



Council
2 November 2016
Update on the work of the Osteopathic Development Group

Classification	Public
Purpose	For discussion
Issue	The paper provides an update on the work of the Osteopathic Development Group (ODG) and the eight projects that the group is undertaking
Recommendations	To consider the content of the report
Financial and resourcing implications	Since agreeing in 2013 to support some of the costs of the various development activities, the GOC has contributed approximately £42.5k to this work from its reserves.
Equality and diversity implications	Equality and diversity matters are considered in relation to individual projects.
Communications implications	There is regular communication of the work of the Osteopathic Development Group to registrants and other stakeholders.
Annexes	None
Author	Tim Walker

Background

1. The Osteopathic Development Group (ODG) is an initiative that emerged from discussions at a series of GOsC-organised regional conferences in 2012.
2. The ODG is a loosely-constituted collaboration between the following organisations within the osteopathic profession:
 - a. The Council of Osteopathic Educational Institutions (COEI)
 - b. The General Osteopathic Council (GOsC)
 - c. The Institute of Osteopathy (iO)
 - d. The National Council for Osteopathic Research (NCOR)
 - e. The Osteopathic Alliance (OA).
3. In early 2013 the ODG identified eight work streams as the immediate priority for the development of osteopathic practice in the UK. These relate to:
 - a. Evidence
 - b. Service standards
 - c. Advanced clinical practice
 - d. Regional support
 - e. Mentoring
 - f. Career development
 - g. Leadership
 - h. International collaboration
4. All of these projects are considered in more detail below.
5. In June 2013, Council agreed that it would be prepared to provide some financial support for ODG projects, subject to them meeting a number of criteria:
 - 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.
6. The GOsC has been actively engaged in seven out of eight of the projects (all except career development) and has, to date, grant aided the following projects: evidence; advanced clinical practice; mentoring; and leadership.

Discussion

7. The eight projects have varying characteristics, engage a number of different groups and have proceeded at varying paces. This is unsurprising given that they have required the development of new ways of collective working and all – to a greater or lesser extent – involve unfunded voluntary work by representatives of participating organisations.
8. The projects are reviewed below, followed by some discussion of the future direction of the ODG and its activities.

Evidence

9. The Evidence project initially fell into two parts: the development of two learning tools around adverse events; and the development of a tool for recording Patient Reported Outcome Measures (PROMs). Both aspects are led by NCOR.
10. The two web-based adverse events learning tools are Patient Reported Experiences of Osteopathic Services (PREOS) and Patient Incident Learning and Reporting System (PILARS). PREOS is the learning resource for osteopaths, enabling practitioners to see how patients perceive osteopathic care and report their experience of practice (www.ncorpreos.org.uk). PILARS allows osteopaths to upload reports about difficult situations they have experienced in practice, with the aim that other practitioners can learn from the way they dealt with these situations; other osteopaths can also post comments and suggestions relating to these reports. The platform can be found at: www.ncorpilars.org.uk.
11. The two learning tools had been trialled initially as student projects. A small grant from the GOsC enabled the websites to be completed and made public. Although the sites are not heavily used, they do provide a useful and growing resource for osteopaths.
12. The aim of the PROMs project is to develop an online and smartphone app to collect outcome data from patients about osteopathic practice. The app contains

a Patient Reported Outcome Measure (PROM) and other measures of health changes relevant to osteopathic care.

13. The PROM tool was piloted in 2015-16 and is now being used by just over a 100 osteopaths. Promotion of the tool is ongoing by NCOR, the iO and the GOsC. It is anticipated that growth in its use will continue as more data becomes available and is published.
14. More information about the PROM tool can be found here: <http://www.ncor.org.uk/practitioners/patient-reported-outcomes/prom-app-collecting-prom-data-in-practice/>. Its development has received financial support from the iO.

