



**Contract evaluation report to the  
General Osteopathic Council**

**2017 – 2019**

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### Introduction

The Quality Assurance Agency for Higher Education (QAA) is contracted by the General Osteopathic Council (GOsC) to undertake quality assurance services for the period 1 August 2015 to 31 July 2020. This report covers the period 1 August 2017 to 31 March 2019, as one of the deliverables of the contract, and sets out QAA's achievement of deliverables against the agreed programme of activities as set out in the contract (Annex A – Specification and Annex C – Operational timeline).

This report provides the following information for the reporting period:

- a main summary of activities
- a detailed report of activities undertaken against the deliverables
- an evaluation of review activity from the analysis of evaluation questionnaires (Annex A)
- a summary of the feedback from visitors' appraisals (Annex B)
- an action plan arising from the contract evaluation and incorporating feedback from review evaluations, visitor appraisals and stakeholder consultation (Annex C).

### Summary of activities

Review activity:

Six renewal of recognition reviews

- British College of Osteopathic Medicine (BCOM) – October 2017
- North East Surrey College of Technology (NESCOT) – October 2017
- European School of Osteopathy (ESO) – April 2018
- London School of Osteopathy (LSO) – October 2018
- London College of Osteopathic Medicine (LCOM) – December 2018
- Swansea University – February 2019.

Contribution to the development and implementation of a new Quality Assurance Framework:

- development and production of public consultation document
- evaluation of handbooks
- development and production of interim provider and visitor handbooks
- development and production of new combined handbook
- stakeholder consultation and engagement.

Visitor pool:

- joint recruitment of lay and osteopathic visitors with the appointment of three lay visitors and one registration assessor (July 2018)
- two-day refresher training for visitors, review coordinators and registration assessors (September 2018).

Evaluation:

- evaluation of reviews completed
- visitor appraisals completed (March 2018 and March 2019).

Liaison with the Office for Students (OfS) regarding the GOsC method:

- Engagement with OfS staff
- Development and production of Statement of Equivalence (with the Higher Education Review method) and revised Statement.

(It should be noted that the last section is not a contract deliverable but undertaken by QAA under its responsibilities as provider for quality assurance services to GOsC)

### A report of activities undertaken over the period August 2017 to March 2019

Deliverable	Activity
Overall project/contract management and relationship management	<p>Completed</p> <p>Regular contract management meetings have been held throughout the period by teleconference calls and visits to GOsC by the Method Coordinator.</p> <p>The Method Coordinator has also attended Policy Advisory Committee meetings to introduce review reports and the annual report analysis.</p>
Maintaining a pool of visitors	<p>On-going</p> <p>A reduction in the size of the visitor pool meant that a renewal of recognition review scheduled for autumn 2018 did not have a lay education visitor. In the summer of 2018, QAA and GOsC undertook a joint recruitment exercise for the roles of osteopathic and lay education visitor. Three lay education visitors and one registration assessor were appointed. There is now a total of 14 osteopathic visitors and five lay visitors.</p> <p>Interview feedback provided to two unsuccessful candidates – August 2018.</p> <p>Visitor training for experienced and new visitors took place on 17 and 18 September 2018. Feedback from the event was extremely positive.</p> <p>Individual performance and development appraisals of visitors who had undertaken review visits took place in March 2018 and March 2019, contributing to the evaluation of review activities and visitor training. A separate section covering the outcomes of these is included in this contract evaluation report (Annex B).</p> <p>QAA underwent a successful ENQA (European Association for Quality Assurance in Higher Education) review in summer 2018.</p> <p>Standard ESG 2.4: Peer Review Experts states that external quality assurance should be carried out by groups of external experts that includes a student member(s). The review panel recommended that: <i>'Students should be included in all review methods aligned with the ESG as a standard feature, without reservations and special clauses'</i>.</p> <p>The GOsC method does not include student reviewers. Following discussion with GOsC regarding the recruitment of student reviewers, QAA has included in the ENQA action plan the meta objective of ensuring student reviewers are part of future GOsC review teams. The</p>

