

Policy and Education Committee 10 June 2020 Plymouth Marjon Renewal of Recognised Qualification (RQ) (reserved)

Classification Public

Purpose For decision

Issue Plymouth Marjon University is seeking renewal of its

current Recognised Qualification (RQ) for the Master of Osteopathic Medicine programme (full time and part time)

Recommendation To agree to recommend that, subject to the approval of

the Privy Council, Council recognises the Master of Osteopathic Medicine awarded by Plymouth Marjon University from 1 February 2021 until 31 January 2026, subject to the conditions outlined in paragraph 32.

Financial and resourcing implications

This planned 'recognised qualification' review was included in our 2019-20 financial schedule, with a budget of £21,871 and this was included in our 2019-20 budget.

Equality and diversity None **implications**

Communications implications

We are required to 'maintain and publish' a list of the qualifications which are for the time being recognised in order to ensure sufficient information is available to students and patients about osteopathic educational institutions awarding 'Recognised Qualifications' quality assured by us. The decision to recognise Plymouth Marjon University qualifications will be considered on the public agenda of Council in July 2020.

Annexes

- A. Plymouth Marjon University review specification
- B. QAA/GOsC review report for the Plymouth Marjon (Final) dated January 2020.
- C. Action plan provided by Plymouth Marjon University
 D. Update on student recruitment activities and strategy

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Background

1. The Plymouth Marjon University RQ provision for context is outline below:

Courses with RQ status	Master of Osteopathic Medicine (full-time)
Status	Master of Osteopathic Medicine (part-time)
Awarding body	Plymouth Marjon University
RQ period	1 September 2017 -31 January 2021
Initial and last review date	October 2016
review date	The renewal review visit under consideration in this paper took place in January 2020.
Status of any specific RQ conditions attached to the course/s at its initial approval in 2016	Approval with 6 conditions:
	Condition 1: The University of St Mark and St John must revisit and comprehensively map external reference points, including the Osteopathic Practice Standards (OPS), the Guidance for Osteopathic preregistration Education (GOPRE) and the Subject Benchmark Statement for Osteopathy, by May 2017, and ensure that their requirements are fully embedded throughout the programme. (This condition was agreed as fulfilled at the June 2017 Committee.)
	Condition 2: The University of St Mark and St John must implement a phased strategy for ensuring that external clinical placements are available from September 2019, consistent with the requirements of the Subject Benchmark Statement for Osteopathy, sufficient to meet projected student numbers and underpinned by service level agreements that articulate clinical arrangements and responsibilities and the support and mentoring to be provided for placement supervisors and their students.
	Condition 3: The University of St Mark and St John must implement, by September 2017, a fitness to practise policy that reflects current General Osteopathic Council (GOsC) guidance, and ensure that key staff, including external placement supervisors, are trained to participate in relevant stages of the process. (This Condition was agreed as fulfilled at the March 2018 Committee.)

Condition 4: The University of St Mark and St John must implement, by May 2017, a phased five-year clinic infrastructure development strategy that meets the requirements of the Subject Benchmark Statement for Osteopathy and the Osteopathic Practice Standards (OPS), consistent with initial development requirements and planned growth in student numbers, as part of a comprehensive plan for learning resources and programme expansion.

Condition 5: The University of St Mark and St John must implement, by August 2017, a marketing strategy linked to forecast student numbers, to ensure that an appropriate range and diversity of patient presentations are available to meet students' learning needs, consistent with the expectations of the Subject Benchmark Statement for Osteopathy and the Guidance for Osteopathic Pre-registration Education.

Condition 6: The University of St Mark and St John must implement, by March 2017, a comprehensive phased strategy for the recruitment, appointment and training of specialist staff, to provide students with a diversity of exposure to a range of osteopathic perspectives, so that staff are in post three months prior to programme start.

2. This paper outlines the findings of the final GOsC/QAA Plymouth Marjon University (Marjon) recognised qualification (RQ) report and asks the Committee to make a statutory recommendation to Council to renew the 'recognised qualification' for a further period subject to the specific conditions outlined within the visitor's report and the general conditions which apply in the case of all RQ programmes. Further information is outlined below.

Discussion

- 3. The Committee agreed the updated RQ specification for Marjon on 13 March 2019 and this is attached at Annex A.
- 4. On 13 June 2019, the Committee appointed a team of three Education Visitors under s12 of the Osteopaths Act 1993 to undertake the review.
- 5. The visit took place in January 2020.
- 6. The visit report was drafted and sent to Marjon on the 6 March 2020 for a period of no less than one month in accordance with the Osteopaths Act 1993.

