



Policy and Education Committee

**Minutes of the Policy and Education Committee held in public at on
Wednesday 8 March 2023, at Osteopathy House, 176 Tower Bridge Road,
SE1 3LU and online via Go-to-Meeting video conference**

Unconfirmed

Chair: Professor Deborah Bowman

Present: Dr Daniel Bailey
Sarah Botterill (online)
Dr Marvelle Brown (online)
Bob Davies
Elizabeth Elander
Dr Patricia McClure
Professor Raymond Playford
Nick Woodhead

Observers with speaking rights: Fiona Hamilton, Council for Osteopathic Education Institutions (COEI)
Carol Fawkes, National Council for Osteopathic Research (NCOR)
Glynis Fox, Chair, the Institute of Osteopathy (iO)
Santosh Jassal, the Osteopathic Alliance (OA)

In attendance: Steven Bettles, Policy Manager
Chloe Britt, Mott McDonald
Fiona Browne, Director of Education, Standards and Development
Duncan Clark, Mott MacDonald (online)
Jess Davies, Communications and Engagement Officer
Rachel Heatley, Senior Research and Policy Officer
Michelle McDaid, Quality Assurance, Project Director, Mott McDonald
Liz Niman, Head of Communications, Engagement and Insight
Matthew Redford, Chief Executive and Registrar
Marcia Scott, Council and Executive Support Officer

Observer/s: Dr Bill Gunnyeon, Chair of Council
Kerri Holden, Registrant

Item 1: Welcome and apologies

1. The Chair welcomed all to the meeting.
2. Apologies were received from:
 - Maurice Cheng, Chief Executive, the Institute of Osteopathy
 - Dr Ian Fraser, Chair, Council for Osteopathic Education Institutions
 - Banye Kanon, Senior Quality Assurance Officer
 - Dr Stacey Clift, Senior Policy and Research Officer

Item 2: Minutes

3. The minutes of the meeting 6 October 2022 were agreed as a correct record.

Matters arising

4. University College of Osteopaths (UCO) Visitors: It was noted that the Committee's decision to approve the updated Visitor Team was agreed by email, 26 January 2023.
5. London College of Osteopathic Medicine (LCOM) Removal of Recognised Qualification: It was noted that confirmation of the Privy Council's approval of the GOsC's decision to remove the LCOM Recognised Qualification was received by a letter dated 25 January 2023.

Item 3: Quality Assurance: Risk-based framework

6. The Policy Manager introduced the item which sought the Committee's agreement to the risk-based approach to Quality Assurance processes in context of risk-based quality assurance, and how issues are identified and considered.
7. The key messages and following points were highlighted:
 - a. The paper brought the Committee up to date on developments in relation to risk-based quality assurance approaches including developments and feedback from the OEIs and peer regulators since the Committee meeting in October 2022.
 - b. The paper presented an updated Quality Assurance Risk Based framework that informs decision making around risks.
 - c. The updated framework is not a change in approach to quality assurance but provides clarification to stakeholders and for the Committee how risks are considered as and when they arise to allow the appropriate decisions to be made.
8. In discussion the following points were made and responded to:

- a. It was confirmed that the 'Sweeper Statement' had been developed to capture events that may occur outside of the Annual Reporting cycle and for the OEIs to reflect on events. It was pointed out that there are defined risks that must be reported immediately the OEIs, but other areas are more for discussion, it is ordinarily the case that discussions about events will take place, but the framework provides greater clarity and consistency on the process and actions.
- b. In response to a concern about possible misinterpretation by the OEIs in identifying what constitutes 'substantial change' in was explained that this is issue-dependent, identifying the possible risk and its impact on the programme or the OEI itself. The framework provides a basis to consider and reflect on the risk and any impact on the Osteopathic Practice Standards and the Education Standards.
- c. It was noted that there had been discussion at the October meeting about adverse events and the framework. It was considered that any adverse event would be incorporated as part of the sweeper statement but if a serious adverse event was perceived to have taken place the expectation would and should be that it is reported. It was agreed that this would be given further consideration to ensure clarity.
- d. It was suggested and agreed that the word 'required' replace 'expected' where appropriate for clarity.

9. The Chair in summary noted:

- The Committee welcomed the 'sweeper statement' in the context of quality assurance.
- The broad endorsement of the Quality Assurance Framework.
- The issue of substantive risk how this is managed.
- The coherence and cross-referencing in line with other supporting documents for clarity and consistency.
- Banye Kanon was thanked on behalf of the Committee for the work undertaken in producing the update QA Framework.

Agreed: The Committee agreed the risk-based quality assurance framework.

Item 4: Public Perceptions Survey

10. The Senior Engagement and Insight Officer introduced the item which gave an update on the draft initial highlights of the Public Perceptions Survey conducted by *YouGov*.

