

GENERAL OSTEOPATHIC COUNCIL

Minutes of Part I of the 57th meeting of the Education Committee (EdC) which took place after the Part II EdC meeting on Thursday 17 September 2009 at Osteopathy House, 176 Tower Bridge Road, London SE1 3LU.

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Chair: Professor Ian Hughes

Present: Paula Cook Professor Adrian Eddleston
Jane Fox Professor Bernardette Griffin
Nick Hounsfield Rob McCoy
Liam Stapleton Professor Julie Stone

In Attendance: Fiona Browne, Head of Professional Standards
Marcus Dye, Professional Standards Manager
Joy Winyard, Professional Standards Officer

PART I (*items which will be reported to the Public Session of Council at its next meeting*)

APOLOGIES FOR ABSENCE

- 1. There were no apologies for absence.

MINUTES OF THE PREVIOUS MEETING

- 2. No amendments were suggested. The minutes were accepted as a true record of the June 2009 meeting and signed by the Chair of the Committee.

MATTERS ARISING

- 3. There were no matters arising.

CHAIR AND PROFESSIONAL STANDARDS MANAGER’S ACTION AND REPORT

- 4. The Chair had nothing additional to report. The Head of Professional Standards presented a departmental report and then informed the committee about the recent campaign to recruit further registration assessors to assist with the anticipated increase in applications for registration via the new powers to register those UK graduates who qualified before 8 May 2000. 12 assessor applications have been received. The proposed review of these applications would ideally involve two members of the Education Committee plus a member of staff who would shortlist to six applicants and then carry out interviews to appoint three. Robert McCoy and Nick Hounsfield volunteered to assist with the process and the shortlist meeting and interviews would be arranged accordingly.
- 5. Osteopathic Practice Framework The Committee discussed the Osteopathic Practice Framework update. Some issues were raised about the meeting with ‘special interest’ practitioners to discuss the Framework of Practice relating to interpretations of general and specialist practice. It was suggested that the project should not be seen to be led by the

GOsC. Any group taken forward should be representative including, for example, the Osteopathic Educational Institutions (OEs). The full results of the consultation for the Osteopathic Practice Framework were being analysed and would be presented to Council in due course along with proposals for progressing this project.

6. New Registration Powers The Committee discussed the financial impact of the New Registration Powers and Revalidation. The Head of Professional Standards confirmed that a request had been made to the Department of Health for funding in relation to revalidation and that a response was expected before the Council's Strategy Day.
7. The Committee noted the report.

COUNCIL FOR HEALTHCARE REGULATORY EXCELLENCE (CHRE) COMMISSION FROM DEPARTMENT OF HEALTH (DH) ON ADVANCED PRACTICE – FINAL REPORT

8. It was suggested that the section of the report that had most significance for osteopathy was that which dealt with specialist practice. The Committee discussed the misconception between a specialist and someone with a special interest or a specialism. It was suggested that this could become an issue later on with the continued emergence of osteopaths narrowing their scope of practice to specific areas such as paediatrics.
9. A possible model for differentiating between specialism and specialist practice was suggested by Mr McCoy, namely:
 - a. Osteopath using certain techniques = narrowed scope of practice
 - b. Osteopath only treating certain conditions = a specialism developed in a certain area
 - c. Narrowed diagnosis and treatment of certain groups, i.e. HIV patients or children = a specialist (danger of this being that, as osteopathic diagnosis and practice is narrowed, there is a danger of missing something during diagnosis).
10. It was confirmed that this topic was due to be discussed at the Council Strategy Day scheduled for 29 September 2009 and that the outcome should be circulated to all members for the Education Committee.
11. The Committee noted the report.

CHRE COMMISSION FROM DH ON QUALITY ASSURANCE IN HIGHER EDUCATION

12. The Committee discussed whether a newly qualified osteopath should immediately go into private practice or whether some form of further support/training was required. A review of the quality assurance processes employed by the GOsC and possible streamlining would look to scope this issue further.
13. The Committee noted the Report.

CHRE COMMISSION ON CLEAR SEXUAL BOUNDARIES – EDUCATION

14. Professor Julie Stone declared an interest in this item as she had significantly contributed to the writing of the report. Discussion centred around the need to ensure the osteopathic educational institutions (OEs) addressed these matters in their teaching. The Committee was interested to know what steps had been taken to ensure that all osteopaths were informed about these issues. The Executive will consider further and report back at the next Committee meeting.
15. The Committee noted the Report.

ANY OTHER BUSINESS

16. Mr McCoy enquired about Criminal Records Bureau (CRB) checks for applicants to the register.
17. It was confirmed that all new applicants have to undergo such checks, but those previously registered were not required to have done so. Mr McCoy was interested to find out whether the criteria used for accepting applicants could be communicated to the OEs to allow them to make decisions on the fitness to practise of students. He enquired whether GOsC would be able to advise the institutions about whether they would register individuals after graduation.
18. It was noted that due to a number of factors, each instance would have to be considered on an individual basis.
19. The Executive agreed to report back to the Committee on this issue.
20. Mr McCoy stated that there was some confusion about the document sent to the OEs in relation to the scope of training provided. It was felt that the questions asked did not seem to fit with the purpose of the document and he sought clarification. The Professional Standards Manager confirmed that the document was intended to mirror the categories used in the Osteopathic Practice Framework to get a quick idea of where issues in lack of training may occur. Subsequent additions to these categories, such as surgery, had been added on request by the institutions following a brief period of consultation on the form. The results would be presented to the OEs at their joint meeting next week.

DATE OF NEXT MEETING

21. Tuesday 15 December at 2.00pm.