



Guidance for Osteopathic Pre-registration Working Group

Minutes of the meeting held on 27 November 2014

Unconfirmed

Chair: Ms Jane Fox

Present: Ms Brenda Mullinger Ms Diana Pitt Ms Fiona Hamilton Mr Nick Woodhead Mr Stephen Hartshorn Mr Steven Bettles

In attendance: Fiona Browne, Head of Professional Standards

Item 1: Welcome, introduction and apologies

- 1. The Chair welcomed all members to the meeting of the Guidance for Osteopathic Pre-registration (GOPRE) working group meeting. All members introduced themselves. Aside from Fiona Hamilton, who had been a member of the working group before the consultation, most members were new to the working group. The Chair thanked Stephen Hartshorn (from the Institute of Osteopathy) and Nick Woodhead (from the Osteopathic Alliance) for attending the meeting as new members following their consultation responses to the GOPRE consultation earlier this year.
- 2. Apologies were received from: Bella Vivat (patient representative), Ben Katz (Osteopathic Alliance), Chris Mapp (student representative), Lucy MacKay-Tumber (London School of Osteopathy), Marcus Walia (Surrey Institute of Osteopathic Medicine), Pat Hamilton (College of Osteopaths) and Rebecca Morrison (European School of Osteopathy).

Item 2: Note and matters arising from the 11 September 2013 meeting

3. There were no comments on the meeting note and no matters arising.

Agreed: The note of the meeting of 11 September 2013 was agreed.

Item 3: Terms of Reference

4. The Head of Professional Standards introduced the item reminding the group of their terms of reference.

Agreed: Members noted the terms of reference of the Guidance for Osteopathic Pre-registration Education Working Group.

Item 4: Background

- 5. The Head of Professional Standards introduced the item introducing the background to the development of the *Guidance for Osteopathic Pre-registration Education* and the current QAA consultation on the *draft Subject Benchmark Statement: Osteopathy* along with the draft GOsC response to this consultation.
- 6. The group considered the background outlined in the paper. The overlapping but distinct roles of the *Guidance for Osteopathic Pre-registration Education* and the draft *Subject Benchmark Statement: Osteopathy* were noted by members.

Noted: Members noted the background to the development of the Guidance for Osteopathic Pre-registration Education.

Item 5: Guidance for Osteopathic Pre-registration Education Consultation Process and Consultation Analysis

- 7. The group also found the summary of the consultation process including the commissioning of an expert in equality and diversity matters very helpful.
- 8. The group explored the questions outlined in the consultation analysis as made the following points in discussion:
 - The Guidance should continue to be aligned to the four themes of the Osteopathic Practice Standards.
 - The purpose of the Guidance should be made more explicit in the documentation.
 - The 'fit' between the different reference points for osteopathic education (e.g. the Subject Benchmark Statement: Osteopathy and other GOsC Guidance) should be made more explicit but without potential to date the document.
 - Drafting points the group noted the drafting points in the consultation analysis. They felt that the intended audience should be made explicit in the document and a contents list should be prepared. Perhaps also consider how the guidance is to be used.
 - The group would consider the place of osteopathic principles in the Guidance when it examined the guidance in further detail.
 - The group would consider, the point about graduation being the start of the journey when it examined the Guidance in further detail. Some felt that the Guidance needed to be explicit about end points. Others felt that the Guidance outlined a continual commitment to learning.

- In relation to leadership the group understood this to reference professional responsibility rather than the traditional concept of leadership.
- In relation to teaching, the group felt that the giving and receiving of constructive feedback was important and should be emphasised in the Guidance. Some of the feedback emphasised differing interpretations of the word `mentor' and perhaps this should not be used or defined.
- In relation to business skills, the group noted that views were mixed (wanting more or less focus on business skills. However, it noted that there were no responses suggesting how this section could be enhanced. It thought that encouraging the sharing of good practice between different organisations could be helpful. The group were not sure about the term 'successful' practice in the Guidance (how this would be defined would depend on the personal and professional values of the individual. Instead, it was felt that wording such as 'efficient' and 'effective' might be better placed. It was noted by the OEIs, that business skills were often the worst attended lectures during a course. It was also noted that it was important for the course and particularly for students to focus on good quality care and not 'making as much money as possible'. The words 'efficient and effective' were felt to be helpful here.
- The group agreed that the word 'common' should be substituted for the word 'core' in the section on presentations and techniques.
- The group considered the equality and diversity recommendation in relation to 'empathy and understanding' and the advice that this may exclude some people on the autistic spectrum from undertaking osteopathy. The group noted that it would be possible to focus on the outcome expected rather than a particular attribute. Rather than 'empathy and understanding' the group thought that wording such as 'demonstrate an understanding of the patient perspective could cover this point.
- The group felt that there could be an issue around measurability of the outcomes. This was missing from the Guidance in terms of how it would be defined and this may need to be considered more carefully at the end of the meeting.

