b. By 2023 there had been a shift in thinking towards diversification which resulted in the establishment of patient panels, greater involvement of patients as 'teachers', the development of policies to underpin patient engagement, and a successful pilot involving a patient joining a research and ethics committee.
- c. The method of involvement that tended to yield the most benefits for students was 'patients as teachers'. OEIs reported it enabled students to gain valuable patient interaction skills, increased their confidence in talking to patients and ultimately resulted in enhanced learning outcomes. However, the process could be unwieldly and required careful management.
- d. Universal enablers to engaging successfully which emerged through the review which include direct recruitment of patients by staff, having an institutional patient involvement champion, cross-team working, and dedicated resources (time and money).
- e. The thematic review has shown there is no one size fits all framework for patient involvement. What works in one OEI may not work in another, due to the differing patient profiles, geographical locations, whether OEIs are single institutions or based in a university setting, and how important and impactful patient involvement is deemed by the education provider.
- f. OEIs clearly value patients and recognise the importance of incorporating the patient voice in osteopathic education but are keen to avoid tokenism. Their continued desire to do 'more' is underpinned by nervousness because they 'want to get it right' but concerns regards resourcing particularly time that were identified in 2019 still exist.
- 8. Recommendations include:
 - a. From a sector-wide perspective, there is a need to learn from and build on experience, to avoid reinventing the wheel, and to connect those working in the field.
 - b. Further reflection is required on how to provide training and support for both patients and staff in these new ways of working. Taking a formalised approach may help to mitigate some of the nervousness staff have expressed in diversifying their engagement.

- c. More formalised infrastructure is necessary to ensure psychologically informed environments exist providing a safe, comfortable and welcoming environment for patients/users.
- d. Policies and processes are required to address issues such as recruitment, payments, and ethical issues, as well as providing a safe, comfortable and welcoming environment for patients/users.
- e. There is a need for a coordinator within an OEI who can be the link between the institution and the patients.
- f. OEIs could diversify recruitment by reaching out to patient organisations and their networks, local community groups as well as members of condition-specific support groups.
- g. The creation of a repository of examples of good practice, including a database of initiatives and materials.
- h. If OEIs are to further embed patient involvement, and provide support and funding, especially during a cost of living crisis, evidence of the value added to the educational programmes will be needed.
- 9. Our intention is to publish report in a user friendly format in summer 2023. Patient and public involvement in osteopathic education will continue to be a part of our good practice and quality enhancement workstream during 2023/24 and will continue to form a part of our quality assurance monitoring processes annually.

Recommendations:

- 1. To consider the report and the recommendations outlined to inform our thinking regarding next steps.
- 2. To agree to publish the report.