



Policy Advisory Committee

16 June 2016

**Annual reports of the Education and Registration Standards and
Osteopathic Practice Committees 2015-16**

Classification	Public
Purpose	For decision
Issue	The Annual Reports to Council of the Education and Registration Standards Committee and Osteopathic Practice Committees 2015-16 which will be presented to Council at its meeting on 12 July 2016.
Recommendation	To note the Annual Reports to Council for 2015-16.
Financial and resourcing implications	An estimate of the cost of the committees and their work is included in the paper.
Equality and diversity implications	None
Communications implications	None
Annexes	A. Annual report of the Education and Registration Standards Committee 2015-16 B. Annual report of the Osteopathic Practice Committee 2015-16
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Annual Report of the Education and Registration Standards Committee (ERSC) in the financial year 2015-16.

Introduction

1. The Education and Registration Standards Committee (the Committee) performs the role of the statutory Education Committee under the Osteopaths Act 1993. The Committee has a 'general duty of promoting high standards of education and training in osteopathy and keeping provision made for that training under review'. It also has a key role to give advice to the Council about educational matters including the recognition and withdrawal of 'recognised qualifications' (see Sections 11 to 16 of the Osteopaths Act 1993). The Committee also has a role to contribute to the development of standards of osteopathic practice and to contribute to ensuring that only those appropriately qualified are able to register with the GOsC.
2. The Education Committee and Registration Standards Committee met three times during the period under review – in June 2015, October 2015, and March 2016. This report summarises the work of the Committee. Full minutes of all the meetings have already been reported to the Council.

Quality assurance of 'recognised qualifications'

3. During the course of the year, as part of our active approach to advising the Council about the recognition of qualifications, qualification change notifications and ensuring standards, the Committee considered in relation to all OEIs the following:

Activity	June 2015	October 2015	March 2016
Agreement to RQ specifications (including new RQs, renewal of RQs and monitoring visits)	None	2 OEIs and one OEI agreed electronically	1 OEI
Consideration of Education Visitor RQ report (including new RQs, renewal of RQs and monitoring visits)	None	None	1 OEI
RQ change notifications and consideration of reports and evidence submitted in relation to general and specific conditions	7 OEIs	4 OEIs	None
Consideration of annual report analysis (including external examiner reports and	None	None	10 OEIs

Activity	June 2015	October 2015	March 2016
internal annual monitoring reports and information about student fitness to practise.)			
Course closure reports	2 OEIs	None	2 OEIs

Course Closures

- Oxford Brookes and Leeds Metropolitan University are continuing with the planned course closures. The last graduates at Oxford Brookes are expected to graduate this summer, 2016. The last graduates at Leeds Metropolitan University are expected to graduate in 2017. The Committee continues to monitor the maintenance of standards in these institutions through regular reports and updates on the closure plans.

QAA Subject Benchmark Statement and the Guidance on Osteopathic Pre-registration Education (GOPRE)

- Both the Subject Benchmark Statement 2015 and the GOPRE guidance were published during July 2015.

<http://www.qaa.ac.uk/en/Publications/Documents/SBS-Osteopathy-15.pdf>

<http://www.osteopathy.org.uk/training-and-registration/information-for-education-providers>

Quality Assurance Contract

- The Quality Assurance Contract with the QAA was finalised and signed on 8 September 2015 covering the period 1 August 2015 to 31 July 2018 at which point the contract can be extended or retendered.
- There were a number of issues relating to the contract requiring clarification but these were not areas which would impact on the programme of reviews:
 - Clarity of content
 - Timing of the reviews
 - Co-ordination of the review timetable

Education Visitors and Registration Assessors: Recruitment, Training and Appraisal.

- At the meeting of the Committee, March 2016, the approach outlined in the recruitment specification for the GOsC Visitor and Registration Assessor pools was agreed subject to the suggested amendments. The timing of training had been noted as an issue for the visitors and assessors and there had been discussions between the GOsC and the QAA to address this.