	process of recruitment of student reviewers has yet to be agreed with GOsC.
Renewal of recognition reviews	<p>Completed</p> <p>Six renewal of recognition reviews were undertaken:</p> <ul style="list-style-type: none"> <li>• British College of Osteopathic Medicine (BCOM) – October 2017</li> <li>• North East Surrey College of Technology (NESCOT) – October 2017</li> <li>• European School of Osteopathy (ESO) – April 2018</li> <li>• London School of Osteopathy (LSO) – October 2018</li> <li>• London College of Osteopathic Medicine (LCOM) – December 2018</li> <li>• Swansea University – February 2019.</li> </ul> <p>The renewal of recognition review for the London School of Osteopathy was due to be completed in April 2018, however this had to be terminated part-way through the visit. The visit was re-scheduled and completed in October 2018.</p> <p>All renewal of recognition reports were delivered to GOsC as scheduled and comments provided on the action plans for NESCOT, ESO and LCOM.</p>
Initial recognition reviews	No initial recognition reviews were scheduled or undertaken during the specified period.
Unscheduled monitoring reviews	No unscheduled monitoring reviews were undertaken during the specified period.
Follow-up reviews of action plan and/or conditions	No follow up reviews of action plans or conditions were undertaken during the specified period.
Annual report analysis	<p>Completed</p> <p>Analysis of annual reports and supporting documentation from each osteopathic education institution was undertaken in January/February 2018 for academic year 2016/17 and January/February 2019 2019 for academic year 2017-18. A report on each annual report was provided with recommendations where appropriate.</p>
Contract evaluation report	<p>Completed</p> <p>Online evaluation of renewal recognition reviews conducted involving providers, visitors and review coordinators.</p> <p>Separate feedback on each review was obtained from visitors as part of the appraisal process and from review</p>

	<p>coordinators by phone calls during and after the monitoring review.</p>
<p>Contribution to the development of the New Quality Assurance Framework</p>	<p>Completed</p> <p>Delivered a workshop, in conjunction with GOsC, to the Council of Osteopathic Educational Institutions (COEI) on the proposed changes to assuring the quality of osteopathic education – October 2017.</p> <p>Attended an Inter Regulatory Group meeting to consult on GOsC's proposals to revise the approach to assuring the quality of osteopathic education – November 2017.</p> <p>Developed and produced the public consultation document on the changes to the quality assurance of osteopathic education – January 2018.</p> <p>Evaluated visitor and provider handbooks (2011) – May to July 2018.</p> <p>Developed and produced interim provider and visitor handbooks for renewal of recognition reviews scheduled for September 2018 to February 2019 – August 2018.</p> <p>Developed, produced and published new combined handbook – September 2018 to March 2019.</p> <p>Stakeholder consultation and engagement (providers, visitors, review coordinators and Policy Advisory Committee) on the new Quality Assurance Framework – October 2017 to March 2019.</p>
<p>(Additional activity undertaken outside of the agreed contractual arrangements)</p> <p>Liaison with the Office for Students (OfS) regarding the GOsC method:</p>	<ul style="list-style-type: none"> <li>• Engagement and facilitation with OfS staff (August 2018 to March 2019)</li> <li>• Engagement with GOsC (August 2018 to March 2019)</li> <li>• Development and production of Statement of Equivalence (with the Higher Education Review method) and revised Statement – September/October 2018</li> </ul>

### Annex A: Overview of responses for evaluation questionnaires, GOsC reviews

#### Introduction

During academic years 2017-18 and 2018-19, six GOsC renewal of recognition visits were undertaken. This report presents the outcomes of the post review evaluation process for these visits, based on the analysis of responses from the questionnaires.

The aim of the evaluation questionnaire is to obtain feedback on the method and the performance of the visitors and coordinator from all parties involved in the review visit. The questionnaires align with evaluations for QAA's other methods. Respondents are asked for feedback on the method, the visit, their own performance, and the performance of team members.

The questionnaires are sent to respondents by QAA's Data and Analytics Team (D&AT) within two weeks of the review visit. The team manage the evaluation process, collate the relevant data and send information to the QAA Method Coordinator when required. Feedback on visitor performance is discussed with each visitor individually as part of the appraisal process and may be used in their contract management. Feedback is also used in the appraisal and contract management of review coordinators. It is also used to inform QAA's programme of visitor training.

