

Summary of findings from CPD Evaluation Survey 2024 presented to PEC in June by Dr Stacey Clift

1. If we take each of the strategic objectives (see Figure 1) of the CPD scheme in turn and look at them against the survey results we can identify the following key findings (see infographics produced- Figures 2, 3, 4 and 5).

Figure 1: Strategic objectives of the CPD Scheme

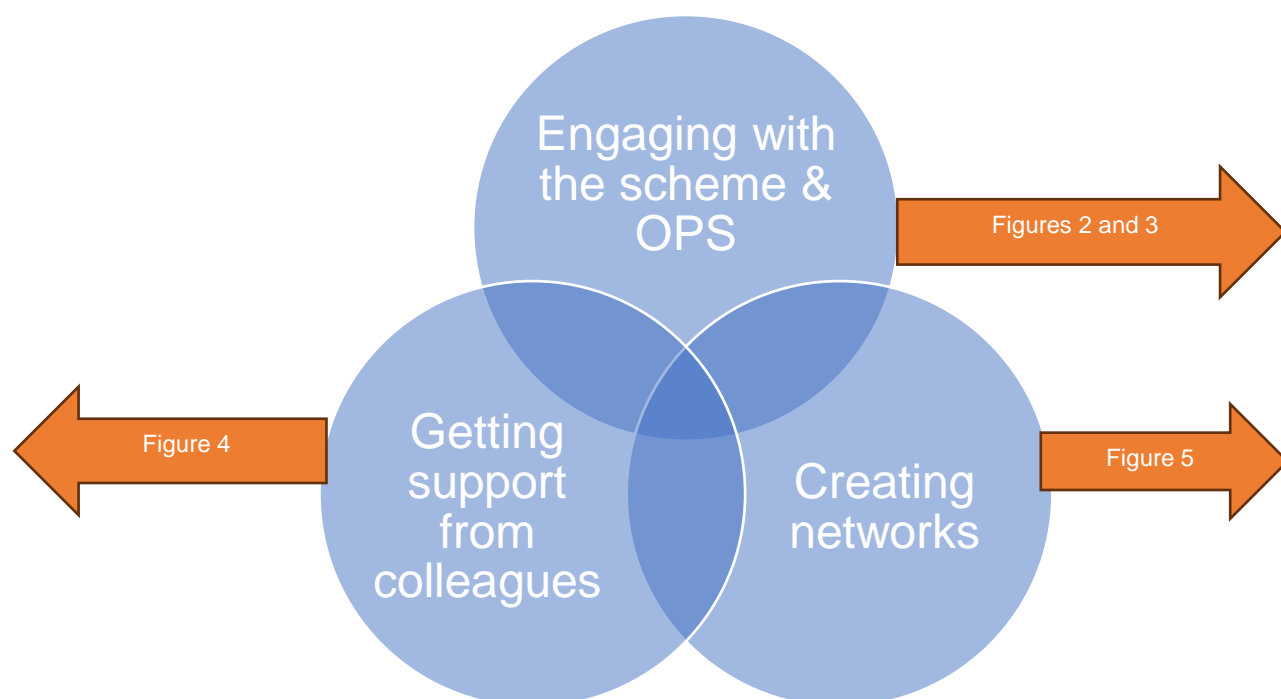
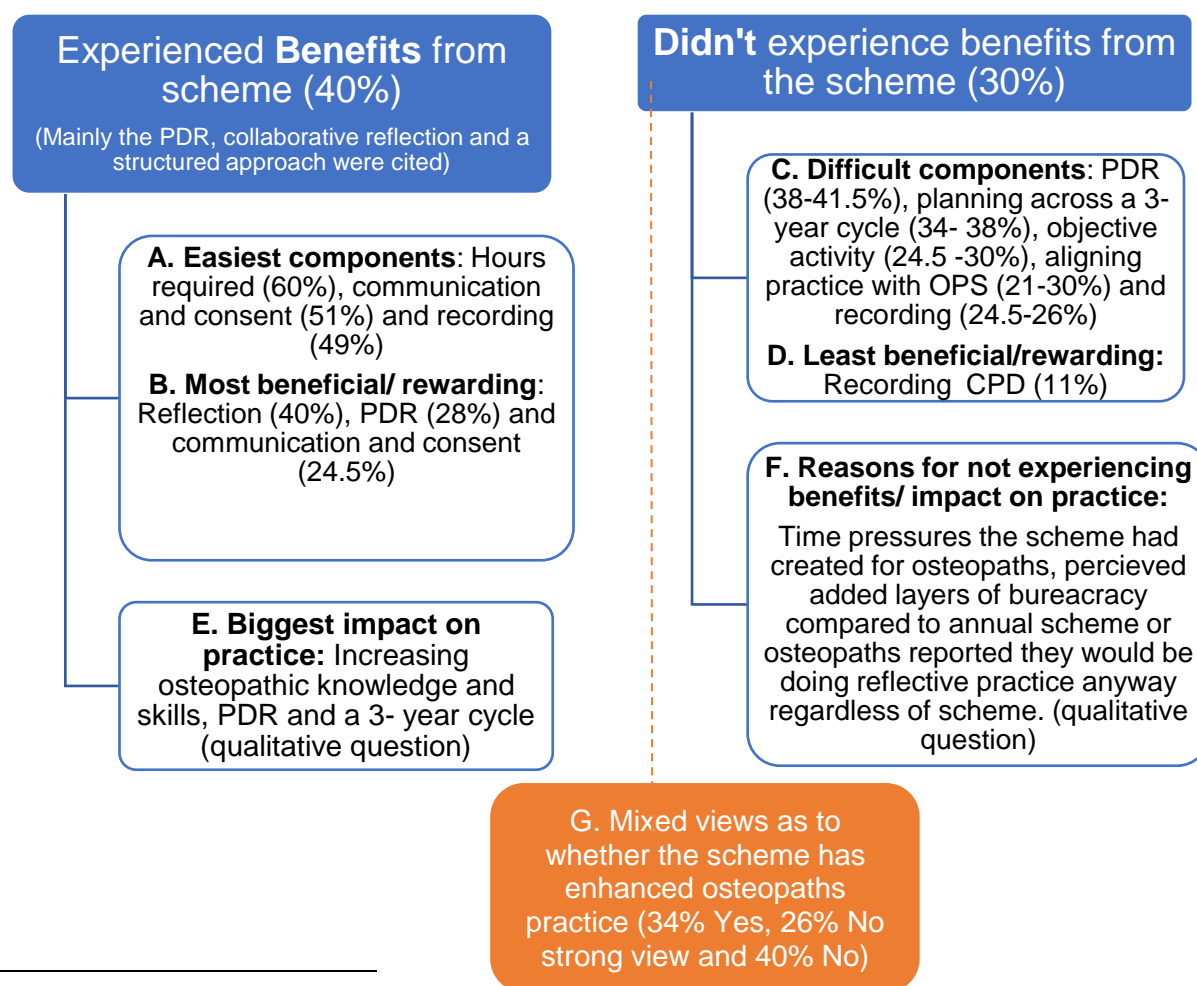


