

LCOM Action plan 2019

We would like to thank the QAA visiting team and the GOsC executive team for their valuable advice and feedback, we were reassured that we had already begun to adopt the approach recommended in their response.

We hope that the updated version of our conditions monitoring workplan along with the additional information below and supporting evidence will serve to reassure the committee that the college is committed to continual improvement and to meeting the highest standards of governance, management and educational quality. The trustees are fully supportive of the review process and keen to move the organization forward in a positive, constructive and collaborative way.

After consideration of advice, feedback and having additional time to work through the conditions, we have decided to undertake a full review of operations at the college that includes the governance of the trust, the management of the college and clinic and a review of the MLCOM course.

In order to do this, we have decided to appoint an external consultant with the relevant knowledge and experience to act as advisor and critical friend during the process but also to provide assurance to the committee that the organization is meeting its stated objectives.

To this end we have also constituted the Conditions Monitoring Committee to oversee the work being carried out and ensure it is happening in a timely and efficient manner in conjunction with meeting the required conditions.

As you will see we have split our action plan into three parts. The first phase is concerned with assuring that the current cohort of students meets the standards necessary to be able to practice as a qualified osteopath in the UK. The second phase is more wide ranging and aims to look at three interrelated components of the organization.

- Governance
- Organizational structure and management
- The MLCOM course

The third phase of the plan is the implementation phase which is harder to document; Whilst we can already see areas that need further development and will no doubt highlight further areas as we go through the process of review and make adjustments it is difficult to say exactly how, at this stage this phase of the plan will be implemented.

The intended action plan is set out below with further detail in the attached Conditions monitoring workplan with further evidence such as moderator and external examiner documentation also provided.

Phase one. Which encompasses *conditions 3 & 4*.

We are mindful that we need to ensure that the current cohort meet the expectations of the profession the public, the regulatory body and meet the standards set out in the osteopathic practice standards. We have prioritized the recommendations to appoint an external examiner for

the course and a moderator for the FCCA examination to provide assurance that students graduating in this cohort attain the standards that are expected. We are on course to fulfil these conditions and have produced a person and job specification, external examiner and moderator handbook, contract, draft report guidance, documented the appointment process and associated documents to ensure this is carried out you can find this documentation attached.

We have sought expressions of interest through contacts at several of the existing Osteopathic Educational Institutions (OEs) and had several experienced external examiners and moderators, who meet the person specification already expressing an interest in the position.

As stated, we aim to have filled these positions by the end of May with orientation in June and we are on course to meet this aim see action plan attached.

This we hope will give reassurance to the committee that the current cohort are of a comparable standard to their osteopathic peers and the examination procedures are rigorous enough to be able to provide assurance of their fitness to practice and that they meet the standards as set out in the OPS.

Phase two. *Which encompasses conditions 1, 2, 5 & 6*

This involves three related streams of work that will be led by a trustee, the new course director and the new deputy course director. The existing course director will continue to run the course and deal with college business on a day to day basis until the current cohort have graduated.

Course / Programme review (conditions 1,2 & 5)

A full review of the course, its design and component parts, i.e. Its stated objectives, learning outcomes, syllabus, curriculum, teaching methods and assessment strategy will be undertaken. It will look at each component in detail, ensure that they are appropriate and are mapped to the standards set out in the osteopathic practice standards and the QAA benchmark statement for osteopathy and make appropriate recommendations for change.

The review will also look at all policies and procedures currently in place at the college, relating to the course of study and ensure they are fit for purpose. Where these are not fit for purpose or do not exist, recommendations will be made for their amendment or created. It will look at current feedback and quality assurance mechanisms (such as student and faculty input) for maintaining standards, as well as student support mechanisms, admissions arrangements and fitness to practice, policies and procedures and produce a definitive course document that is mapped to the OPS. It will also make recommendations on future quality assurance mechanisms to maintain academic standards and maintain alignment of the course.

This element of the review will be led by the new course director who will seek feedback, support and guidance from trustees, faculty, management, students, the external consultant and (where appropriate) the external examiner.

Governance review (Condition 6)

The trustees will appoint amongst themselves a chair who will instigate the governance review they will work in close collaboration with the external reviewer. We have identified the charity

governance review guidelines for smaller charities as a likely method to undertake this review. It will focus the review on seven distinct areas

- Organizational purpose
- Leadership
- Integrity
- Decision-making, risk and control
- Board effectiveness
- Diversity
- Openness and accountability

We will seek guidance from the external reviewer on the use of the charity governance code assessment template as its basis. The review will make recommendations for changes in the governance of the organisation by producing a report in conjunction with the external consultant for the trustees to consider and then enact.