#### Response rates

Questionnaire Group	Number sent	Number completed	Return rate (%)
Review Co-ordinators	6	6	100
Visitors	18	18	100
Providers	6	5	83
Total	30	29	97

#### Response rates to questionnaire survey by respondent groups

#### Outcomes from the questionnaires

This analysis is based on a response group of 29. Response rates continue to be very high at 97%. Respondents were overwhelmingly positive about their involvement with GOsC visits.

#### Method and QAA

Review team respondents agreed that the combination of the Handbook and training provided sufficient information for them to undertake their roles. Visitors were generally able to work effectively using QAA's Review Extranet, however less experienced visitors reported initial difficulties using the system which related to uploading, locating and manipulating documents and password resets. One provider commented that not being able to see uploaded documentation on the Extranet led to duplication or omitted documents.

Respondents were asked if there was any further support or guidance they might need to participate more effectively in the review process. Areas identified included:

- use of the Extranet
- guidance on report writing and referencing
- managing substantial amounts of information



- strategies for identifying key issues
- decision-making
- guidance on the new Handbook and new Quality Assurance Framework
- regular ongoing engagement in the process to facilitate skills development

All visitors and review co-ordinators felt that they had performed their role effectively either completely or to a large extent. This was confirmed by providers who assessed the contribution of individual visitors and review co-ordinators to the review visit as either excellent or good.

Respondents indicated that the visit completely met its stated purposes and one respondent felt that this was met to a large extent.

In terms of how the visits could be enhanced to better meet the stated purposes, or feedback about the method for QAA to consider, a few areas were mentioned by more than one visitor respondents:

- Visit duration should be extended to allow the osteopathic visitors more time to explore evidence and teaching and learning opportunities
- Guidance for providers in developing, writing and submitting the self-evaluative document
- Guidance on report writing for visitors
- Word length guidance for visitors on report sections
- Guidance on the conduct of meetings for visitors and providers
- Greater clarity on the use of the new Quality Code within the GOsC method.

Guidance on report writing for visitors was included as part of visitor training in September 2018, however it is acknowledged that this is an ongoing developmental need. Word length guidance is incorporated in report templates.

### Visits

Almost all respondents agreed that the visit they had been involved in had sufficient opportunities for evidence to be presented and sufficient opportunities for appropriate discussion during the visit. Two visitors partially agreed with this statement and provided explanatory comments linked to the need to have appropriate evidence at the earliest opportunity and time pressures during the visit:

*'It may be appropriate to develop additional support for institutions to ensure that they are better able to write a self-evaluative document as this would greatly enhance the initial evaluation process'.*

*'... ensuring that providers have a clearer understanding of what evidence is required well in advance ... The visit timeline is tight and requires visitors to be prepared and clear as to what they want to see and ask at visit – this can be challenging when the direction for investigation changes during a visit. Increased time for the visit on-site would be helpful'.*

All providers commented positively on their experience in meetings during the visit and some providers cited their appreciation of review teams' willingness to be flexible and adapt to the needs of smaller institutions both prior to and during the visit. One provider felt that an initial shared meeting with all visitors and the senior management team would have facilitated streamlining during the visit and another found the final feedback meeting as 'serving no real purpose'.

All osteopathic visitors agreed that they had had sufficient opportunity to observe both clinical and non-clinical teaching and learning and some commented on the usefulness of these in triangulating evidence and being able to observe good teaching. However the following points were made about the challenges of observing teaching and learning and examination of student work within a busy visit schedule:

*'(Observations of teaching and learning) ....were challenging to fit in within the demands of the review, but achieved. Having to go to different areas of the site for these took up some time ...'.*

*'The visit was tightly timetabled and it limited a broader opportunity to observe a wider spectrum of teaching and learning opportunities. A slightly longer visit span might allow the opportunity to explore this aspect in greater depth and an opportunity to triangulate what has been observed against module documentation with greater time'.*

