

GENERAL OSTEOPATHIC COUNCIL
Minutes of Part I of the 63rd meeting of the Education Committee (EdC)
which took place on Wednesday 16 March 2011 at
Osteopathy House, 176 Tower Bridge Road,
London SE1 3LU

Unconfirmed

Chair: Professor Ian Hughes

Present: Ms Paula Cook
 Professor Adrian Eddleston
 Dr Jane Fox
 Mr Robert McCoy
 Ms Fiona Walsh

In Attendance: Ms Fiona Browne, Head of Professional Standards
 Mr Marcus Dye, Professional Standards Manager
 Ms Joy Winyard, Professional Standards Officer
 Ms Dayna Sherwin, Professional Standards Assistant

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

ITEM 1: APOLOGIES AND INTERESTS

1. Apologies were received from Professor Bernadette Griffin, Mr Liam Stapleton and Professor Julie Stone.
2. Members were requested to advise of any interests held at the time when the item was to be discussed.

ITEM 2: MINUTES

3. No amendments were suggested and the minutes were accepted as a true record of the meeting of held on 14 December 2010.

ITEM 3: MATTERS ARISING

4. No matters arising from the last meeting were raised.

ITEM 4: CHAIR AND PROFESSIONAL STANDARDS DEPARTMENT ACTION AND REPORT

5. The Chair had nothing additional to report.
6. The Head of Professional Standards presented the department report. The members had no additional comments to make.

Noted: The Committee noted the report.

ITEM 5: STUDENT FITNESS TO PRACTISE

7. The Head of Professional Standards presented the report and confirmed that the response to the Student Fitness to Practise (SFTP) guidance from the Osteopathic Educational Institutions (OEIs) was very positive and that they recommended that it be issued for formal consultation.
8. It was also reported that the GOsC had interviewed and appointed an expert in equality and diversity to produce guidance for the OEIs about the management of health impairments and disability. The appointed candidate was Lindsay Mitchell of Prime Research and Development Ltd and it was expected that the first draft guidance would be received in September 2011 with a view to it being finalised by the end of the year.
9. It was confirmed that Lindsay had previously undertaken work for the General Chiropractic Council (GCC) and that this would be an excellent opportunity to work with other regulators in this area.

Agreed: The Committee agreed to publish for consultation, both the Student Fitness to Practise Guidance for OEIs and the Student Fitness to practise guidance for osteopathic students.

Noted: The Committee noted the successful tender for the development of guidance for OEIs about the management of health impairments and disability.

ITEM 6: LIBERATING THE NATIONAL HEALTH SERVICE (NHS): DEVELOPING THE HEALTHCARE WORKFORCE: A CONSULTATION PAPER

10. The Head of Professional Standards provided the background to this paper; the Government has published a White Paper, accompanied by several consultation documents and these form the Liberating the NHS proposals. The most recent consultation paper, Liberating the NHS: Developing the healthcare workforce is a consultation on changes to education and training and workforce planning.
11. The consultation paper is primarily focused on changes to educational funding for professionals within the NHS framework. However, proposals to establish Health Education England as a multi professional board would involve all regulated healthcare professions. Healthcare Education England would oversee the commissioning and funding of education on a national level (responding to more diverse patient pathways and changes to the service models

incorporating the private and the public sector). The proposed changes could provide both opportunities and threats to osteopathy and other professions not currently funded through the NHS.

12. The GOsC had prepared a draft response to the consultation pulling together the major issues pertinent to osteopathy and this has been shared with the OEIs and the British Osteopathic Association (BOA), who are also being encouraged to provide their own responses.
13. The Committee felt it was right that the GOsC became involved in the discussions at an early stage to ensure that osteopathy was involved in discussions about development of the proposals; however, it was debated whether the document was making osteopaths' views strongly enough.
14. The Committee discussed the language used to respond to various questions. The Committee agreed to send in drafting changes to the Head of Professional Standards by 21 March 2011. This was also the date agreed for the OEIs to provide their response to enable any sections to be re-written and circulated to the Committee before the consultation deadline of 31 March 2011.
15. The Committee then discussed the merits of submitting a combined response from the OEIs as opposed to individual ones. It was suggested that a joint response from GOsC, COEI and the BOA would be helpful as well as multiple responses.
16. It was agreed that in addition to submitting the response, the GOsC should include a covering letter, flagging up potential problems, and drawing the Governments attention to the fact that:
 - a. Smaller professions will continue to need to be engaged with and to be represented on a national level in order to deliver the aims of the paper.
 - b. Smaller professions may work to different models, however they still provide healthcare which contributes to the wider aims of the paper about a patient centred healthcare system where patients and their carers are in charge of making decisions about their health and wellbeing,
 - c. That the GOsC wants to be included and involved in the debate.