11. The following points were highlighted:

- a. This was the third survey in public and patient perceptions research. Previous surveys took place in 2014 and 2018.
- b. In each of the surveys the same questions were asked with only minor adjustments to language and background information. The 2023 survey included three additional questions:
 - The expectations of patients towards infection control measures put in place by osteopaths.
 - Whether delays in GP advice/treatment have caused patients to seek osteopathic care.
 - Members of the public motivation to seek osteopathic treatment and whether these have been impacted by the cost of living or NHS waiting times
- c. The sample size for 2023:
 - A total of 1014 members of the public (nationally representative sample of UK adults aged 18+) and
 - A sample of 502 patients (those who have visited an osteopath in the last 12 months)
- d. The draft highlights of the survey are given below. A full report of the survey findings will be presented to the Committee at its meeting in June 2023.
 - Public confidence in osteopathy: the number of those with 'a lot of confidence' in osteopathy has stayed the same.
 - There appears to be a slight decrease overall in public confidence in osteopathy since 2014 and 2018 - (46%) have a lot or a fair amount of confidence in an osteopath in 2023 versus 50% in 2018 and 52% in 2014. This change comes from the group with 'fair amount of confidence' as the numbers of those with 'a lot of confidence' have stayed the same.
 - The public, especially ethnic minority respondents, consider 'being monitored by a regulatory body' less important for confidence in healthcare professionals. For the public overall, its importance is down from 92% in 2014 to 88% in 2023. For ethnic minority respondents, 89% in 2014 vs 70% in 2023. However, patients are more likely than the public to identify being overseen by a regulatory body (96% vs 88%) and having indemnity insurance (86% vs 76%) as important.
 - Confidence among all UK adults that a concern raised with the GOsC would be properly investigated appears to have fallen over time – in 2014, three-fifths thought a concern would be properly investigated (58%), over

half in 2018 (53%), and now half (49%). It is considered that this fall in confidence has been driven by younger adults.

- More than three-fifths of patients surveyed say that, in the past two years, they have seen an osteopath because it was faster than seeking advice/ treatment from a General Practitioner (GP) (63%).
- The UK public, as represented in the survey, is more aware of the rules which osteopaths have to follow. Though almost two-thirds (64%) of the public who participated remain unaware of any of these, there has been a steady increase in awareness of almost every listed rule since previous years.
- Over nine in ten osteopathic patients surveyed think their osteopath was 'very' or 'fairly good' during their most recent visit.
- Regarding important information for a positive experience, information about the osteopath being registered/ regulated is particularly welcomed by patients from socio-economic classes C2DE as compared with ABC1, and those with a disability (24%, 16% no disability).

12. In discussion the following points were raised and responded to:

- a. in response to the comment that the public like that the fact that osteopaths are regulated and that this may be due to an awareness that there is an established investigatory process, it was agreed this was an area which would require further consideration and could be explored with patient groups. The survey to date demonstrates that the public and patients are reassured by regulation and the perception of safety this provides.
- b. Members commented that it was good to see that public are able to access an osteopath faster than they are able to access a GP as this helps raise the osteopathic profile, but this then presents a challenge for the OEIs and the profession in ensuring there are students and graduates to meet the growing demand for osteopathic care.
- c. Members asked if a statistical analysis of the survey is being planned to help understand whether there were any statistically significant findings. It was explained that the detail provided by *YouGov* in its summary report may not offer the in-depth level of analysis which members are seeking. The Executive will consider how best to provide and share the information.
- d. Members asked if the drop in confidence in relation to complaints will be investigated as this does not appear to correlate with the awareness of statutory rules. It was also asked whether it is known whether a negative experience impacts on raising a concern or reducing confidence.

- e. It was noted that confidence or otherwise in osteopathy was different to confidence or otherwise in regulation of osteopathy.
- f. Members recognised the challenges of presenting such a large amount of data verbally and encouraged the team to consider written information for future presentations to facilitate engagement and allow time for members to process the information shared. That need not be a full or developed paper – a summary ‘headline’ document would suffice.

Noted: The Committee noted the report on the Public Perceptions Survey.

Item 5: Draft Interim Order Guidance and Draft Practice Note on Undertakings.

- 13. The Director of Fitness to Practise introduced the item which invited the Committee to consider the revised Guidance on Interim Orders and the Practice Note on Undertakings.
- 14. The key messages and following points were highlighted:
 - a. Both the Investigating Committee and Professional Conduct Committee can impose an Interim Suspension Order over a registrant’s registration while a fitness to practise investigation is undertaken. Both Committees can also accept undertakings from a registrant. An Undertaking is a voluntary written promise.
 - b. An external audit was commissioned and undertaken in August and September 2021 of all Investigating Committee and Professional Conduct Committee applications for an Interim Order between January 2020 - March 2021. No concerns regarding patient safety were identified within the audit report.
 - c. The detailed recommendations from the audit included refreshing GOsC’s guidance on imposing interim orders and the practice note on Undertakings in relation to risk assessment and proportionality. It also recommended making the procedure around undertakings clearer.
 - d. The opportunity has also been taken to enhance the interim order guidance to make it clear that the Investigating Committee and Professional Conduct Committee are under a duty to have regard of the overarching objective within the Osteopaths Act when considering interim order applications.
 - e. In relation to regulatory change a public consultation is currently being conducted by the DHSC which has set out provisions for the regulation of new healthcare professionals. In relation to interim measures no reference has been made relating to public interest nor public protection which may mean that these will be areas for regulators to determine. What the GOsC is proposing is consistent with that approach.