*'Due to time pressures during the visit, it's difficult to give one to one feedback direct to the lecturer or clinical tutor immediately following the observation session .... In these cases I gave feedback at a later time via the Head of Osteopathy. This was fine ... as I had positive feedback, nothing sensitive to report and also the lecturer concerned had left'.*

*'I think here was enough time to cover everything with everybody. It is more awkward for the osteopathic visitors who have to fit in classroom, clinic observations and examination of student work, leaving less thinking time during the visit ...'.*

The use of the Osteopathic Practice Standards (OPS) and other external reference points are tested by the visitors during the review visit. All respondents agreed that these reference points were used appropriately with the OPS being met completely in all cases and other reference points being met completely in all but two, where respondents stated that they had been met to a large extent. In general respondents commented positively on the use of reference points by providers and their own consideration of them throughout the visits:

*'Extremely useful reference points to guide and inform the deliberative processes'.*

*'Reference to the OPS was paramount in the minds of the review visitors'.*

*'Although reference points other than the OPS were largely built into University procedures, it was clear that reference points were familiar to staff ... Other than OPS or the subject benchmark, though, more generally, reliance may simply be placed on University procedures which (should) incorporate the Quality Code ...'.*

*'These are useful reference points when looking at the evidence'.*

### Summary

The feedback received from all reviews was overwhelmingly positive. Guidance and support from QAA was found to be useful and well received with the visits themselves conducted in accordance with the stated method. Respondents commented positively on the use of reference points. All provider respondents commented positively on their experiences during the review visit.

Some respondents would like to see additional support given to providers on developing the self-evaluative document and evidence requirements. This has been explicitly addressed in the 2019 GOsC/QAA Handbook with prompt questions and basic evidence requirements

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listed. It was also suggested that the method become more flexible in order to accommodate differences in the size and number of delivery sites of the provider, to ensure that sufficient time is available to observe teaching sessions and review student work. A number of points/suggestions were made to enhance the effectiveness of the method. These are incorporated within the action plan at Annex C of the contract evaluation report.

### Annex B: Summary of feedback from visitors' appraisals

During March 2018 and March 2019, the Method Co-ordinator conducted appraisals by telephone with visitors who had been involved in review visits, discussing their feedback from their review evaluations, feedback on their own performance, and the feedback on their performance from their team members and providers. Where visitors had not been involved in a review visit, the Method Co-ordinator discussed training needs and any areas of improvement/refinement of the method at the training event held in September 2018.

No concerns about the performance of individual visitors were raised by their team members. Visitors were very positive about the performance of their colleagues, rating their performance as either good or excellent. Constructive comments were made about the performance of new visitors and these were discussed with them as part of the appraisal process.

Evaluation responses were received from five of the six providers undergoing review. These too were positive about the performance of the review team members with ratings of 'excellent' and 'good'. Comments made by providers reflected on the professionalism of the review teams:

*'The review team had similar strengths but quite different personalities and style. I think this was useful as it made it easier to engage with them as a team. The team did well not to show any obvious personal bias or make personal judgements during the Q&A sessions - this allowed for a much more honest exchange'.*

*'(The team was) ... professional and courteous throughout the visit'.*

*'Overall the questioning in the meetings attended by members of staff was appropriate and relevant to the process'.*

*'(The review team) ... adapted to the relatively small size of (the provider) ...'*

*'Calm and professional. Clearly can take in a lot of information and detail ... very knowledgeable and professional ...'*

Appraisals allowed both the visitor and Method Co-ordinator to explore the feedback in more detail. A number of themes emerged:

#### 1. Time commitment

New and more experienced visitors commented on the significant personal time commitment required throughout the review process and the importance of being prepared for this. In particular the large amount of data and information to be analysed was highlighted. It was felt that the time taken exceeds the amount paid for the work involved.

#### 2. Use of the Reviewer Extranet

Some visitors experienced difficulty with access (e.g. expiration of passwords and having to provide verification details multiple times during sessions); issues with regard to the management of documents and how to set up alerts. An IT support emergency telephone number was requested by some visitors.