Figure 2: Engaging with the CPD scheme¹



¹ Key to Figure 2:

A: Components of the CPD scheme respondents considered easy: Total hours (60%), 45 hours learning with others (58%), communication and consent (51%), recording CPD (49%), Reflecting on CPD (47%), PDR (47%), understanding how CPD aligns with OPS (43%) objective activity (40%) and planning across 3-year period (32%)

B: Components of the CPD scheme that respondents considered most beneficial/ rewarding: Reflecting on CPD (40%), PDR (28%), communication and consent (24.5%), None of them (23%), planning across a 3- year period (19%), understanding how to align CPD with OPS (17%), objective activity (17%), recording CPD (11%) and other (4%)

C: Components of the CPD scheme that were considered difficult rather than easy: PDR (38%), planning across a 3-year cycle (38%), objective activity (30%), aligning practice with OPS (30%), recording CPD (24.5%), communication and consent (21%), hours component (21%) reflecting on CPD (11%). Components that were considered most difficult and challenging: PDR (41.5%), planning across a 3-year period (34%), recording (26%), objective activity (24.5%), understanding how CPD aligns with OPS (21%), communication and consent (17%) and reflection (11%)

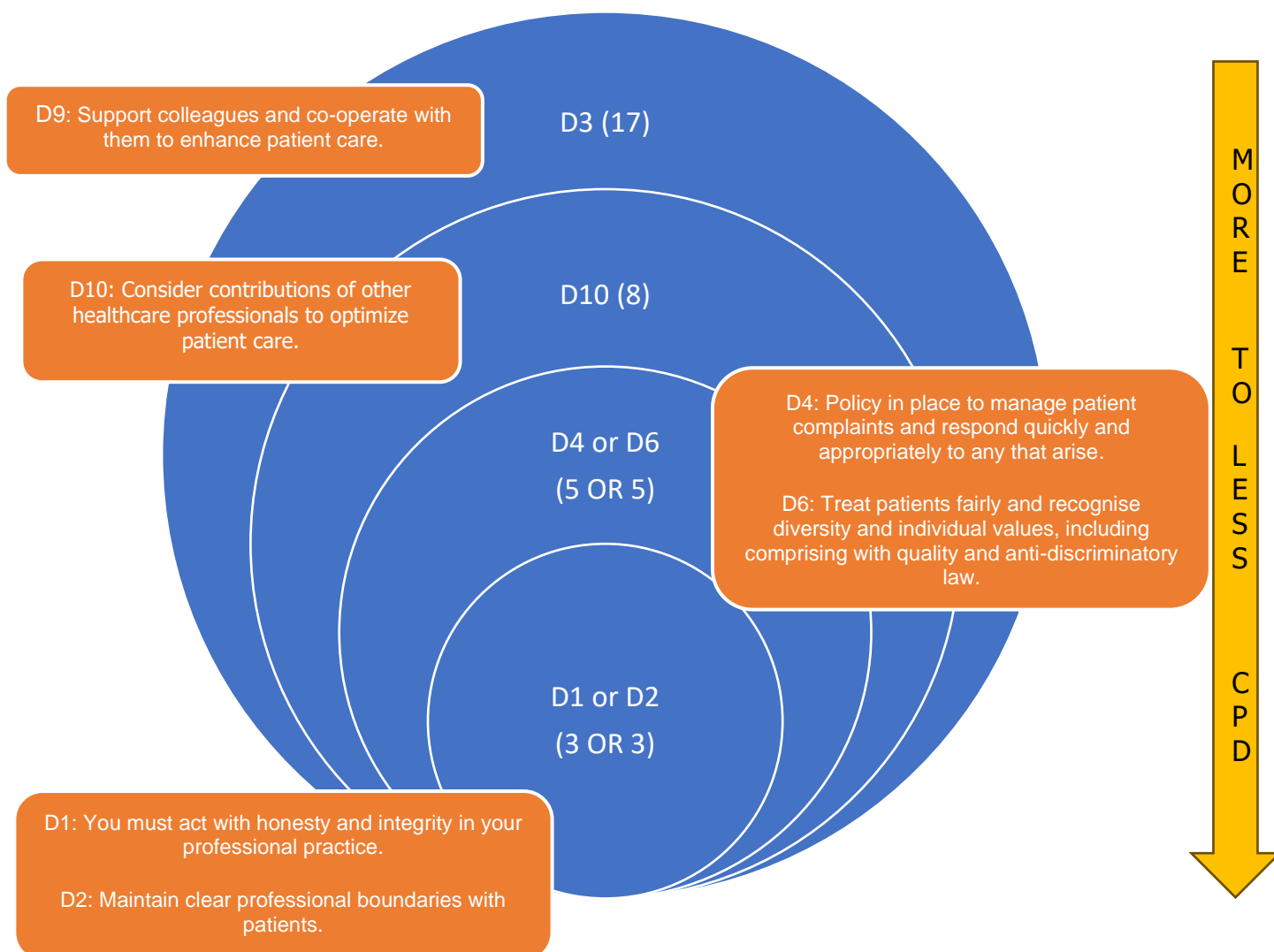
D: Components of the CPD scheme that respondents considered most beneficial/ rewarding: Reflecting on CPD (40%), PDR (28%), communication and consent (24.5%), None of them (23%), planning across a 3- year period (19%), understanding how to align CPD with OPS (17%), objective activity (17%), recording CPD (11%) and other (4%)

E: Qualitative views on the biggest impact the scheme has had on practice

F: Qualitative views on why osteopaths have not experienced benefits from the scheme

G: I believe the CPD scheme has enhanced my practice: Agree (34%), No strong view (26%) and Disagree (40%)

Figure 3: Engaging with the OPS, specifically professionalism (Theme D) and where osteopaths are undertaking CPD²