- 7. Marjon responded with a comment on 3 April 2020, and this was considered by the Education Visitors and incorporated into the final report.
- 8. The final report of the Visitors is attached at Annex B. The recommendation of the Visitors for the programmes is approval with conditions. The recommended conditions are:
 - Undertake, by June 2020, further systematic embedding of the new Osteopathic Practice Standards (2019) and the revised Subject Benchmark Statement for Osteopathy (2019), and ensure their requirements are fully integrated throughout the programme, and that all staff teaching on the programme understand their requirements (paragraph 25, 26, 30, 35 to 37 and 56).
 - Review, by June 2020, all outward-facing information regarding taught osteopathic techniques to ensure it is accurate and complete and reflects current course delivery (paragraph 27 and 28).
 - Undertake, by June 2020, a more effective and systematic process for the ongoing review and evaluation of the programme, to include the analysis of data, the recording of meetings, action planning, and regular monitoring of actions; to allow for informed decisions to be made about the future planning, development and to manage risk (paragraph 33, 34, 107 and 109).
 - Implement, by August 2020, a revised marketing strategy for the recruitment of students and patients, and ensure that an appropriate range and diversity of patient presentations are available to meet students' learning needs, consistent with the expectations of the Subject Benchmark Statement for Osteopathy and the Guidance for Osteopathic Pre-registration Education (paragraph 70, 91, 92 and 102).
 - Implement, by August 2020, a revised five-year clinic resource and development plan to respond to the planned increase in student numbers, and the treatment of patients from specialist populations (paragraph 87, 88 and 89).
 - Introduce a revised structure for external examining of the programme to ensure that, by September 2020, an additional examiner is appointed, so that two examiners are in post for the first graduating student cohort, and that in future at least one examiner is a registered osteopath (paragraph 114).
- 9. The following is a summary of the visitors' main conclusions, highlighting the strengths, areas of good practice and areas for development of the programme:

Strengths

- The breadth of optional clinical placements available support students' future employability, and raise awareness of osteopathy among potential patients and in the wider community (paragraph 39, 40, 82 and 85).
- The support and recognition provided for staff development, including research, scholarship and external activity, and the intention to contribute further to osteopathic research (paragraph 62).
- The pedagogic focus on the use of group work, problem solving, integrated and progressive reinforcement of previously learned material is a strength of the programme (paragraph 57).
- The interdisciplinary and inter-professional approach to teaching and learning, informed by a strong research ethos, effectively supports evidence-based learning (paragraph 65 and 66).

Good practice

- The well-embedded formative assessment strategies in place across all modules are effective in supporting students' achievements (paragraph 44).
- The extensive and well-embedded framework of academic and pastoral support underpins the opportunities for students' personal and professional development (paragraph 76, 77 and 78).
- The well-embedded and widely appreciated formal and informal processes for staff and student interaction, and the accessibility and responsiveness of staff underpin an engaged learning community (paragraph 79 and 80).
- The ongoing training and development in place to support the Programme Leader and Director of School in managing their newly devolved responsibilities for financial planning and management, and risk management of the programme (paragraph 99).

Areas for development

- Formalise the processes for curriculum development and review, taking account of feedback from students and patients, and evaluate and record the outcomes of those activities (paragraph 32 and 33).
- Review the quality assurance processes for developing and approving information for students including assessment instruments, examination papers and teaching materials, including through peer review, to ensure that documents are consistent, accurate and use appropriate language (paragraph 45 and 47).

- Systematically analyse, and reflect further on, the reasons for students' non-progression, in order to promote ways of actively identifying and assisting students, and signposting them to appropriate support mechanisms (paragraph 49 and 52).
- Further develop the clinical practice modules for Level 6 and 7 study to include full information about the learning and teaching strategies to be utilised (paragraph 58).
- Review the clinical arrangements to ensure that they provide a suitable environment for patient and practitioner interaction (paragraph 87 and 89).
- Consider introducing an alternative undergraduate exit award to provide students with the opportunity to become a registrant with GOsC on completion of the required clinical module and clinical hours (paragraph 118).