Agreed: The Committee agreed to that it is right for the GOsC to be involved in these discussions and to provide a response to the consultation.

Agreed: The Committee agreed to incorporate the three points highlighted at paragraph 17 into the covering letter accompanying the response.

Agreed: The Committee agreed to provide additional comments on the consultation response to the Head of Professional Standards by 21 March 2011.

ITEM 7: PREPAREDNESS TO PRACTISE RESEARCH

17. The Head of Professional Standards gave an update on the work for this project. It was confirmed that the OEIs received a presentation from Professor Della Freeth and her team at the GOsC / OEI meeting on 16 February 2011.
18. Initially the OEIs were concerned that the study would publicly identify feedback from students of individual OEIs. It was confirmed that this feedback might be available to the OEIs directly if they sought this from the research teams (ensuring the anonymity of the respondents), but that the feedback would not identify individual OEIs in the public report.
19. The members considered the Scoping Report and identified that comments would now not be sought from patients. This has been included in the original tender document. It was confirmed that the original tender panel had considered that the methods used in this research would be more robust if both final year students and new graduates fed into the research. It was agreed that funding should be diverted to include both students and newly qualified graduates within two years of registration. Patients' views would be incorporated into policy development later on in the process.
20. The Committee also confirmed the following:
 - The 2009 and 2010 graduates were the correct cohorts to be focusing on.
 - It would be helpful to get feedback from both new registrants who are practising as osteopaths and those who are not to explore whether there were different views.
 - Clarity should be sought about which group was overseeing the research: the Research Strategy Working Group or the Education Committee. Subsequently, it has been confirmed that oversight of the research is by the Research Strategy Working Group and information comes to the Education Committee to note as the research will feed into Education Committee projects in due course.

Agreed: The Committee endorsed the progress of the preparedness to practise research.

ITEM 8: RQ

a. Streamlining the Process

21. The Head of Professional Standards confirmed that three recent RQ decisions had been delayed for a variety of reasons including a need for a number of revisions following discussion with the Department of Health and its lawyers, and the Privy Council. These amendments had necessitated repeated requests to both Education Committee and Council for approval of changes to RQs for minor matters not affecting the quality of the education.
22. A meeting had taken place in March 2011 between the Chief Executive and Registrar and Gavin Lerner and Nick Clark of the DH in order to expedite the

three outstanding Privy Council approvals, to explore how the process might be made more efficient and to prevent unfeasibly long delays in the granting of Privy Council approval for a decision by the Council to 'recognise' a qualification in future.

23. Further discussions were being undertaken to establish the following:
 - a. A set of standard type conditions which could be used for RQs without further legal input.
 - b. The type of and circumstances in which minor drafting changes need to be referred back to the GOsC.
 - c. A meeting between legal and policy representatives of the DH and GOsC following the submission of a decision by the Council to Recognise a Qualification and to seek Privy Council approval.
24. The Education Committee considered that only major issues affecting the quality of the Education Committee advice to Council should be brought back to it for further agreement. The advice of the Chair should be sought and the Chair would confirm when matters should be referred back to the Committee for advice.
25. Otherwise, matters would simply go back to Council if this was required by the Department of Health.

Noted: The Committee noted the steps being taken with DH to streamline the RQ process.

Agreed: The Committee agreed that RQ matters requiring further GOsC input following advice of the Department of Health and Privy Council would normally be referred directly to Council. The further advice of the Education Committee would only be sought if there were matters materially affecting the quality of the education or the nature of the condition. The Chair of the Committee would be consulted about this.

b. RQ Advertising

26. The Professional Standards Manager presented this paper. It was agreed that the original advertising guidance agreed by the Education Committee meeting had been targeted at new provision of courses. It had not been well received by the OEIs as it had not taken into account the administrative delays in processing approval following the recognition of the qualification by the Council which could seriously harm their recruitment processes. New wording had subsequently been developed to address this situation and this was included within the proposals for re-issuing this guidance.
27. The Committee confirmed that the wording was formulated as guidance to the OEIs, with the student in mind, to allow them to be fully aware of the facts before applying for courses.