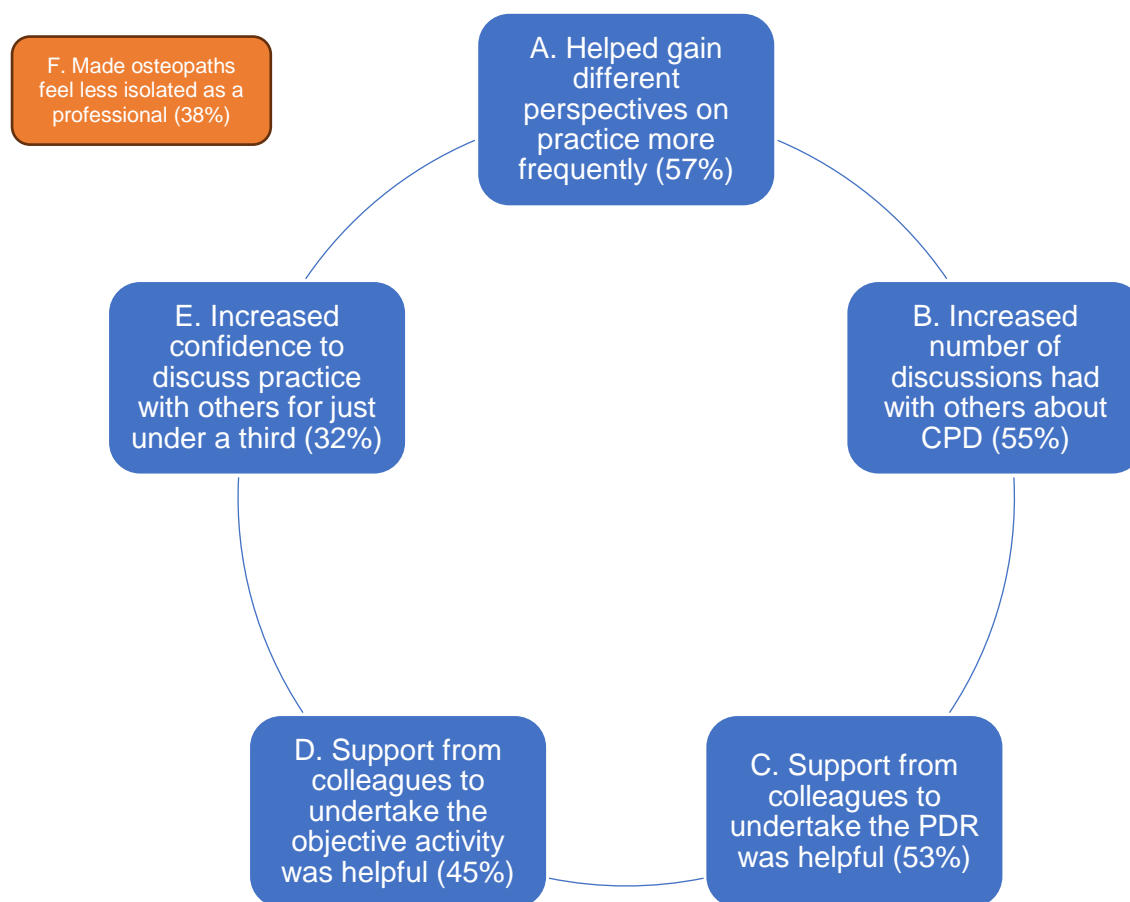


2. We see from Figure 2 and 3 that osteopaths are engaged with the CPD scheme, and the OPS and the majority have experienced benefits in doing so. What we perhaps see from Figure 3 is that CPD on professionalism tends to focus on supporting colleagues and co-operating with them or considering the contributions of other healthcare professionals to optimise patient care, while little CPD is undertaken around professional boundaries and honesty and integrity.
3. We see from Figure 4 that for most osteopaths the scheme has allowed them to obtain support from colleagues, which has helped gain different perspectives on practice, increased the number of discussions had and as part of this the PDR was considered particularly helpful. For a smaller proportion of osteopaths, obtaining help from colleagues as part of the scheme has increased their confidence to discuss CPD with others and the objective activity was considered

² Numbers in brackets in Figure 3 are Total number of osteopaths that mentioned CPD in this area.

helpful. What is perhaps less clear (and is why it is outside of the circle in Figure 4), is that it would appear that getting support from others, doesn't necessarily make osteopaths feel less isolated as a professional.