15. In discussion the following points were made and responded to:

- a. It was confirmed that an Undertaking can be accepted in place of an Interim Suspension Order. Whereas other health regulators have within their rules the provision to set Interim Conditions the GOsC has no such provision and, therefore, has developed the Practice Note to be proportionate to the risk presented and an Undertaking is a voluntary condition. The Practice Note has worked well but is considered inflexible by the Investigating Committee. The GOsC has facilitated written Undertakings with registrants and taken to the IC to make its determination but with the advice that the written Undertaking meets the risk presented. The amended guidance allows for more transparency for all parties.
- b. Members agreed the ISO Guidance and Draft Practice Note on Undertakings were clear and a positive development.

Noted: The Committee considered and noted the revised Guidance on Interim Suspension Orders as shown.

Noted: The Committee considered and noted the revised Practice Note on Undertakings as shown.

Item 6: North East Surrey College of Technology (Nescot) – Renewal of Recognition of Qualification (RQ) and approval of RQ specification for the part time course (reserved)

16. There were no interests declared for this item.

17. The Policy Manager introduced the item which considered the Recognised Qualification review at the NEScot in relation to:

- Master of Osteopathic Medicine (MOst)
- Bachelor of Osteopathic Medicine (BOst)

18. The key messages and following points were highlighted:

- a. The visitor report contained recommendations for approval of the renewal of the recognition of Nescot's qualifications.
- b. It is recommended that the Committee agree to recommend to Council approval of initial RQ with specific and general conditions for the length of time agreed by the Committee. In the circumstances, it is suggested that a five-year period is appropriate.
- c. The Visitors have agreed the action plan as appropriate.

19. Members noted that the draft specification addressed the issues and concerns which had been raised in relation to the student experience, student parity and shared learning with the introduction of the part-time programme.

Agreed: The Committee agreed to recommend that Council recognises the Masters in Osteopathic Medicine (M.Ost) and the Bachelor of Osteopathic Medicine (BOst) awarded by Nescot from 1 November 2023 to 31 October 2028 subject to the Conditions outlined at paragraph 19, subject to the approval of the Privy Council.

Noted: The Committee noted the action plan provided by Nescot in relation to the specific conditions and to request an update on the actions outlined to the October 2023 Committee meeting.

Agreed: The Committee agreed the draft review specification for Nescot's part-time BOst programme.

Item 7: Reading room paper: Boundaries

20. The Director of Education, Standards and Development confirmed that the reading room paper on Boundaries had been circulated to the Committee. It is proposed to use the behavioural change wheel framework to refocus the GOsC's activities and its impact relating to issues concerning boundaries. Members feedback and comments on the reading room paper would be welcome in advance of the PEC meeting in June 2023.

Item 8: Stakeholder Updates

Council for Osteopathic Education Institutions

- a. Prompted by attendance at the iO strategy day and observing other changes across the sector, COEI will be revisiting its own strategy which is currently under development and may require a change in direction. A COEI strategy day is being planned to facilitate discussion.
- b. Lobbying work continues on student funding to address some of the inequities which exist.

The Chair of the Committee acknowledged how COEI is evolving, and the support the group provides to the PEC.

Institute of Osteopathy

The iO is developing its third Five-year strategic plan. A Strategic Planning Day was held in February and five key themes are being developed:

- Expanding education
- Evolving the independent clinic model to assist lone practitioners
- Evolving a career framework that supports that meets the needs of independent and NHS osteopathic practice
- Supporting osteopaths throughout their career
- Osteopathic identity

Osteopathic Alliance

- a. OA is now reaching the end QAA bench marking exercise which is going well.

- b. OA continues to collate a library to strengthen the osteopathic scope.
- c. A research database to support osteopathic thinking is also being developed. The focus will be on osteopathic philosophy, principles and thinking which supports the way the profession works.
- d. Sutherland CC is looking to connect with undergraduate colleges to introduce a Cranial foundation.
- e. The OA is considering how to support the lack of hands-on practice for students. Due to challenges of members having the available time to provide free training and demonstrations the OA is also considering innovative ways of providing support including showcasing 'Osteopathy in action' demonstrations.

National Council for Osteopathic Research

- a. NCOR held a stakeholder meeting in February 2023, which went well. Presentations included looking at the supervision approaches to support students and enhancing the processes.
- b. Ongoing projects include scoping reviews of osteopathic care of older patients and in preventative care which is reaching its conclusion.
- c. Focus groups and CPD activities are being arranged in relation to the development of practice-based research network and taking place around the UK. The next meeting will be in Glasgow and coincides with the Society of Back Pain event also in Glasgow.
- d. NCOR is in the process of organising concerns and complaints report for presentation to Council. The Chief Executive commented that adaption of the Concerns and Complaints report and expanding how the data is used is currently under discussion.

Item 9: Any other business

- 21. There was no other business

Date of the next meeting: Thursday 15 June 2023 at 10.00