Action Plan

10. An action plan for addressing the conditions outlined above was received from Marjon on 18 May 2020. This was sent to the QAA for comment by the visitors, and feedback provided to Marjon. As a result, an updated action plan was subsequently provided on 29 May 2020, and this is included as Annex C. We are informed that the updated action plan has been approved by Marjon's Quality and Standards Manager. In the following paragraphs, we will consider the actions proposed by Marjon in relation to each of the recommended conditions. The conditions in the report are not numbered, but for clarity, we have referred to them as condition a-f.

Condition a: Undertake, by June 2020, further systematic embedding of the new Osteopathic Practice Standards (2019) and the revised Subject Benchmark Statement for Osteopathy (2019), and ensure their requirements are fully integrated throughout the programme, and that all staff teaching on the programme understand their requirements (paragraph 25, 26, 30, 35 to 37 and 56).

- 11. The action plan states that a revised mapping of modules against the Osteopathic Practice Standards (OPS) has taken place. A copy of this mapping document has been supplied, along with a copy of the revised M.Ost programme specification within which it has been incorporated. It is reported in the action plan that an induction document has been developed, and that an email will be sent out to each member of the teaching team before commencement of the next semester, with group meetings subsequently being held to review the mapping of outcomes to the OPS. We have seen a briefing note to faculty highlighting the OPS and the Subject Benchmark Statement, informing them of the planned meetings, though have not seen any further detail of the meetings themselves at this stage.
- 12. In relation to the references to Marjon's website (paragraph 26 of the RQ report) which the visitors considered could be misleading in relation to the treatment of headaches and mention of 'craniosacral therapy', it is stated that the website has

- been amended, and that any changes in future will be reviewed by the Programme Leader before going live.
- 13. Paragraph 30 of the RQ report, which is cited in relation to this condition, refers to there being a limited focus on human anatomy with only one 20 credit module dedicated to this at Level 4, which is also combined with human physiology content. It is reported that anatomy will now be embedded in more detail in the OMECO3 module, though we have not seen further evidence of this. Similarly, the references in paragraph 30 of the report to enhancing the teaching of research methods have been mentioned in the action plan, with an enhanced focus on osteopathic research at level 5, and an extended research proposal at level 6. A copy of a statement regarding research informed teaching and a list of publications has been supplied as evidence of Marjon's research profile and approach to evidence based teaching.
- 14. It is suggested that an update on the implementation of this condition be requested for the October Committee, to include details of the meetings held, and any further issues arising from these.

Condition b: Review, by June 2020, all outward-facing information regarding taught osteopathic techniques to ensure it is accurate and complete and reflects current course delivery (paragraph 27 and 28).

15. The action plan reports that a full review of all marketing material has taken place to ensure that this, including any student testimonials, provide an accurate representation of the programme, particularly in relation to the carrying out of high velocity thrust techniques (no longer taught in year 1). The aim included 'to ensure new mechanisms are in place to prevent any similar issues in the future', and it is then stated that any new prospectus will need to be signed off by the Programme Leader (which is supposed to happen anyway). Other than this, it's not clear what new mechanisms there are, or whether it's just a more stringent enforcement of existing ones.

Condition c: Undertake, by June 2020, a more effective and systematic process for the ongoing review and evaluation of the programme, to include the analysis of data, the recording of meetings, action planning, and regular monitoring of actions; to allow for informed decisions to be made about the future planning, development and to manage risk (paragraph 33, 34, 107 and 109).

16. The action plan cites that the aim of implementing a more effective and systematic process for review and evaluation of the programme, and to review mechanisms for student feedback including the recording and evaluation of these, has been completed. A narrative is provided is provided as to the University's new annual monitoring report implemented for 2019-20. It is reported that the new Semester report (copy supplied) sits within a programme report, and allows programme leaders to analyse and monitor programme and module performance using live data. A new reporting tool has been built into the University's information portal which provides, it is reported, a snapshot of data at any given time. It is stated that the intention is that this will be used by module and programme leaders to complete annual monitoring reports, which include SMART action plans. These are processed by the Quality and Standards

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Manager and the relevant Director of School. It is also reported that Marjon will be undertaking a risk assessment of all programmes over the summer, which will include consideration of quality as well as financial risks, and that this will be reviewed on an annual basis.

