



Policy Advisory Committee
18 October 2018
Update on GOsC/QAA Handbook

Classification	Public
Purpose	For decision
Issue	Consideration of the current drafts of the GOsC/QAA Handbooks and agreement of next steps prior to removal of RQ expiry dates and publication of conditions.
Recommendations	<ol style="list-style-type: none">1. To note that the interim Handbooks considered by the Committee in June 2018 have been agreed with providers as in force until this 'post RQ expiry date' Handbook comes into force.2. To consider and comment on the current draft Handbook and provide feedback before it is finalised.
Financial and resourcing implications	Updating of the Handbooks and engagement is included under our current contract with the QAA.
Equality and diversity implications	Equality and diversity matters have been incorporated explicitly in the QAA Handbooks
Communications implications	The revised 'post RQ expiry date' Handbook has been shared with osteopathic educational institutions and education visitors for feedback.
Annex	Updated draft General Osteopathic Council review of osteopathic courses and course providers: Handbook (post RQ Expiry date)
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Background

1. At its meeting in June 2018, the Committee noted two updated Handbooks. These 'interim' Handbooks have been now been put into place for the current reviews (London School of Osteopathy, London College of Osteopathic Medicine and Swansea University) and refer to expiry dates of 'recognised qualifications.
2. At its meeting in June 2018, the Committee also noted the responses to the quality assurance consultation undertaken earlier in 2018. The Committee noted that the majority of responses supported the removal of RQ expiry dates for reasons including; the restricted window for visits, alignment of validation events, changes in the course of an institution.
3. The Committee noted that there was broad support for the publication of conditions and it also noted that some work was required in the development of the handbook in terms of the detailed implementation of this process.
4. The Committee agreed in principle to remove expiry dates and also to publish conditions. Such an approach would provide more flexibility in terms of visit dates for institutions whilst also increasing transparency by publishing current conditions (even those arising out of annual reports, self-reports or other matters rather than just RQ visits) and action plans. However, members also provided the following feedback:
 - a. The Committee was concerned to ensure that expiry dates of RQs remained in place for a new provision.
 - b. The Committee was concerned to see more detail about how this approach would be implemented in practice.
 - c. The Committee was concerned to ensure that the approach to removal of expiry dates and publication of conditions under the current approach would not preclude the development of a different or innovative approach to quality assurance in due course.
5. In July 2018, Council also agreed the principle of removal of expiry dates and the approach of publication of 'conditions'.

Discussion

6. The updated Handbook outlining the proposed operational implementation of the removal of expiry dates and publication of conditions and action plans is set out at the Annex.
7. The draft Handbook has been shared with the Education Visitors and with the osteopathic educational institutions for feedback and feedback has been broadly positive.
8. Before working to finalise this Handbook, the Committee is asked to provide feedback on the Handbook and to indicate if this Handbook deals with the

operational implementation issues that the Committee outlined at its previous meeting.

Key updates include:

- *Reference points:* updating the reference points to include the Osteopathic Practice Standards (2018), Guidance for Osteopathic Pre-registration Education (2015) and the Student fitness to practise guidance (2016) explicitly (see paragraph 16 of the Annex).
- *Institutional contact role:* making clear that it is good practice for the institutional contact to not be the Principal of the osteopathic educational institution (see page 5 of the Annex).
- *Role of Patient feedback:* emphasising the role of patient feedback in the visit process (See for example, page 6, and page 35 and paragraphs 20,100).
- *Procedure for adapting QA processes outlined in the Handbook:* explicit reference to a procedure to adapt the processes outlined in the Handbook in order to ensure consistency, proportionality, and fairness and a focus on outcomes (as outlined above), alterations to the policy may be agreed in writing by the QAA and the GOsC (See paragraph 126 of the Annex).
- *Self evaluation document:* additional paragraphs have been added to the self-evaluation section to describe in more detail what a good self-evaluation document looks like following feedback from the Education Visitors about the variability in the quality of the self-evaluation documents that they have seen. The section highlight the need for 'honest and reflective evaluation of where the institution is: both strengths and areas for development, drawing on the institution team and the institution's own quality management system to ensure that only students meeting the Osteopathic Practice Standards are awarded an RQ'. The section also emphasises that 'The self-evaluation should support constructive and respectful dialogue between the Visitors and the institution recognising the common aim of ensuring high quality education.' A table has also been included to support the presentation of clearer information (See paragraph 43 and Annex B (pages 3 to 42) of the Annex).
- *Policy about the management of sensitive and confidential information:* making this explicit including the expectation that lines of enquiry should be explicit (See paragraphs 46 and 127 and 128 of the Annex).
- *Policy about compliance with the GDPR:* making this explicit and ensuring that no personal information is uploaded to the QAA confidential portal, or that if it is, the processing of it is compliant with GDPR. (See paragraphs 47 to 48 and 129 of the Annex).

- *Withdrawing from a visit:* explicit policy about visitors withdrawing from the Visit (See paragraph 62 of the Annex).
- *Post meeting visit:* more detail about the nature and purpose of this feedback meeting and more explicit information about expectations (See paragraphs 63 to 65 of the Annex).
- *Delivery of the visit report:* expectation that visit report will always be delivered (even if there is an incomplete evidence base) made explicit (See page 5 and paragraph 46 of the Annex).
- *Statutory period of review of report by institution:* clarifying that the period for review of the Visitors report by the institution is 'not less than one month' rather than four weeks. (See paragraph 80 of the Annex).
- *Management of concerns and complaints during the Visit process:* inserting information about how to raise concerns and clarifications during the visit and also the complaints process (See paragraphs 95 and 96 of the Annex)
- *GOsC Complaints process:* insertion of information about the GOsC Corporate Complaints process (See paragraphs 97 to 99 of the Annex)
- *Updated GOsC Quality Assurance Policy* (post consultation): inserting updated GOsC Quality Assurance Policy (following consultation) – (See Annex A, pages 25 and 32 of the Annex).
- *Procedure for dealing with concerns about osteopathic education:* inserting policy following consultation (See paragraph 42 and Annex E of the Annex).
- *Draft Code of Conduct:* a draft code of conduct for Visitors and Providers is outlined in Annex F of the Annex at pages 54 to 58.
- *RQ Expiry dates:* clarifying when expiry dates will be retained (see paragraph 11 of the Annex)
- *Clearer definition of 'conditions' for publication:* see paragraphs 71 to 74 of the Annex
- *Publication of action plans:* see page 8, and paragraph 72 and paragraphs 84 to 87 of the Annex.
- *Current approach to risk based quality assurance:* this is outlined in the quality assurance policy at Annex A to the Annex. It aims to outline what we currently do whilst also recognising that the Committee will be undertaking further consideration of this area over the next year or so. (see particularly paragraphs 5 and 6 of Annex A of the Annex).

Next steps

9. Following further feedback from the Committee, we will aim to share the Handbooks with stakeholders once more before beginning the process of drafting new RQ Orders for consideration at the Committee meeting in March 2018. It is intended that the final version of the Handbook will also be agreed at that meeting and will come into force, following approval of the Privy Council to the amended RQ Orders without expiry dates.

Recommendations:

1. To note that the interim Handbooks considered by the Committee in June 2018 have been agreed with providers as in force until this 'post RQ expiry date' Handbook comes into force.
2. To consider and comment on the current draft Handbook and provide feedback before it is finalised.