Figure 4: Getting support from colleagues as part of the CPD scheme and findings from CPD Evaluation Survey³



³ **Key to Figure 4:**

A: Helped me gain different perspectives on my practice more frequently: Agree (57%), No strong view (24.5%) and Disagree (19%)

B: Increased the number of discussions about my CPD and practice with others: Agree (55%), No strong view (23%) and Disagree (23%)

C: Support from colleagues to undertake the PDR was: Helpful (53%), No strong view (28%) and Unhelpful (19%)

D: Support from colleagues to undertake the objective activity was: Helpful (45%), No strong view (36%) and Unhelpful (19%)

E: Increased my confidence to discuss practice with others: Agree (32%), No strong view (38%) and Disagree (30%)

F: Made you feel less isolated as a professional: Agree (26%), No strong view (35%) and Disagree (38%)

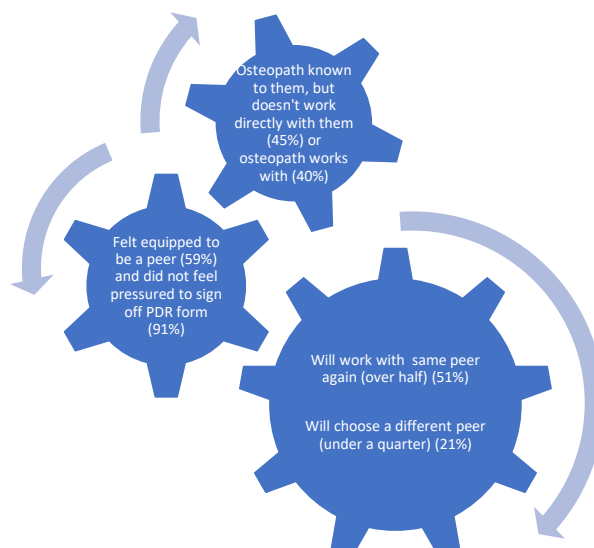
- From Figure 5 we see the scheme has been more successful for a small proportion of the profession in creating greater opportunities to get support from others within a professional community, but this hasn't necessarily translated into increased networks, a sense of community or lessened ideas of risk of professional isolation among osteopaths.

Figure 5: Creating networks and findings from CPD Evaluation Survey ⁴



- As part of the CPD Survey 2024 we also examined the role of the peer reviewer and osteopaths' experiences of the PDR process. Figure 6 summaries the peer selection process, while Figure 7 summaries what a good peer experience looks like according to our respondents.

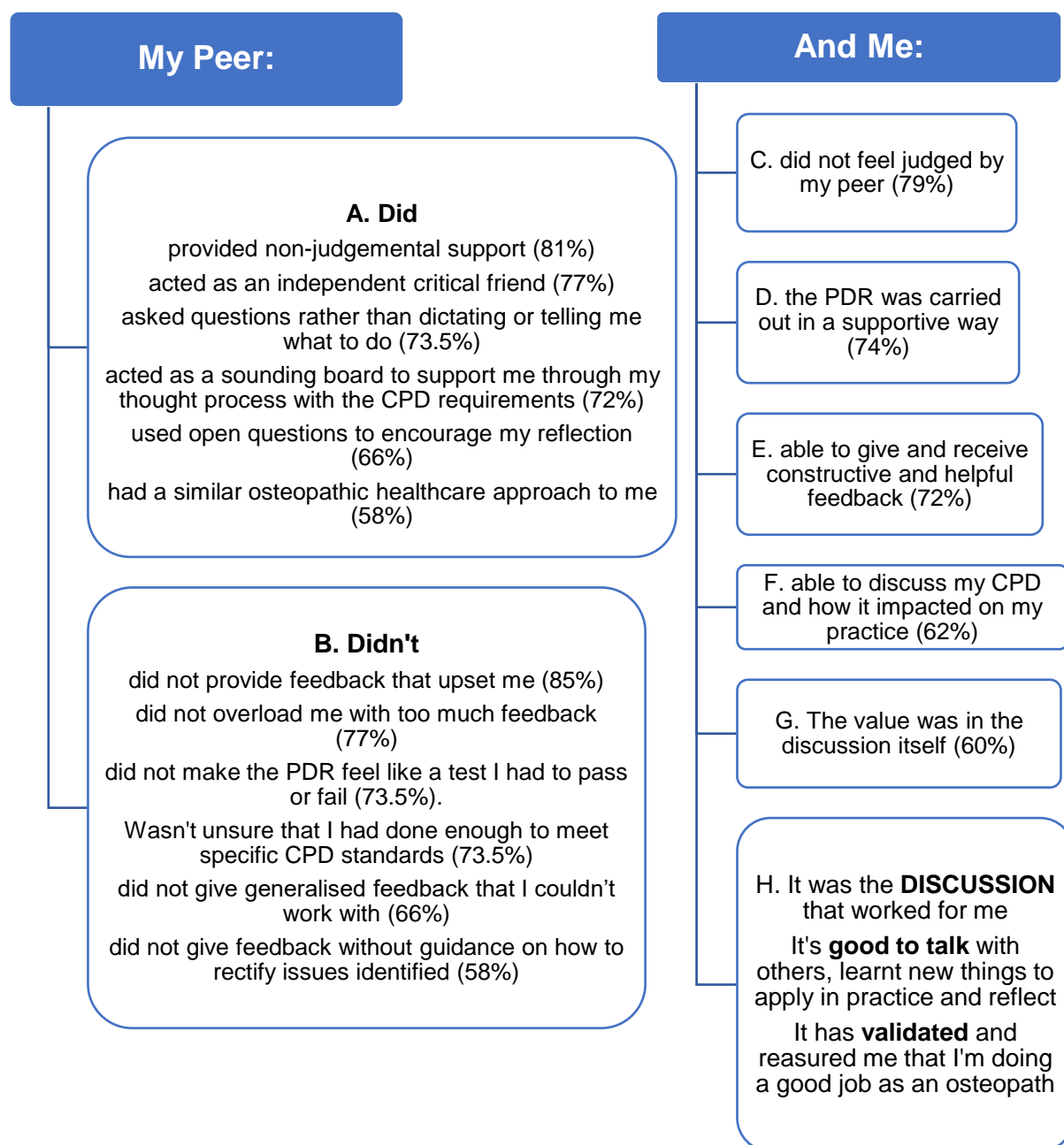
Figure 6: Selecting a peer and feeling equipped for the role