Service standards

15. The service standards project aim has been to develop new voluntary service standards for osteopathic practice that will help osteopaths demonstrate the quality of care they provide.
16. Osteopathy is excluded from the legislation requiring healthcare providers to register with the Care Quality Commission in England (and the equivalent bodies in Northern Ireland, Scotland and Wales), or in England to be licensed by Monitor where providing services to the NHS. As such, there are currently no defined service standards for osteopathic practice. This is potentially a barrier for those seeking to obtain contracts for osteopathic services.
17. As part of the project, standards have been developed, primarily by the iO and GOsC, that are complementary to the *Osteopathic Practice Standards* and which provide an explicit description of the requirements that service providers should meet and the outcomes that patients should be able to expect, such as the suitability of premises/equipment, and that good communication, customer services skills and patient feedback is at the heart of all osteopathic service provision.
18. Alongside the development of these standards, the iO has also developed its own 'Patient Charter' (see <http://www.osteopathy.org/the-patient-charter/>) in which, for the first time, the professional association has set its expectations are of what is required of its members.
19. The next step following publication of the Service Standards and Patient Charter will be the development of a self-assessment tool to enable osteopathic practices to demonstrate that they are meeting the requirements of the Standards.

Advanced clinical practice

20. The advanced clinical practice (ACP) project aims to determine how osteopaths' areas of clinical expertise – for example in paediatric or sports osteopathy – can best be recognised and communicated to the public, and how osteopaths can be supported in developing their clinical interests.

21. This project is being led by the OA and the first stage has been to research osteopaths' and patients' views about ACP and how an ACP scheme might operate. The research was conducted by an independent consultancy, Health Academix, supported by a grant from the GOsC.
22. The research phase concluded recently and identified options around:
 - a. The value of and need for clinical interest groups
 - b. Credentialing for advanced practitioners, to recognise and accredit advanced practice
 - c. The development of a knowledge and skills framework to map the knowledge, skills and capabilities required to practise at a range of levels in different roles/contexts.
23. The project group is now considering the findings from the research stage – which identified significant support for some of ACP scheme, particularly from patients – and how these might be taken forward with the profession.

Regional support

24. The primary objective of this project has been to develop a range of practical support services for local, regional and special interest osteopathic groups, which will ease the burden of organisation, increase the number of osteopaths making use of the networks and create stronger community hubs of osteopathic learning and practice across the UK.
25. The initial output from this group has been a practical guide for new and existing local/regional groups, developed primarily by the iO and GOsC. A copy of the guide can be found at: <http://osteodevelopment.org.uk/wp-content/uploads/2016/07/RS-handbook-final.pdf>.
26. Since the publication of this guide, thinking about the purpose of the project has moved forward and a broader approach is now being developed, based on the ideas of developing 'communities of practice' within the profession. While the ODG continues to be supportive of the network of independent regional societies that exist within the profession, it has identified the need for much more granular collaborative working to support CPD, business development, data collection and other activities. Therefore, the focus of the project is moving away from how might new regional societies be established and sustained, to the broader support of any kind of groups that can be established to develop and promote good practice.

Mentoring

27. The mentoring project aims to develop a suitable professional support framework for osteopaths at an early stage in their careers, which will support them in the development of a successful practice. The genesis of this project

was the research study on new graduates' preparedness to practise,¹ published by the GOsC in 2012.

28. This project has been led by representatives from COEI, the iO and the GOsC and, similarly to the ACP project, the first stage has been to research osteopaths' views about mentoring and how a mentoring scheme might work. Again, the research was conducted by an independent consultancy, Health Academix, supported by a grant from the GOsC.
29. The research made a number of recommendations and the ODG project team has now proposed and is working on a number of priorities:
 - a. Developing and piloting a workplace mentoring scheme (for use in the principal/associate relationship) in advance of a wider roll-out
 - b. Developing an independent mentoring scheme, for use outside of a formal working relationship
 - c. Peer mentoring, whether within the profession or external
 - d. Developing an online library of resources (to support a to c above).
30. The project team has mapped out the resources (and potential training requirements) for a workplace mentoring scheme with a view to commencing a pilot in summer 2017 with new graduates entering associate positions for the first time, along with the principals that employ them.