#### 3. Review team meeting prior to visit

All visitors felt that a meeting of the review team would be highly beneficial once the provider's self-evaluative document had been analysed. This would provide the opportunity for the team to: discuss their findings; finalise additional evidence requests; formulate lines of enquiry; develop a list of people to meet; finalise arrangements for chairing meetings and

agree other arrangements for the visit. It was suggested that this meeting should be virtual to keep costs and time commitments to a minimum. First team meetings are a feature of all other QAA review methods.

#### 4. The new Quality Code

A number of visitors highlighted the need for information and training on the Quality Code (2018) and how this linked into the GOsC method.

#### 5. The new GOsC/QAA Handbook

All visitors highlighted the need for information and training on the new GOsC/QAA Handbook (2019).

#### 6. Challenges for osteopathic visitors during review visits

Almost all osteopathic visitors highlighted the challenges of the review visit whereby they were required to attend meetings, observe teaching and learning and examine student work; in addition to contributing to agenda setting and bulleting during private team meetings. It was suggested that review visits should be extended to allow opportunities for the observation and triangulation of a wider spectrum of teaching and learning and reflection upon this evidence.

#### 7. Wording of conditions, areas for development, strengths and good practice

Most visitors highlighted the challenges of drafting the wording for conditions, areas for development, strengths and good practice and would welcome additional training on this.

#### 8. Post visit commitments

Almost all visitors felt that the expectations of visitors post visit needed to be clarified, in particular with regard to visitor feedback on action plans and the timescales involved.

#### 9. Feedback from GOsC Policy Advisory Committee (PAC)/Education Committee

Some visitors commented that feedback from GOsC, and in particular the PAC/Education Committee, on reports would be welcomed. It was acknowledged that extensive feedback was received from QAA throughout the report writing and action planning stages, but once reports were sent to GOsC no further information was received. Visitors expressed a wish that the 'feedback loop' should be completed.

#### 10. Sharing QA practice

A separate session at the annual training event for osteopathic and lay visitors to share practice and discuss issues relevant to them was requested by most visitors.

#### 11. Review evaluation

Visitors acknowledged receipt of their evaluations prior to their appraisal taking place. However they felt that the review evaluation system could be improved if they were able to save/retrieve/print their evaluations at the time of submission.

Identified GOsC visitor training needs:

1. A session on understanding and evaluating risk in the context of GOsC's risk based approach.
2. A session on the new Quality Code
3. A session on the new Handbook

4. 'Things I wish I'd known before I started' or 'If I knew then what I know now'. This could be facilitated by two or three experienced reviewers who would enable a general discussion about best practice and swapping hints and tips for more efficient and effective working.
5. Session for Lay Visitors on determining financial health and the critical analysis of external financial reports. In particular, interpreting financial annual reports and audit reports with specific reference to resolving conflicting external audit reports and interpretations made by GOsC.
6. Difficulties or problems arising during visits and how these can be resolved. This could be delivered as a series of scenarios that visitors could explore in groups, using the new Handbook, and feedback in a plenary session.
7. Drafting wording for conditions, AfDs, strengths and good practice and ensuring that text supports each of these.
8. The expectations of visitors post-visit; particularly with regard to the action plan (e.g. format, comments, re-submissions). It was felt that this should be a joint session with QAA and GOsC.
9. A session on analysing a mock SED and assessing what additional evidence would be needed. In addition, visitors could write a section of text using as resources the SED, mock meeting notes and mock evidence.
10. A specific lay visitors' session whereby all the lay visitors could get together and talk about issues relevant to them. An osteopathic visitors' session could be facilitated at the same time.
11. A session on focusing on key words and triangulation along with a facilitated discussion around this.
12. Strategies and tactics for getting as much from meetings as possible within a short period of time i.e. one hour.
13. An interactive session using the Extranet. Newer and more experienced visitors identified issues with the Extranet in terms of access, efficient and effective usage, filing and setting up alerts.

