

Policy Advisory Committee (statutory Education Committee) 13 March 2019 Reissuing of recognised qualifications for osteopathic educational institutions (reserved)

Classification	Public	
Purpose	For decision	
Issue	The approach to the reissuing 'recognised qualifications' for osteopathic educational institutions and agreement of the QAA / GOsC Handbook.	
Recommendations	 To agree the QAA / GOsC Handbook. To agree the osteopathic educational institutions eligible for removal of the expiry date for their 'recognised qualification'. 	
Financial and resourcing implications	Updating of the Handbooks and engagement is costed under our contract with the QAA at c. £8000. The reissuing of 'recognised qualifications' will be undertaken in house and is subject to agreement by the Policy Advisory Committee (the Committee), Council and the approval of the Privy Council.	
Equality and diversity implications	Equality and diversity matters have been incorporated explicitly in the QAA Handbooks which set out the processes that we are following.	
Communications implications	The QAA / GOsC Handbook will be published on the QAA website and the GOsC websites.	
Annexes	A. Updated draft General Osteopathic Council review of osteopathic courses and course providers: HandbookB. Draft table outlining provisional recommendations for removal of expiry date (private)	



General Osteopathic Council

Fiona Browne

Background

- 1. At its meeting in July 2018, following a recommendation from the Policy Advisory Committee in June 2018, Council agreed:
 - the principle of removal of expiry dates and the approach of publication of `conditions'.
 - the approach to further development of the implementation process.
 - the update on the quality assurance review.
- 2. In June 2018, the Committee considered an early draft of the Handbook and after this meeting, a period of engagement took place with stakeholders.
- 3. In October 2018, the Policy Advisory Committee reviewed the updated Handbook to ensure that the approach to the quality assurance visits was consistent with their views. This Handbook also sets out the way in which the expiry dates will be implemented. The Committee suggested some minor clarifications but were broadly content. Consultation took place with stakeholders by the QAA, and further detail about this is outlined below.
- 4. The updated Handbook has now been reviewed by the osteopathic educational institutions and the pool of Education Visitors and the final version is attached at Annex A. Some very minor changes have been made.
- 5. This paper outlines the approach proposed to removal of expiry dates with an updated timeline in accordance with the updated Handbook at Annex A.

Discussion

- 6. As noted by the Committee at its previous meeting, the key updates to this Handbook included:
 - Updated Reference points
 - Clarity on the role of the institutional contact
 - Further emphasis on the role of patient feedback in the visit process.
 - Clarity in the procedure for adapting the QA processes outlined in the Handbook.
 - Enhanced guidance on preparation and submission of the Self Evaluation Document.
 - New policy about the management of sensitive and confidential information
 - Updated policy on compliance with GDPR
 - New policy about withdrawing from a visit
 - Enhanced guidance about the post meeting visit.
 - New policy about the expectation of delivery of the visit report.
 - Clarification of the statutory period for review of the report by the institution
 - New guidance about the management of concerns and complaints during the visit and the GOsC Complaints process.
 - Updated GOsC Quality Assurance policy following consultation.

- Updated procedure for dealing with concerns about osteopathic education from other stakeholders
- New code of conduct for visitors

Feedback from the stakeholders

7. The osteopathic educational institutions considered the document at the GOsC / OEI meeting in November 2018. Feedback has also been recorded from the Visitors and from the Committee members. The feedback and the response are outlined below:

Feedback	Respondent	GOsC Response
Overall, the group felt that the document was much improved. It was felt that it was helpful to have the documentation in the same place speaking to the Visitors and the OEIs rather than two separate documents for each audience.	Osteopathic educational institutions	This is reassuring.
Clarity about the name of the Committee was it the Education Committee or the Policy Advisory Committee.	Osteopathic educational institutions	The reference to the Education Committee remains as this is the term used in the Osteopaths Act 1993 and clarity about this is outlined on the Committee papers.
In terms of the sequencing of the components, it was felt that the governance and management should feature first in the list.	Osteopathic educational institutions	Governance and management has been moved to the top of the list in all relevant areas.
There was a query over the wording in paragraph 13 about the different types of reviews.	Osteopathic educational institutions	This paragraph has been reformatted to enhance clarity.
In paragraph 73, instead of saying 'cannot reach a judgement of approval with conditions' state that approval may be declined to make this paragraph clearer because this means that the institution may	Osteopathic educational institutions	Paragraph 73 has been amended to incorporate these suggestions.

Feedback	Respondent	GOsC Response
be unable to deliver the conditions. Maybe also consider changing the word 'weak' to 'inadequate'.		
It was suggested that the exemplar pro forma should be considered which outlined, for example, job titles, rather than names of individuals. Also, in relation to business critical information, consider stating 'normally' to deal with the scenario of business critical information to commercially sensitive information. It was also the position that we would 'normally' publish, rather than 'normally not publish' and this should be clear in the document.	Osteopathic educational institutions	QAA advise that 'all items should be included in the action plan – this is the case for all our other method action plans and in line with OfS priorities regarding openness and transparency. ' And this is right. However, to allow for flexibility in case there is a scenario where this would not be possible, we have suggested inserting the word 'normally' so that paragraph 85 now reads as follows: 'The action plan will <i>normally</i> be published alongside the review report and will be updated periodically by the provider to provide an up to date picture of the progress that the provider is making to manage and monitor issues that may affect delivery of the Osteopathic Practice Standards and demonstrating to the GOSC Education Committee'
In relation to the GOsC risk based approach – this was generally felt to be acceptable, however, it was emphasised also that context could contribute to the risk profile. Some matters may be of more relevance to risk in smaller or larger institutions, for example, and therefore this made it difficult to identify 'criteria' for risk because it was about the assessment of the whole	Osteopathic educational institutions	No change made. We suggest that the policy outlined a broad- based approach, problems were identified, there was an OEI response and a judgement made rather than likelihood and impact risks in OEIs which were different issues. This wasn't about mitigating actions to prevent potential impact of potential risks, this was about the impact of matters on the delivery of the OPS and therefore

