



Education and Registration Standards Committee

25 June 2014

Patient and public involvement in education

Classification	Public
Purpose	For noting
Issue	An update on the further development of patient and public involvement in osteopathic education.
Recommendation	To note the further development of patient and public involvement in osteopathic education.
Financial and resourcing implications	The time of the osteopathic educational institutions and staff as part of our regular General Osteopathic Council (GOsC)/osteopathic educational institution (OEI) meetings are the main costs for this work.
Equality and diversity implications	Equality and diversity issues are being taken into account as part of the development of an electronic resource for osteopathic educational institutions (OEIs).
Communications implications	None at present
Annex	None
Author	Fiona Browne

Background

1. The GOsC Corporate Plan states that we will 'work in partnership with others to develop high quality, patient-centred osteopathic care'. We say that 'we will seek to increase the level of public and patient engagement and feedback, including patient data collection, to develop and support high quality care.'
2. Our 2014-15 Business Plan states that we will 'increase patient involvement in the delivery of osteopathic education by working in partnership with the OEIs to support the delivery of the *Osteopathic Practice Standards* and to share good practice in this area.
3. This paper provides an update about how we are progressing this work with the OEIs and other stakeholders.

Discussion

4. Public and patient involvement in education is a phrase that has many different strands. For example, patient and public involvement can take the form of involvement in governance arrangements, teaching, learning, assessment and also the quality of patient care to name but a few.
5. The quality of patient care and patient feedback is a necessarily a key feature of all OEI courses and this is explored as part of our existing quality assurance processes. However, involvement in other areas of education continues to develop and does not, yet, form a part of our quality assurance framework although it is likely to do so in the future.
6. Nevertheless, public and patient involvement in other aspects of education has formed the basis of two seminars with the osteopathic educational community to explore what they are doing currently, their future plans as well as the challenges and benefits of patient involvement in different aspects of education. During both seminars, we have also considered the very helpful guidance produced by the GMC, *Patient and public involvement in undergraduate medical education*, 2011 which contains both advice and guidance but also crucially, specific examples of patient and public involvement in different aspects of education.
7. As part of a seminar held on 3 June 2014, the OEIs shared case studies about public and patient involvement in education in the areas outlined above. We (GOsC and the OEIs) agreed to develop these real examples of involvement into a worked up resource to support the educational community to learn from each other, to implement good practice and to realise benefits and find innovative ways of responding to challenges.
8. As part of this work, we will also continue to consider public and patient involvement outside osteopathy. For example, the GMC and the HCPC,

particularly have been doing a lot of work in this area with a view to further supporting the development of our osteopathic case studies and resources.

Recommendation: to note the further development of patient and public involvement in osteopathic education.