28. The Committee took account of the feedback from the OEIs about how the wording was potentially commercially damaging to them both from the note of the OEI meeting on 16 February 2011 and as reported by the Chair of the Committee.
29. The Committee noted that the wording was advisory only and that it had a duty to the OEIs, to students and to patients. The wording would also be available on the GOsC website along with further information about the position of courses – in particular, those that Council had decided to 'recognise' but that were awaiting Privy Council approval.
30. The wording on the second page of the revised wording (Annex B) would need to be amended to read 'The General Osteopathic Council has agreed **to make** a decision to recognise....'

Agreed: The Committee agreed to reissue the advertising guidance and to publish this on the GOsC website.

Agreed: The Committee agreed that the website would be kept updated and would reflect qualifications which had been 'recognised' by the Council but were awaiting approval by the Privy Council.

ITEM 9: PRE-CURRICULUM CONTENT

31. The Head Professional Standards presented the paper, explaining that one of the projects identified in the Corporate Plan was to consider the need for core curriculum content to supplement the Osteopathic Practice Standards.
32. The Committee recognised that this is important work, but were hesitant at the timing of the project. Concern was expressed as to whether the heavy workload for the Committee currently would allow this project to be managed properly.
33. Concern was expressed about the possibility of over-burdening the OEIs might take place with a further additional project. The OEIs were currently being consulted with the preparedness to practise research, the equality and diversity guidance work, the student fitness to practise guidance for their students and patients etc. The Committee discussed whether gathering information from an OEI questionnaire could provide the data needed or whether this might be achieved from information already submitted as part of the QAA reviews.
34. Some members considered that there was no evidence base for undertaking the project. There was no evidence that patients were at risk as a result of not doing this project and that this could be an example of intrusive regulation.
35. On the other hand, alternative views thought that there were merits to the project, that this information would assist existing practitioners to keep up to

date. It was noted that newly qualified practitioners also discussed what was core as there appeared to be quite a variety of curricula taught in the OEIs. Some members of the Committee expected osteopaths to have a common set of skills underpinned by common technical knowledge.

36. The Committee agreed that a clearly laid out scoping exercise would be helpful to get more of an idea of areas of commonality.
37. It was decided that the subject should be revisited and therefore there discussion around the Terms of Reference should be delayed.
38. The Committee indicated that further information was required as follows:
 - a. Whether the project would look at higher level educational learning outcomes or more specific core curriculum content.
 - b. A more detailed scoping method to be set out to allow a decision about whether the project would go ahead to be made after further consideration and mapping of the OEI curricula had taken place.
 - c. Project resources in terms of finance and staff.
 - d. An assessment of the workload the OEIs to contribute to the project.

Agreed: The Committee agreed to reconsider the terms of reference when it had further information about the scope of the project and the resources required both internally and externally.

ITEM 10: QA UPDATE

39. The Professional Standards Manager reported that the consultation on the revision of the QAA Handbook and GOsC Annual Report template had begun on 18 February 2011 and that in addition to targeting various stakeholder groups through written correspondence, the OEIs will be consulted directly by the QAA at a face to face meeting.
40. The GOsC is currently discussing with the OEIs ways in which it can have access to their student and patient groups to feed back on this consultation.

Noted: The Committee noted the stage of consultation on the GOsC/QAA Review Method Handbook and the draft Annual Report template.

ITEM 11: OSTEOPATHIC PRACTICE STANDARDS (OPS) UPDATE

41. The Professional Standards Manager explained that together with the Regulation Manager, an analysis had been carried out on the information gathered in the recent consultation on the OPS.
42. The main issues arising from the consultation had been discussed by an OPS working group established by Council and its recommendations would be presented to Council at the 12 April 2011 meeting.

Noted: The Committee noted the progress made in amending the Osteopathic Practice Standards following the results of the consultation.

ITEM 12: ANY OTHER BUSINESS

43. The Chair noted that the GOsC had asked the OEIs to inform students and patients about a number of different topics recently. The Chair asked the Members to give thought to how to continue to work with students and patients without imposing extra burdens on the OEIs.
44. A suggestion was made to utilise the OEIs student intranet sites as a means of communication, and to explore whether the BOA had established a student forum as had previously been discussed.

ITEM 13: DATE OF NEXT MEETING

45. The date for the next meeting will be Tuesday 14 June 2011.