The review will be undertaken by a trustee in close collaboration with the external consultant with support, guidance and feedback from faculty, employees and students.

Organizational review

The organizational review will run in conjunction with the governance and course reviews. It will determine the allocation of responsibilities, functions and processes within the organisation, look at workflows, policies, procedures and role descriptors. It will make recommendations on any changes that may be necessary to fulfil the ongoing work of the organisation going forwards in view of the other work streams.

This element of the review will be led by the new deputy course director who will seek feedback, support and guidance from trustees, faculty, employees, management, students and the external consultant.

It will be necessary for the leads of all three work streams to meet regularly together and with the external reviewer to ensure progression and produce the overall report to the trustees. They will report to the CMC periodically who have delegated responsibility for overseeing the work.

The report will make specific recommendations for the trustees to discuss and approve or not

Phase Three. *Enacting the recommendations.*

Trustees, faculty and students will be involved in the development of all policies and documentation throughout, seeking feedback in the development and implementation of each new policy or procedure.

We aim to have the first two phases of the review completed with the full report and recommendations presented to the trustees for decision by the end of October 2019. Following this the third phase of the plan will be enacted where the recommendations are put in to place. Whilst it

is difficult at this stage to be precise about the length of time this will take, we estimate it will take a further two to three months to enact anticipated recommendations.

As you will see our time lines have shifted. This is mainly to accommodate the additional work involved in undertaking a full review of the course the organisation and its governance of the organization and to allow time to appoint and bring up to speed an appropriate external consultant. We are a small organization that cannot bring to bear the same resources others can in terms of time, manpower or funds. However, we are committed to providing students with the same standards of quality in their education. For this reason, the trustees have made the decision not to run the next course until at least December of this year to give time for any recommendations from the review to begin to be implemented. However, this will be reviewed at the end of phase two and may be changed depending on findings as it may be necessary to modify this. The college will place a note on the recruitment page of the website stating that the college is undergoing a review and will not run the next course until the review has been completed. The college will continue to advertise the course and seek applicants on that basis only.

We would like to point out that whilst the detailed action plan below is presented as a linear process, In reality it will evolve as we go and the intention is to update and modify the plan as we work through it, in this respect it becomes a living document.

We hope that our extended and more detailed plan will reassure the committee as to our commitment to moving the college forwards.

Yours sincerely

Brian McKenna

Co Course Director LCOM.

**LCOM conditions work plan & Institutional Review (IR)
detailed action plan**

Key> BM – Brian McKenna Co Course Director. TD – Tracy Davies Deputy Course Director. GR - Garth Robertson trustee. DM Damon Murgatroyd Faculty member.

CMC conditions monitoring committee. Set up to evaluate proposals and monitor progress of the conditions and the review process.

Phase 1

This phase of the plan is designed to enhance the external scrutiny of the course, ensure comparability of academic standards, provide critical evaluation of the teaching and learning experience, optimise the validity, reliability and consistency of assessment and meet conditions 3 & 4 respectively

Condition	What needs to be done	What steps need to be undertaken	Progress	Responsibility
Implement the arrangements for enhancing the external scrutiny of the LCOM course to ensure comparability of academic standards and provide critical evaluation of the teaching and learning	Appoint an External Examiner for the college to ensure quality and constancy of teaching and assessment, learning experience and ensure academic standards are	Develop Appointment process. Develop <ul style="list-style-type: none"> • Person & Job Specification • Terms of appointment • EE handbook 	Completed Completed Completed Completed	BM & TD

<p>experience (paragraphs 18 and 62)</p>	<p>comparable to other institutions</p>	<ul style="list-style-type: none"> • Induction process <p>Seek feedback from faculty & CMC via email and at faculty and CMC meetings.</p> <p>Gain agreement from trustees regarding the appointment, remuneration, person spec, duties, reporting guidelines, length of appointment and appointment process.</p> <p>Use contacts and other OEIs to gain expressions of interest from experienced EEs (Snowball)</p> <p>BM/TD, DM & GR to create short list and speak directly to candidates.</p> <p>BM/TD, DM & GR to decide on best candidate and produce report to trustees.</p> <p>Trustees make decision on appointment and make formal offer.</p>	<p>Completed</p> <p>Completed</p> <p>Completed</p> <p>Completed</p> <p>Begins W-C 6/5/19</p> <p>Begins W-C 20.05.19</p>	
<p>Finalise the appointment of the moderator for the FCCA</p>	<p>Appoint a moderator for the FCCA</p>	<p>Develop Appointment process.</p>	<p>Completed</p>	<p>BM & TD</p>