- 17. Further detail is also provided here as to the mechanisms by which students are able to provide feedback. The report did not indicate that this was not the case, but that sometimes there was 'an over-reliance on informal processes which need to be further formalised to ensure that matters are effectively recorded, analysed and addressed'. The plan highlights feedback mechanisms including module evaluations, and staff student liaison committees, the latter also being a forum for provision or responses to feedback. It is stated that all such discussions will be documented. A change is that students will now also complete an online end of module evaluation (as well as the mid module evaluation). Module reports have been amended to incorporate mid and end of module evaluation, which then enables programme teams to respond to this. A 50% response rate as a minimum is aimed for, with this being monitored through team meetings and the Semester Report.
- 18. The narrative provided here is helpful, but again, it is suggested that an update on this condition be requested for the October Committee meeting. It would be good to understand how the new processes had been implemented, and to have an evaluation of this. Nevertheless, it is reassuring to have a narrative as to how the quality processes around this programme are embedded with the University's institutional approach.

Condition d: Implement, by August 2020, a revised marketing strategy for the recruitment of students and patients, and ensure that an appropriate range and diversity of patient presentations are available to meet students' learning needs, consistent with the expectations of the Subject Benchmark Statement for Osteopathy and the Guidance for Osteopathic Pre-registration Education (paragraph 70, 91, 92 and 102).

19. This condition requires a revised marketing strategy by August 2020, with a two pronged approach of student recruitment, and patient recruitment to ensure a diverse and appropriate range of presentations within the teaching clinic. A copy of the University's update on student recruitment activities generally (not just in relation to the osteopathy programme) has been supplied and is included here as Annex D. Both student recruitment and patient recruitment may also be affected by the COVID-19 situation, which adds a further element to consider. The teaching clinic has been closed since March along with all other OEIs' clinics. The action plan currently cites a plan to reopen in September with a phased return, offering a fee osteopathy service to patients between September and December. This proved a successful strategy in September 2019, and it is hoped will be successful again, though the wider circumstances are now different. From January 2021, 90 minute first patient appointments will be free, with follow up appointments priced at £15. The action plan further cites the strong local presence that teaching clinic has established over the last year, and that the methods used at that stage will be replicated with social media, flyers and

- promotional material also aimed at collaborating partners such as the local police, fire service and Plymouth City Council.
- 20. As clinics are closed currently, it is suggested that the 'August 2020' be removed from this condition. Further, as this is a condition that the Committee will likely wish to monitor on an ongoing basis for the time being, it is suggested that another date is not inserted with the Committee considering the fulfilment of this condition on an ongoing and regular basis.
- 21. Again, it is suggested that an update on the development and implementation of the revised marketing strategy be requested for the Committee's meeting in October.

Condition e: Implement, by August 2020, a revised five-year clinic resource and development plan to respond to the planned increase in student numbers, and the treatment of patients from specialist populations (paragraph 87, 88 and 89).

- 22. Paragraph 88 of the RQ report stated that 'there are no formal plans in place for the expansion of clinic facilities as cohort sizes increase. Senior management aspire to achieve cohorts of up to 40 students.' Also that more clinic breakout space is likely to be needed by the incoming Year 4 in September 2020.
- 23. The action plan states the aim to develop such a clinic resource plan by August in liaison with the Director School and Director of Finance, to include contingency plans for a range of potential cohort sizes. To that end, a risk assessment course costing tool has been developed (a copy has been supplied) including scenarios of 40, 25 and 10 new Year 1 students. The current number of firm acceptances for September 2020 is 11, with more likely through clearing. It is reported that current facilities are likely to be sufficient for student numbers overall. In relation to the visitors' comments regarding breakout rooms for the new Year 4 cohort, however, it is stated that as well as the current room, additional rooms are available on the first and ground floors of the Marjon Health and Sport Centre in which the clinic is located.
- 24. Again, an update on this condition would be recommended for the October Committee meeting.
- 25. As this is a condition that the Committee may wish to continue to monitor an ongoing basis for the time being, it is suggested that the date is removed from this condition.

Condition f: Introduce a revised structure for external examining of the programme to ensure that, by September 2020, an additional examiner is appointed, so that two examiners are in post for the first graduating student cohort, and that in future at least one examiner is a registered osteopath (paragraph 114).

26. It is planned that a new external examiner will be appointed by September 2020, though no further details have been provided at this stage as to how this will be implemented – for example, whether it is intended to retain the existing

external examiner as well for the remainder of his term, or whether two examiners will now be appointed. It is stated that someone has been approached for this role who currently works within osteopathic education, though nothing is finalised at this stage. A further update on this will be requested for the October Committee.