⁴ Key to Figure 5:

- A: Enhanced my practice with patients: Agree (45%), No strong view (40%) and Disagree (24.5%)
- B: Created greater opportunities for you to get support from others within a professional community: Agree (38%), No strong view (13%) and Disagree (30%)
- C: Increased professional networks: Agree (26%), No strong view (10%) and Disagree (55%)
- E: Lessened the risk of professional isolation: Agree (32%), No strong view (23%) and Disagree (45%)

Figure 7: My peer and me⁵



6. From Figures 6 and 7 we see the positive attributes of the PDR process (both in the giving and receiving of feedback). However, the challenge for many osteopaths has been the time it takes to do this CPD requirement, and the level of paperwork involved, some of which was considered repetitive, so we need to

⁵ **Figure 7 Key:**

A: Percentages of respondents agreeing with statements

B: Percentages of respondents disagreeing with statements

C to G: Statements taken from PDR guidance and respondents were asked which matched their experience

H: Based on qualitative question which asked what worked well for them in their PDR

Annex A to 11

consider ways this could be streamlined and made easier for osteopaths to complete by undertaking an edit/review of the PDR form.

7. Finally, overall thoughts from osteopaths on the CPD scheme revealed the following:

- The findings demonstrate diverse views. They show consistent progress against our strategic aims of engagement support and community. With consistent proportions of respondents (more than a third up to over half) perceiving positive steps in terms of gaining benefits and support for themselves, their patients and their practice. The strategic aim of community demonstrates less progress with around a quarter of respondents increasing their networks and more than half not increasing their networks.
- However, there are some key messages to reflect on in terms of the burden of recording and the paperwork which need further reflection.
 - Over a third of osteopaths' views of the CPD scheme had change compared to first impressions at the start of the scheme and now. This may indicate a positive sign going forward for this to continue with each three-year CPD cycle that an osteopath completes.
 - The majority of osteopaths agreed it was appropriate to review the CPD scheme (81%) and that through attending webinars or events have built their confidence to complete the CPD requirements (55%).
- A third of osteopaths agreed that their practice had benefited from the CPD scheme (34%) or that gaining support from others as a result of the CPD scheme had benefited their practice (34%).
- The views on whether the CPD scheme had been worth it (e.g., enjoyable, and useful, despite having to make considerable effort) were split right down the middle, with 51% considering it worth it and 49% not considering it not worth it.
- A significant proportion of osteopaths agreed that the CPD scheme was burdensome and a wasted effort (53%) or that they worried whether they had met the CPD requirements correctly (51%), which in part are demonstrated by some of the suggestions for improvement below.
- In terms of how osteopaths thought the CPD scheme could be improved. It was thought improvements could be achieved by:
 - reducing the level of paperwork by streamlining the recording of CPD and the PDR paperwork, so that it was less time-consuming.
 - making the CPD scheme less complicated
 - returning to an annual component
 - making the PDR form and guidance less repetitive and more streamlined
 - providing more objective activities and examples of professionalism-based activities. making the 'supporting role,' that GOsC is taking with the CPD scheme, much clearer to the osteopathic profession.