<p>examination to optimise the validity, reliability and consistency of assessment (paragraph 22)</p>	<p>examinations to ensure consistency of marking, validity and reliability of the assessment and that students meet the OPS standards.</p>	<p>Develop</p> <ul style="list-style-type: none"> • Person & Job Specification for Moderator. • Terms of appointment • Moderator handbook • Induction process <p>Seek feedback from faculty & CMC via email and at faculty and CMC meetings.</p> <p>Gain agreement from trustees regarding the appointment, remuneration, person spec, duties, reporting guidelines and length of appointment and appointment process.</p> <p>Use contacts and other OEs to gain expressions of interest from experienced moderators</p>	<p>Completed</p> <p>Completed</p> <p>Completed</p> <p>Completed</p> <p>Completed</p> <p>Agreement gained</p> <p>Undertaken & responses received</p>	
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		<p>BM/TD, DM & GR to create short list and speak directly to candidates.</p> <p>BM/TD, DM & GR to decide on best candidate and produce report to trustees.</p> <p>Trustees make decision on appointment and make formal offer.</p>	<p>Begins W-C 6/5/19</p> <p>W-C 20/05/19</p>	
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LCOM conditions work plan & Institutional Review (IR)

Phase 2. detailed action plan.

Pre planning for review

Objective	What needs to be done.	What steps need to be undertaken	Progress / important dates	Responsibility	Outcome
Undertake a review of the educational, governance and organizational aspects of the course to ensure compliance with best practice and ensure quality of education and experience for students.	Set out what needs to be undertaken to assure good governance, quality education and good organizational function.	<p>Develop a process that will look at the existing structure of the MLCOM course and work with existing staff, students and externals to ensure the course meets its stated aim of producing osteopaths that are safe and competent to practice and who meet the osteopathic practice standards.</p> <p>Develop a process that will look at existing governance within the organization, make appropriate recommendations for improvement and provide assurance to students, staff, faculty, the public and other stakeholders that the trust meets its obligations in this regard.</p> <p>Develop a process that will look at the existing organizational arrangement, management structure, roles and responsibilities and decision making in the organization.</p>	<p>W-C 22/04/19</p> <p>W-C 22/04/19</p> <p>W-C 22/04/19</p>	BM TD & GR	<p>Produce comprehensive action plan that looks at immediate needs for current cohort and reviews all aspects of the organization to ensure it is fit for purpose.</p> <p>Put in to effect the recommendations from the action plan as per the external reviewer.</p>

	<p>Appoint an appropriate external consultant to act as a critical friend for the review and to provide assurance to the GOsC that the review is progressing</p>	<p>Set out what is required of the external consultant, reporting guidelines to trustees and PAC, what evidence will be needed to provide assurance of progress and lines of communication.</p> <p>Set out the appointment process.</p> <p>Develop a role and person specification, contract and terms for the external consultant.</p> <p>Seek expressions of interest for the position</p> <p>Short list and make recommendation to the trustees.</p> <p>Trustees make offer of appointment</p> <p>Orientation for external consultant that includes planned review contents and process and seek feedback.</p>	<p>W-C 13/05/19</p> <p>W-C 13/05/19</p> <p>W-C 13/05/19</p> <p>W-C 28/05/29</p> <p>W-C 10/06/19</p> <p>W-C 17/06/19</p> <p>W-C 24/06/19</p>	<p>BM, TD & GR</p>	
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Course review

This element of phase 2 is designed to ensure that the course is fit for purpose and that graduates are safe and competent to practice as osteopaths in the UK and fulfil conditions 1 & 2