Approval

- 27. As the Osteopaths Act 1993 refers to qualifications, we have, in this section, simply referred to the named qualifications rather than the descriptions of the different courses.
- 28. The Committee is asked to consider the recommendations of the QAA Report and this paper for the renewal of recognition of the following qualifications as outlined below:
 - Master of Osteopathic Medicine (full-time)
 - Master of Osteopathic Medicine (part-time)
- 29. The Committee is asked to decide whether to recommend that Council:
 - a. Recognises the qualifications without conditions.
 - b. Recognises the qualifications with conditions.
 - c. Refuses recognition of the qualifications.
- 30. The Visitors' report recommends approval with specific conditions. This means that the Visitors have determined that the course will deliver graduates who meet the Osteopathic Practice Standards.
- 31. All 'recognised qualifications' are approved with general conditions. General conditions set out key matters that could impact on the delivery of the Osteopathic Practice Standards and that need to be reported to the Committee along with an analysis of the impact on delivery of the Osteopathic Practice Standards through our RQ change notification process. These general conditions are outlined at paragraph 30 g, h and i below.
- 32. The conditions to be attached to the 'recognised qualification' are as follows:

CONDITIONS	
a.	Undertake, by June 2020, further systematic embedding of the new Osteopathic Practice Standards (2019) and the revised Subject Benchmark Statement for Osteopathy (2019), and ensure their requirements are fully integrated throughout the programme, and that all staff teaching on the programme understand their requirements
b.	Review, by June 2020, all outward-facing information regarding taught osteopathic techniques to ensure it is accurate and complete and reflects current course delivery (paragraph 27 and 28).

Undertake, by June 2020, a more effective and systematic process for c. the ongoing review and evaluation of the programme, to include the analysis of data, the recording of meetings, action planning, and regular monitoring of actions; to allow for informed decisions to be made about the future planning, development and to manage risk. d. Implement a revised marketing strategy for the recruitment of students and patients, and ensure that an appropriate range and diversity of patient presentations are available to meet students' learning needs, consistent with the expectations of the Subject Benchmark Statement for Osteopathy and the Guidance for Osteopathic Pre-registration Education. e. Implement ... a revised five-year clinic resource and development plan to respond to the planned increase in student numbers, and the treatment of patients from specialist populations f. Introduce a revised structure for external examining of the programme to ensure that, by September 2020, an additional examiner is appointed, so that two examiners are in post for the first graduating student cohort, and that in future at least one examiner is a registered osteopath Plymouth Marjon University must submit an Annual Report, within a q. three month period of the date the request was first made, to the Education Committee of the General Council. h. Plymouth Marjon University must inform the Education Committee of the General Council as soon as practicable, of any change or proposed substantial change likely to influence the quality of the course leading to the qualification and its delivery, including but not limited to: substantial changes in finance ii. substantial changes in management iii. changes to the title of the qualification iv. changes to the level of the qualification changes to franchise agreements vi. changes to validation agreements vii. changes to the length of the course and the mode of its delivery viii. substantial changes in clinical provision

- ix. changes in teaching personnel
- x. changes in assessment
- xi. changes in student entry requirements
- xii. changes in student numbers (an increase or decline of 20 per cent or more in the number of students admitted to the course relative to the previous academic year should be reported)
- xiii. changes in patient numbers passing through the student clinic (an increase or decline of 20 per cent in the number of patients passing through the clinic relative to the previous academic year should be reported)
- xiv. changes in teaching accommodation
- xv. changes in IT, library and other learning resource provision
- i. Plymouth Marjon University must comply with the General Council's requirements for the assessment of the osteopathic clinical performance of students and its requirements for monitoring the quality and ensuring the standards of this assessment. These are outlined in the publication: Subject Benchmark Statement:

 Osteopathy, 2019, Quality Assurance Agency for Higher Education and Guidance for Osteopathic Pre-registration Education, 2015, General Osteopathic Council. The participation of real patients in a real clinical setting must be included in this assessment. Any changes in these requirements will be communicated in writing to Plymouth Marjon University giving not less than 9 months notice.

Recognition period

33. For established osteopathic educational institutions seeking recognition of a course, the general policy is to recognise for five years unless there are any serious concerns. It is recommended that the qualification Master of Osteopathic Medicine awarded by Plymouth Marjon University is approved from 1 February 2021 until 31 January 2026 subject to the conditions outlined in paragraph 30 above.

Recommendation: To agree to recommend that, subject to the approval of the Privy Council, Council recognises the Master of Osteopathic Medicine awarded by Plymouth Marjon University from 1 February 2021 until 31 January 2026, subject to the conditions outlined in paragraph 32.