Registration Assessor Training

9. Registration assessor training session took place in April 2015 and was positively received. Feedback suggested that future training might include:
 - Case-studies.
 - Peer-mentorship for assessors/reviewers to work with more experienced colleagues.
 - Updates on initiatives to support international applicants/registrants.
 - Updates on legislative framework.
 - Guidance on how to provide feedback to other assessors/reviewers.
 - Reflecting on issues raised at the April 2015 training and closing the loop on actions taken/progress made.

10. Two bespoke webinar training sessions were also held in January 2016. The sessions were available to all registration assessors and reported on the implications of the new EU Directive and provided detailed training about the revised registration assessment process for applicants with EU rights. The aims of the training were to:
 - To enhance understanding of the legislative framework for applicants with 'EU rights'.
 - To outline changes to the registration assessment processes for applicants with 'EU rights'.
 - To seek thoughts about how we can enhance communication, feedback and working together.

Feedback from the registration assessors showed the aims of the training had been met. It had been the first time an online platform had been used for training and was a cost effective way of getting the assessors together. Although assessors were clear that they did not want online training to replace annual face to face training, feedback was extremely positive about the online format.

Education Visitor Training

11. Training for Education Visitors took place on Friday 4 March. The training was conducted by Tim Walker, Chief Executive and Register, and David Gale, QAA.

12. Feedback showed that all participants found all sessions very useful (75% to 93%) or useful (25% TO 7%). The most helpful session was the interactive case study. Learning points taken away by participants included:
 - RQ review is not just about compliance" the process of identifying and justifying the "good practice" and "enhancement" categories
 - Revision of standards and reference points
 - Review of assessment approaches
 - Weighing up evidence
 - Discussion with colleagues

Registration Assessments: Alignment with EU Directive on the Recognition of Professional Qualifications and IMI Alert System

13. The Committee considered the requirements of EU Directive on the Recognition of Professional Qualifications as amended by EU Directive 2013/55/EU which aims to facilitate professional mobility across the EU. The GOsC had already established its own systems for registering EU applicants but have streamlined its processes to ensure compliance with the consolidated EU Directive on the recognition of professional qualifications. Guidance documents and forms have been developed to assist applicants with the process.
14. The consolidated EU Directive also requires competent authorities to use the International Market Information (IMI) system of alerts about registrants or applicants in accordance with the Directive's requirements. The alert system was implemented with some minor amendments to the protocols already GOsC existing within the GOsC.

Clinical Responsibility in Registration Assessments

15. At the meeting of June 2015 the Committee considered the findings of the Assessments of Clinical Performance review which had identified a lack of clarity regarding clinical responsibility and classified as high risk in the GOsC Risk Register.
16. As a result of the review amendments have been made to address the gap in the ACP process to ensure all parties including the assessors, applicants and patients are aware of their responsibilities and expectations when treating patients during the assessment process.

Review of Osteopathic Practice Standards

17. At the meeting of the Committee in October 2015 the outline of the proposed review of the Osteopathic Practice Standards, published in 2012, was agreed. It was also agreed at the meeting that it would be essential to engage the profession to get input as to how the current standards were viewed and what would be needed for buy in to the revised guidance. The review is ongoing with the recent survey closing on 31 May 2016.

New registrants' survey

18. The Committee considered the findings of a survey of new registrants that took place in between November 2015 and January 2016, on the effectiveness of the registration process and resources available to new registrants. The survey found that new registrants were largely satisfied with the information and service they received although there was still a need to look at business support which would be discussed further with the Institute of Osteopathy.

Common Classification System for recording and monitoring concerns about osteopathic practice

19. The Committee noted the analysis of findings from information compiled from the data collected during 2013 and 2014 in relation to complaints and claims relating to osteopaths and presented at the October 2015 meeting.
20. A number of areas had been identified where the data, which had been collected by the GOsC, the Institute of Osteopathy and providers of professional indemnity insurance, would provide an opportunity to review the weaknesses in practice. Subsequently there had been good discussions with the OEIs, who were using some of the data for teaching purposes, and it had been agreed with the insurers to extend data collection fields to other demographics to address some of the issues identified in the report although it would not be possible to identify whether an osteopath was a sole practitioner or part of a group practice.
21. It was noted that the numbers given in the report were too small to detect trends in complaints against the GOsC but it did appear that these remained at a stable level. It was also highlighted in discussing the report that osteopaths often dealt with issues before they became a complaint.