<p>Ensure admissions arrangements are appropriate and provide assurance to the trustees, patients, the public and other stakeholders that applicants are fit and appropriate to train as an osteopath in the UK. that applicants have the necessary knowledge and skills to undertake the MLCOM course</p>	<p>Look at admissions arrangements, how we validate applicant's identity, previous qualifications and status in the UK.</p> <p>Look at arrangements for accreditation and or testing of prior learning</p> <p>Research best practice in this area and make recommendations for change</p> <p>Seek advice from ER on proposed way forward and make appropriate changes to plan.</p>	<p>Review existing arrangements for admissions at the college and package in to policy document.</p> <p>Seek feedback from faculty, trustees, external reviewer and students on current arrangements.</p> <p>Research existing information from other institutions regarding admissions in other institutions and arrangements for APL and develop a process for testing prior knowledge.</p> <p>Review feedback and information from research and make appropriate changes.</p> <p>Seek feedback on proposed changes from trustees, faculty, students, external reviewer and other stakeholders such as GOsC</p> <p>Package in to policy for the college.</p> <p>Include in report to trustees for approval.</p>	<p>W-C 17/6/19</p> <p>W-C 24/6/19</p> <p>W-C 1/7/19</p> <p>W-C 8/7/19</p> <p>W-C 22/07/19</p>	<p>BM with assistance from TD, DM in consultation with ER and EE on assessment component</p>	<p>Produce a definitive admissions policy that encompasses necessary due diligence on verification of identity, qualifications and right to study in the UK as well as a process for testing and accrediting prior learning. And thus fulfil condition 5</p>
<p>Ensure that current course structure. Learning objectives & outcomes, curriculum and assessment for the course are appropriate</p>	<p>Review existing course structure, objectives, outcomes etc and ensure it is fit for purpose and if changes need to be made.</p>	<p>Map the current course as it stands now and start bringing together all documents pertaining to the course.</p> <p>Package existing course documentation, module information,</p>	<p>Work has begun</p>	<p>BM with assistance from TD and in conjunction with ER and EE where</p>	<p>To ensure that students of the course meet the outcomes in the Osteopathic Practice Standards</p>

<p>for students and the current educational environment.</p>	<p>Seek advice from ER on proposed way forward and make appropriate changes to plan.</p>	<p>learning outcomes, grade descriptors, marking criteria assessment protocols, portfolio to enable comment to be made.</p> <p>Seek feedback from trustees, faculty, students, external examiner and external reviewer</p> <p>Review feedback and make appropriate changes. Ensure that all changes and subsequent content is aligned and mapped with the OPS.</p> <p>Seek additional feedback on changes</p> <p>Make additional changes in light of feedback ensure alignment with OPS and prepare for inclusion in to report.</p> <p>Make provision for periodic review of course.</p>	<p>W-C 22.05.19</p> <p>W-C 24.06.19</p> <p>W-C 22/07/19</p> <p>W-C 26/08/19 (note students will have graduated, seek agreement from students to stay engaged with process</p> <p>W-C 16.09.19</p>	<p>appropriate such as assessment process and documentation</p>	<p>and are safe and competent to practice as osteopaths in the UK by ensuring that all aspects of the course are aligned with and mapped to the OPS. Thus, fulfilling condition 2</p>
<p>To look at all policies and procedures that support the course &</p>	<p>Review existing course documentation and ensure it is fit for</p>	<p>Start bringing together all documents regarding policies and procedures that support the course such as student</p>	<p>W-C 17/06/19</p>	<p>BM with assistance from TD in</p>	<p>Produce a single definitive Programme</p>

<p>student learning and ensure they are fit for purpose.</p>	<p>purpose develop new course documentation where it does not exist. Seek advice from ER on proposed way forward and make appropriate changes to plan.</p>	<p>fitness to practice, to enable comment to be made.</p> <p>See feedback from trustees, faculty, students, external examiner and external reviewer. Research documentation that is available from other institutions and parties such as QAA / HEA</p> <p>Review feedback, bring together with research and make appropriate changes. Ensure alignment with GOsC policies and procedures and where necessary the OPS.</p> <p>Seek additional feedback on changes.</p> <p>Make additional changes in light of feedback and prepare for inclusion in to report.</p> <p>Bring all the information together in to programme and module handbooks.</p> <p>Make provision for periodic review of policies and procedures.</p>	<p>W-C 15/07/19</p> <p>W-C 12/08/19</p> <p>W-C 02/09/19</p> <p>W-C 23/09/19</p> <p>W-C 07/10/19</p>	<p>conjunction with ER and EE where appropriate.</p>	<p>handbook that clearly outlines the purpose, structure, assessment strategy, fitness to practice policy and operation of the course to ensure consistency and continuity of delivery and understanding of the students in achieving their award and thus fulfil condition 1</p>
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Governance review