Career development

31. The career development project is designed to map how osteopaths currently progress their careers, in order to provide recommendations and guidance and to evaluate the need for a more defined career structure within the profession. The project is being led by the iO.
32. An initial mapping document was produced, which can be found here: <http://osteodevelopment.org.uk/wp-content/uploads/2016/09/Career-development-report-final.pdf>.
33. At the outset, this project was considering the concept of osteopathic 'fellowships' that may be linked to grades of membership with the iO.

However, this work has not yet progressed because it is partly contingent on aspects of the projects on ACP and mentoring (above), and on leadership (see below).
34. In the meantime, the iO has suggested that the project focus more on considering what support can be provided to osteopaths throughout their

¹ <http://www.osteopathy.org.uk/news-and-resources/document-library/research-and-surveys/new-graduates-preparedness-to-practise-research-report-2012/>

careers to provide a more formal approach to the non-clinical aspects of practice development. The project is now being re-scoped on this basis.

Leadership

35. This project has focused on the creation of a leadership development programme specifically designed for osteopaths, and aimed at significantly enhancing the leadership capacity within the profession.
36. The leadership programme has been developed in conjunction with the Open University and has just completed its second year. The programme consists of an off-the-shelf 25 hour e-learning leadership course which is sandwiched by two workshops run jointly by the Open University and the ODG. In addition, the participants work in groups on a project exploring development/leadership issues of their choosing from within the profession.
37. Nearly 40 osteopaths have completed the programme and, while it is difficult to formally evaluate the outcomes, former participants are engaged in a number of new initiatives as well as making use of the training through greater engagement in existing professional activities.
38. The programme has been financially supported by the GOsC and it is anticipated that it will continue for a further year before a decision is taken on whether to seek to continue with it.
39. The Open University has been very supportive of the project and are now using it as a case study for joint working with other organisations, see: <http://www.open.ac.uk/business/who-we-work/public-sector/osteopathic-development-group>

International collaboration

40. The international collaboration project is designed to collate information regarding international osteopathic practice: reinforcing partnerships and sharing learning and resources for the benefit of UK osteopathy.
41. The project aim has been to pull together in one place details of international networks, developments and events that are of interest to UK osteopathy. This information is available on the international collaboration website at: www.osteointernational.uk. Since its launch earlier this year, the site has had approaching 1,700 visitors. There has been positive feedback from ODG members, in particular schools where final-year students are using the information to explore opportunities outside the UK.
42. Apart from ongoing updating of the information on the site the project is complete.

Communication support

43. The ODG has sought to keep the profession aware of and updated on its activities in a number of ways. This has included the following:
 - a. Development of an ODG 'brand' for communications activities
 - b. Regular articles in *the osteopath* and *Osteopathy Today* magazines
 - c. The construction of a bespoke website (reusing templates commissioned by the GOsC for the CPD consultation to reduce costs) see: <http://osteodevelopment.org.uk/>
 - d. Regular updates provided in presentations to regional group meetings by representatives of the iO and GOsC.

In addition an ODG e-bulletin will be launched shortly. ODG communications activities are largely led and funded by the GOsC and iO.

Future activities and development

44. At its quarterly meeting in February 2016 the ODG considered its own future development and how it should take forward its work as current projects move towards completion.
45. Although only one project can be considered to be complete (international collaboration), others are making reasonable progress, albeit sometimes more slowly than was hoped.
46. Collectively, the Group was of the view that its work was important and should continue. There is a general recognition that as well as making progress with specific projects, there has been a 'normalisation' of a culture of joint working between all of the partner bodies.
47. However, there has also been recognition of the capacity constraints on the profession and the ODG has deferred the commencement of new projects until further progress has been made on existing activities.
48. Part of the purpose of commencing the dialogue that led to the establishment of the ODG was to encourage the osteopathic profession to start to plan for its own future in a world where it might not be able to rely on the sustained support of the GOsC. This continues to be an important objective and one where the ODG is playing a central role.

Recommendation: to consider the content of this report.