Health and Disability and Student Fitness to Practise Guidance review

22. The Committee was kept up to date on the review of guidance on health and disability and student fitness to practice. Both guidance documents were published for consultation between March and June 2016.

Professionalism

23. In an oral update given to the Committee in March 2016, it was highlighted data collections are ongoing and that data collected to date from students, patients, and the educational institutions, about lapses in professionalism had been used to develop presentations for students and had been well received.

Corporate Plan 2016-19

24. The Committee considered the initial themes and activities in the draft Corporate Plan. In commenting on the plan it was suggested:
 - a. That any revised education quality assurance process would need clearer understanding of what risk is when considering the OEIs
 - b. There should be an emphasis on standards of education and quality with underpinning of implementation. It was thought that the GOsC was doing well with its processes and therefore important to ensure this would continue.

Risk Register

25. In June 2015 the Risk Register was considered by the Committee so that members could judge their effectiveness in scrutiny of activities.

26. There had been some concern about how those outside of the osteopathic profession were made aware of the advances in the management of risk. It was agreed important and challenge but it was also recognised that the pace change took a little more time than in some other professions. It was also advised to identify as a mitigating action checks on the financial stability of the OEIs.

Engagement

27. During 2015-16, the Chair of the Education and Registration Standards Committee chaired 1 meeting with the OEIs.

28. Topics discussed at the GOsC/OEI meeting including:

- Update on GOPRE guidance
- Engagement with students
- RQ Annual Reports 2015
- Enrolling and supporting students with visual impairments
- Complaints about osteopathy
- GOsC Corporate Plan 2016-19
- Student registration with GPs
- Reviews of Student Fitness to Practice Guidance and Health and Disability Guidance

Membership

29. During the period April 2015 to March 2016 the Education and Registration Standards Committee membership comprised:

Name	Member details	Meetings attended
Professor Colin Coulson-Thomas (Chair)	Council lay member	3/3
John Chaffey	Council registrant member	3/3
Dr Jorge Esteves	Council registrant member	3/3
Dr Jane Fox	External lay member	3/3
Professor Bernadette Griffin	External lay member	3/3
Joan Martin	Council lay member	3/3
Robert McCoy	External registrant member	3/3
Liam Stapleton	External lay member	2/3
Alison White	Council lay member	2/3

Cost of Education and Registration Standards Committee-related work

30. It is estimated the costs of running the Education and Registration Standards Committee and its related activities, excluding staff time, is approximately £93k. This is calculated as follows:

Activity	Cost £
Committee member: fees and expenses	7,172
Quality assurance	47,002
Student fitness to practise	7,783
Osteopathic pre-registration education	1,987
Registration Assessments	29,100
Total	93,044

31. It should be noted that 2015-16 was a particularly challenging year for the Professional Standards team. The staff and those who have supported them in continuing to maintain standards and support the Committee and stakeholders are commended for their commitment and hard work during this period. In particular, thanks should go to Professor Colin Coulson-Thomas who stood down as Chair of the Committee at the end of the 2015-16 year.

Annual Report of the Osteopathic Practice Committee (OPC) for the financial year 2015-16.

1. The Osteopathic Practice Committee met three times during the period under review – in May 2015, October 2015, and March 2016. This report summarises the work of the Committee. Full minutes of all the meetings have already been reported to the Council.
2. The final meeting of the OPC was March 2016 and its work will continue with the Policy Advisory Committee.

Fitness to practise practice notes and guidance

3. The OPC considered the Interim Suspension Order (ISO) Guidance document for the fitness to practise committees at its June meeting.
4. The ISO Guidance had been substantially updated and modified to enable the fitness to practice committees to make consistent, reasoned and legally sound decisions when determining whether to impose an Interim Suspension Order. The revisions which were made more accurately reflected what rules and legislation provide, was more risk averse and relevant. The OPC agreed the guidance should be recommended to Council for consultation.