<p>Review governance arrangements at the organization to ensure they are fit for purpose. Make recommendation for change that will assures stakeholders and that the charity meets it stated charitable aims and ensure the organization can move forwards, develop and improve.</p> <p>Ensure that the board is fit for purpose and suitably engaged in order to carry out the functions of the organisation</p> <p>Develop an organisational strategic plan, with clear mission statement, vision and core values of the organisation in consultation with Trustees, external reviewer, faculty and patients</p>	<p>Look at the strategy, performance and assurance of the organisation as it stands now and make recommendations for improvement.</p> <p>Elect a chair of trustees from amongst existing members.</p>	<p>Seek advice and guidance form the newly appointed external reviewer, faculty, staff and others regarding the proposals to evaluate the governance arrangements. e.g. to use the template for assessing the charity governance code template to evaluate the organisations current governance arrangements.</p> <p>Act on feedback and begin the process of evaluation.</p> <p>Research governance arrangements is similar organization.</p> <p>Look at current constitution and skills mix of the board of trustees and make recommendations.</p> <p>Collate information from research and review and make recommendations for change</p> <p>Seek feedback on recommendations from ER faculty, students and other stakeholders.</p> <p>Review feedback and make appropriate change</p> <p>Develop an induction process for new trustees to ensure they are aware of</p>	<p>W-C 01/07/19</p> <p>W-C 08/07/19</p> <p>W-C 08/07/19</p> <p>W-C 15/08/19</p> <p>W-C 29/07/19</p> <p>W-C 09/09/19</p> <p>W-C 30/09/19</p> <p>W-C 07/10/19</p>	<p>GR with assistance from BM/TD and ER</p>	<p>Produce necessary policies and procedures to ensure continued good governance. Enable a clear understanding governance structures, lines of accountability and ensure trustees have oversight and are suitably engaged in the governance and function of the organization.</p> <p>The above is in line with and meets the stated condition 6 that is set out in paragraph 52.</p> <p>Produce a strategic plan for the organization based on the findings of the review that encompasses a clear mission statement, vision</p>
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		<p>their role and their responsibilities regarding the organisation and its governance based on the new arrangements and get feedback from stakeholders.</p> <p>Produce a report to the trustees.</p> <p>Enact recommendations from the trustees by producing comprehensive policies and procedures to ensure the ongoing good governance of the organisation and make provision for its regular review.</p> <p>Develop strategic plan</p>	W-C 21/10/19		and core values for the organisation
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Organisational review

<p>A review of the operations of the organisation. Roles and responsibilities of individuals, decision makers and line managers.</p> <p>Detailed review of processes, procedures and policies which support & sustain the organisation.</p>	<p>Organisation review to understand the role and function of the individuals involved in the operation of the organisation</p> <p>To include a detailed analysis of individuals roles, processes, policies and procedures</p>	<p>To review using SWOT analysis the strengths, weaknesses opportunities and threats/ risks that currently exist within the organisation.</p> <p>To maintain and enhance organisational strengths and develop a sustainable plan to address weakness and risks.</p> <p>Teaching Staff Define roles with job descriptions identifying where the skills and expertise are within the organisation.</p> <p>To continue to develop faculty through personal development plan (PDR) appraisals and peer reviews</p> <p>Seek feedback and approval from faculty, External reviewer, committee for monitoring conditions CMC and trustees</p> <p>Develop an organisational chart, defining roles and responsibility of individuals and college committees.</p> <p>Review all organisational committees their role and purpose. Develop terms of reference where necessary and standardise minutes and agendas Consider the formation of new</p>	<p>WC 07/05/19</p> <p>WC 20/05/19</p> <p>Completed</p> <p>Completed</p> <p>WC 13/05/19</p> <p>WC 27/05/19</p> <p>WC 10/06/19</p>	<p>TD in conjunction with BM, GR and ER</p>	<p>Produce a definitive document on the organizational structure and operations of the organization that has clear policies and procedures to ensure the proper functioning of the organisation. With methods for regular review.</p>
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		<p>committees where required /or where necessary.</p> <p>Develop Committee handbook</p> <p>Review communications and engagement with staff within the organisation in consultation with faculty, staff, students and trustees and external reviewer. To include IT, intranet, Moodle and other VLE to support student learning and the organisation as a whole. Centralise information via a faculty conference site</p> <p>Identify and develop clear procedures and policies to support the organisations quality assurance and enhancement policy in the following areas: Health and safety; Safeguarding: Incident reporting; Risk management policy and risk register: Patient complaint policy and procedure in line with OPS September 2019</p> <p>Review processes procedures and control in relation to the organisations financial management including financial reports both internally and externally.</p>	<p>WC 12/08/19</p> <p>WC 24/06/19</p> <p>WC 10/06/19</p>		
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		<p>Develop Template for financial report Template for annual review of organisational activities</p> <p>Implementation of organisational changes in consultation with staff, faculty, ER, patients and following approval from Trustees</p>	<p>WC 08/07/19</p> <p>WC 30/09/19</p>		
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