**Annex C: Action plan arising from the contract evaluation**

(Method Coordinator = MC)

<b>No.</b>	<b>Issue</b>	<b>Action</b>	<b>Who/when</b>
1.	Recruitment of student reviewers for GOsC method	Brief QAA HR and AST staff	MC - October 2019
		Develop person specification for role	MC & GOsC – October 2019
		Develop applicant information pack	MC - October 2019
		Develop advert for GOsC and QAA website	MC & GOsC - October 2019
		Agree interview panel	MC & GOsC – October 2019
		Agree date and venue for interviews	MC & GOsC – October 2019
		Develop shortlisting grid	MC – November 2019
		Interview applicants and agree appointment	MC & GOsC – December 2019
2.	Further support and training on the use of Reviewer Extranet and document management	Manage post-interview process	MC & QAA HR/AST – January 2019
		Induction and training of successful applicant	MC & GOsC – February 2019
3.	Emergency IT support	Include in visitor training	MC – September 2019
4.	Provider access to information on uploaded evidence	Explore solutions with IT support team	MC – August 2019
		Identify action and circulate to visitors	MC – September 2019
5.	Guidance on report writing, referencing and the wording of conditions, AfDs, strengths and good practice	Explore solutions with IT support team	MC – August 2019
		Identify action and inform providers undergoing review	MC – September 2019 and ongoing

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No.	Issue	Action	Who/when
6.	Guidance and strategies for managing substantial amounts of information prior to and during the review visit	Include in visitor training	MC – September 2019
7.	Strategies for identifying key issues from provider evidence	Include in visitor training	MC – September 2019
8.	Strategies to facilitate decision-making	Include in visitor training	MC – September 2019
9.	Guidance on the new GOsC/QAA Handbook (2019) and Quality Assurance Framework	Include in visitor training	MC & GOsC – September 2019
10.	Regular on-going visitor engagement to facilitate skills development	Discuss options and possible solutions with GOsC	MC & GOsC – October 2019
11.	Time available for, and purpose of, teaching/clinic observations and examination of student work	Discuss options and possible solutions with GOsC	MC & GOsC – October 2019
12.	Guidance for providers in developing, writing and submitting the self-evaluative document	Discuss options and possible solutions with GOsC	MC & GOsC – October 2019
13.	Amount of time taken to complete the review exceeds the number of days paid	To consider as part of renewal of contract	QAA/GOsC - January 2020
14.	Clarify visitor input requirements post-draft 1 report submission, in particular the provider action plan	Clarify expectations with GOsC	MC & GOsC – June 2019
		Include in visitor training	MC & GOsC – September 2019
15.	Feedback from GOsC PAC/Education Committee on all reports	Discuss options and possible solutions with GOsC	MC & GOsC – June 2019
		Feedback at visitor training	MC & GOsC – September 2019
16.	Schedule one separate osteopathic and lay visitor session at training events to facilitate specific knowledge exchange	Discuss request with GOsC	MC & GOsC – June 2019
		If possible, include in visitor training	MC & GOsC – September 2019
17.	Evaluation form: facility for visitors to save/print their responses	Discuss possible solutions with QAA D&AT	MC – September 2019
18.	Guidance on understanding and evaluating risk in the context of GOsC's risk based approach	Include in visitor training	MC & GOsC – September 2019
19.	Guidance on the Quality Code (2018) and its role as a reference point within the GOsC method	Include in visitor training	MC & GOsC – September 2019
20.	Schedule a training session facilitated by experienced visitors: 'If I knew then what I know now'	Include in visitor training	MC & two experienced visitor



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No.	Issue	Action	Who/when
	to share learning from the review visit process		volunteers – September 2019
21.	Provide training on determining the financial health of providers and critical analysis of external financial reports	Discuss action and possible solutions with GOsC	MC & GOsC – December 2019
22.	Provide scenario based training on problems/difficulties that can arise during visits	Include in visitor training	MC & GOsC – September 2019
23.	Provide training on analysing a self-evaluative document and assessing additional evidence requirements, with a focus on key words and triangulation	Include in visitor training	MC & GOsC – September 2019
24.	Strategies and tactics for effective meetings during the review visit	Include in visitor training	MC & GOsC – September 2019
25.	Schedule a virtual review team meeting after the analysis of the self-evaluative document has been completed and before the review visit	Discuss with GOsC (resource implications) and circulate outcome to visitors	MC & GOsC – June 2019