Witness Guidance

5. The Committee considered the draft Witness Guidance developed as part of a range of tools to ensure witnesses are properly assisted to give evidence. In continuing the development of the guidance it was recognised that it should be less technical in its use of legal language and that needs of vulnerable witnesses should be considered. It was agreed that a further draft would be circulated for review before its publication.

Case Examiners

6. At the March 2016 meeting the Committee considered a proposal on the role of Screeners as part of the ongoing reform programme, and how their role could be enhanced to follow a similar model to that of Case Examiners at the investigating stage of a fitness to practice case.
7. To introduce Case Examiners to the GOsC would require a Section 60 Order and it was considered a more feasible option would be to expand the role of the screener to improve the efficiencies and streamline the process without a change to the Act or rules.
8. A number of comments and suggestions were made by the Committee to be considered by the Executive including the development of a pilot to run concurrent with existing procedures to test how the scheme would operate in practice.

Legally Qualified Chairs

9. The Committee considered the use of legal assessors and the introduction of legally qualified chairs. Following a review of the statutory framework it was found that a legal assessor was not always required at certain meetings and hearings and that a legally qualified chair could sit without a legal assessor present.
10. The Committee expressed its concern as to whether the proposal was an appropriate legal route to follow but consideration had been given to the risks and comments had been invited from experienced members of the FTP Forum.
11. It was the finding of the Committee that moving to a system of legally qualified chairs was dependent on the experience of those appointed. The pilot would be kept under review.

Registrants with blood borne conditions

12. At the meeting in June 2015 the Committee was asked to consult on draft advice for osteopaths about blood borne conditions such as HIV and hepatitis. In considering the issue the procedures of other regulators had been reviewed and it was considered that what was published in the *Osteopathic Practice Standards* (OPS) was clear and compatible with other regulators. It was agreed that advice rather than guidance be produced and that a limited consultation take place.

Risk Register

13. The Committee reviewed the Risk Register to judge their effectiveness of scrutiny of the activities contained within it. A number of amendments were suggested to ensure the Committee had additional oversight in areas relating to the fitness to practice 'dashboard' and the financial stability of the OEIs should be added to the assurance mechanisms.

Implementation of Duty of Candour

14. The Committee considered the GOsC's report and the approach to implementing duty of candour at its meeting in June 2015. An outcome of the subsequent report found that although an integral part of the OPS osteopaths did not consider duty of candour as a significant concern.
15. It was found that the duty of candour posed questions about what was covered by the OPS, what was relevant to ftp and fundamentally what was meant by candour. The Committee agreed that the duty of candour had to reflect and be relevant to osteopathy and work within the remit of the GOsC. It was also agreed that the report highlighted gaps in the OPS.

16. In putting forward the duty of candour it was commented that osteopaths should be assured that it was a mark of professionalism to show candour and that acknowledging error was not necessarily an admission of liability.
17. The approach to the duty of candour which outlined developing of standards, guidance and resources was noted by the Committee.

Common classification system for recording and monitoring concerns about osteopathic practice

18. The independent analysis of data collected during 2013 and 2014 by the GOsC, the Institute of Osteopathy and providers of professional indemnity insurance, relating to complaints and claims about osteopaths was reported to the Committee as been very useful in underlining the prevalence of recurring issues within the profession. These have been published in '*the Osteopath*' as teaching/training material.
19. It was agreed there was still an ongoing issue stemming from the nature of osteopathy and complaints which arise from the perceived crossing of professional and sexual boundaries and this work continues through a number of work-streams as outlined in the Business Plan.

Continuing Professional Development

20. A 16 week public consultation on proposals for a revised scheme took place between 9 February and 31 May 2015 which proved to be a valuable exercise and the experience and learning has been built on. The response to the consultation had been among the largest GOsC had received due in part to the number of options available for participants to engage in the process.
21. The consultation responses were extremely supportive of the new scheme - - due to the collaborative development of the scheme and the accompanying resources and case studies which showed how osteopaths had already tried out some elements of the scheme. The consultation showed that there was a need for further guidance and detail on the implementation of the peer discussion review. It was also shown that those who had experienced the process through regional meetings had been positive and the issues might be addressed through communication.
22. At the March 2016 meeting of the Committee the themes of engagement community and partnership were continued in the development of the governance structure to support the implementation of the CPD scheme. The Committee considered this in detail showing the different levels of decision making along with the suggested terms of reference (ToR). In presenting the scheme the Committee was advised there had been discussion at Council and more detail of the proposed structure, decision matrix and ToR had been incorporated.