Noted: The group noted the themes arising from the consultation on the *Guidance for Osteopathic Pre-registration Education*.

Item 6: Draft Guidance

- 9. The group moved on to consider the detailed drafting of the Guidance and made a number of drafting points. Points for discussion included the following:
 - The introduction on p1 could be separated into purpose, intended audience and should include indexing and numbering to aid accessibility of the Guidance.

- 'Putting patients first' was questioned by a respondent. However, the group felt that this was an important principle that should be explicit in the Guidance.
- The guidance would benefit from being more patient centred and so concepts of listening and partnership should be further emphasised in the outcomes.
- The introduction could be shortened and matters relating to supporting the transition into practice could be put into a separate section at the end of the Guidance as this was separate to the outcomes set out in the Guidance.
- Some of the bullet points in communication and patient partnership would benefit from editing, restructuring and ensuring that they fitted with the stem of the sentence.
- Matters related to patient's condition should be relabelled as 'patient's health'.
- In knowledge, skills and performance, 'first contact practitioner' can be changed to 'primary contact practitioner' following a recent ASA ruling in relation to chiropractors.
- The term 'osteopathic philosophy' was one for definition by the profession. For the purposes of this Guidance, it could be changed to 'osteopathic principles and concepts'.
- The level of nutrition in osteopathic education, compared to that studied by dieticians, for example, was such that 'knowledge of the principles of nutrition' was unclear. It was felt that instead, 'principles of a healthy lifestyle, for example nutrition' would be a better description of the requirements of osteopathic education.
- The knowledge, skills and performance section would also benefit from editing to ensure that they fitted with the stem of the sentence and were streamlined along with some reordering.
- The safety and quality section would benefit from editing and reordering.
- Risk assessment, risk management and adverse events needed to be made more explicit in the safety and quality section.
- Taking action to meet concerns including whistleblowing needed to be further highlighted in the draft Guidance.
- The duty of candour needed to be further highlighted in the draft Guidance.
- In relation to professionalism, again, some editing and reordering would be beneficial.
- Punctuality was in tension with the concept of allowing the patient the time that was needed. This point could be softened to further outline this tension.
- 'Patient wishes' would be better described as 'patient expectations'.
- In the 'common range of presentation', 'student' should be changed to 'graduate'.
- The concept of referring without treatment was discussed in detail by the group. It was agreed that the issue was explaining that the osteopath must refer when a complaint needed treatment by another health professional, but that this did not necessarily preclude osteopathic treatment, provided that it was clear that such treatment was aimed at symptomatic relief rather than treating the primary complaint.

- In relation to the 'common range of approaches to treatment' section, the Guidance should import the requirements outlined in the WHO Benchmark Statement for Education and Training.
- The Working Group agreed that the issue of measurability highlighted by some consultation responses should be kept under review. More explicit standards for delivery of education and particularly, assessment, may be required. The QAA were currently reviewing the *QAA Subject Benchmark Statement for Osteopathy*, and perhaps the need for more explicit guidance in this area could be reviewed once this Statement had been published.

Agreed: The Working Group agreed that the Guidance could be recommended to the General Osteopathic Council for consideration subject to a final check that the amendments suggested had been incorporated appropriately. The draft Guidance would be circulated for a final check before the end of 2014.

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Item 7: Any other business

10. There was no other business for consideration.

Date of the next meeting: To be determined – subject to any further work required in relation to standards of delivery and particularly, assessment.