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context in relation to whether there was evidence that standards were delivered or not.		a more detailed formula or criteria perhaps with metrics. It is noted that the Visitors considered that our approach was consistent with the Office for Students in England.
The approach to risk outlined in the QAA / GOsC Handbook is consistent and appropriate with that articulated by the Office for Students.	Visitors	As above.
Areas for development – the group discussed how areas of development should be monitored in a proportionate way. It was felt that a response to the areas of development could be a part of the Annual Report reporting (perhaps also featuring in the institution annual monitoring report). But in this case, what would happen if there had been no progress on areas of development.	Osteopathic educational institutions	Monitoring of areas for development as part of the annual report process has been incorporated into paragraph 75 of the QAA / GOsC Handbook.
Areas for development should be monitored as part of the annual report.	Visitors	As above.
Should there be an even more detailed template for the self- evaluation form? The word 'short' was felt to be imprecise.	Osteopathic educational institutions	No change. See p34 of the QAA / GOsC Handbook. It is not possible to be more prescriptive in the QAA Handbook because of the diversity of the institutions and the context which may demand more or less detail depending on the particular issues.
It was suggested that paragraph 62: Withdrawal from the visit team, should be	Committee feedback	An additional sentence has been inserted in paragraph 62 as follows: 'In the unprecedented

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made more robust so as to avoid any misunderstandings if it became necessary for a visit team to be withdrawn from an institution which was undergoing an evaluation. It was explained that the paragraph was designed for a single visitor who was unable to continue with a visit and that paragraph 66, which says a visit will always conclude with a report, took into account the unlikely scenario of a visit team being withdrawn but it was agreed that inserting wording based on the possible scenario would be considered.		event that a whole visit team would need to withdraw, it would be likely that the visit would need to be postponed. In accordance with paragraph 66, the visit team would still be expected to submit a report of the visit.
It was explained that the process for giving feedback on Visits had been in place for sometime. It was confirmed that at the conclusion of a visit the team complete an electronic survey which is anonymised and sent to the QAA for analysis. It was suggested that the process be made clear in the handbook.	Committee	Feedback is outlined in paragraph 97 of the QAA / GOsC Handbook.
The criteria for appointing Visitors was confirmed and pointed out at pages 46 – 47. It was suggested that the specific requirements for appointment should be included for clarity.	Committee	The Committee required further clarity on visitors being able to assess Masters level qualifications and they felt this should be incorporated into the person specifications for visitors. QAA explain that as the Visitors recommendations have no impact on the individual level of award, that there is no compulsory requirement for masters qualifications here and also if such a requirement were to be in place, it could be

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		regarded as discriminatory and may further reduce the already small pool of suitable candidates for this role. NB Masters qualifications in osteopathy have been in place since 2009 only. It is recognised that further work on development of the profession in this area is required and this is dealt with separately.

8. It is suggested that the Committee may agree the Handbook attached at Annex A taking into account the feedback and the responses set out above.

Approach to removal of expiry dates

- 9. If the Committee is content to agree the updated QAA / GOsC Handbook we propose the following process in order to remove RQ expiry dates.
- 10. Paragraphs 11 and 12 of the Handbook outline the osteopathic educational institutions which are eligible for removal of expiry dates. The handbook states as follows:

'11. The General Osteopathic Council will usually recognise qualifications for a fixed period of time in the following circumstances:

- A new provider or qualification
- An existing provider with a risk profile requiring considerable ongoing monitoring

12. For existing providers, the General Osteopathic Council will usually recognise qualifications without an expiry date (but subject to regular monitoring and review as outlined in the quality assurance policy paper at Annex A to this Handbook) in the following circumstances:

- An existing provider without conditions
- An existing provider with fulfilled conditions and without any other monitoring requirements
- An existing provider who is meeting all quality assurance requirements (providing required information on time)
- An existing provider with outstanding conditions, an agreed action plan and which is complying proactively with the action plan.
- An existing provider engaging with the GOsC.'

- 11. We have prepared a draft summary table at Annex B which sets out the osteopathic educational institutions eligible for removal of the expiry date of their 'recognised qualification'.
- 12. The Committee are asked to discuss and agree this table.
- 13. Next steps will be to prepare draft Recognised Qualification Orders for the osteopathic educational institutions for agreement with the osteopathic educational institutions and the Committee at their next meeting. We have been in discussion with the Department of Health and Social Care to discuss our approach since 2018 and they are content with our approach.
- 14. It is intended that the 'recognised qualifications' eligible for removal of expiry dates will be agreed at the Committee in June, Council in July. The Privy Council will then be asked to approve the decision following the Council decision in July 2019.

Recommendations:

- 1. To agree the QAA / GOsC Handbook
- 2. To agree the osteopathic educational institutions eligible for removal of the expiry date for their 'recognised qualification'.