23. It was agreed that there the ToR should include mention of the time limited nature of the project and that there was a need to be precise about accountability. It was also agreed that the teaching faculty would be included in the membership of the Delivery board and reconfirmed that the budget for the scheme would come from the £100,000 designated by Council.

CPD Resources and Case Studies: Consent and Communication

24. An extensive scoping report was brought to the Committee in March 2016 reviewing the current support resources available for the implementation of the new CPD scheme and preparing for developing material to support the scheme. The project has also acted as an audit of the information available on the o-Zone.
25. It was agreed that there was a lot of information available to profession and the ideas put forward in the paper were excellent and a rich resource in demonstrating this. Osteopaths should be encouraged to use all resources available to them. Work is ongoing to consolidate and expand the range of resources in an easy to use way.

Review of Osteopathic Practice Standards

26. At the meeting of the Committee, October 2015, the proposed approach for the review of the *Osteopathic Practice Standards*, published in 2012, was discussed and taking into account the findings of the McGivern Report and the outcomes of the Values Seminar.
27. The McGivern report highlighted how osteopaths sometimes misinterpret or misunderstand the OPS although it was not believed the standards were entirely the reason for misinterpretation.
28. Going forward it was agreed the focus would need to be on guidance and the provision of practical materials to support the standards as well as asking the profession, through consultation, where they thought the difficulties might lie.
29. There was agreement on a need to instill new interest and enthusiasm for the OPS and that the profession and stakeholders must take ownership of professionalism in working with the GOsC to achieve this.
30. At the meeting in March 2016, the Committee was advised that a major review of the OPS had been launched and anyone one with an interest in the osteopathic profession had been invited to participate using all available media including Twitter and Facebook. The OPS consultation ended on 31 May.

Recognition of Professional Qualifications: IMI Alert System

31. The Committee considered the requirements of EU Directive 2013/55/EU which aims to facilitate professional mobility across the EU. The Directive 2013 also

requires competent authorities to use the International Market Information (IMI) system of alerts about registrants or applicants in accordance with the Directive's requirements. As an alert system already existed between the GOsC's Regulation and Registration teams the compliance with the EU Directive would mean some minor amendments would be required to the internal alert system.

Corporate Plan 2016-19: Committee consideration of initial themes

32. The Committee considered the initial themes and activities in the draft Corporate Plan. In commenting on the plan it was suggested:
- a. The education quality process might require a fundamental rethink on approach with a focus on quality assurance rather than control.
 - b. That there might be a need for a rethink on quality assurance investment with resources targeted at higher areas such as CPD.
 - c. That with the reconstitution of Council it might be helpful to strengthen activity on the effective operation of Council, and also feature organisational structure and capacity building as an activity.

Membership

33. During the period April 2015 to March 2016 the Osteopathic Practice Committee membership comprised:

Name	Member details	Meetings attended
Jonathan Hearsey (Chair)	Council registrant member	3/3
Julie Stone	Council lay member	3/3
Dr Jane Fox	External lay member	3/3
Kenneth McLean	Council registrant member	3/3
Manoj Mehta	External registrant member	2/3
Alison White	Council lay member	3/3
Jenny White	Council lay member	3/3

34. Thanks is given to Jonathan Hearsey, who stood down from Council in 2016, for his work as Chair of the Committee.

Cost of Osteopathic Practice Committee-related work

35. It is estimated the costs of running the Osteopathic Practice Committee and its related activities, excluding staff time, is approximately £27k. This is calculated as follows:

Activity	Cost £
Committee member: fees and expenses	4,101
Continuing fitness to practise framework	12,955
Osteopathic Practice Standards	9,445
Publications and subscriptions	68
Total	26,569