



Part 1- Template based on the draft Standards for Education and Training
Name of institution
Awarding body
Recognised qualification course name(s)
Reporting matters identified for reporting
Below are the recommendations set out in the 2022-2023 annual report
Please provide a brief narrative update on how the recommendations made have been integrated into existing quality management processes, what progress has been made and what the impact of this has been. If a recommendation has not been progressed or was felt to not be appropriate/applicable, please provide a rationale, including any alternative mitigation or activities that have been implemented, where applicable.
Please provide a narrative update on how risks and challenges identified in the previous year's analysis report, are being managed and monitored, and the impact of steps taken to mitigate risks or address challenges.
1. Programme design, delivery and assessment

- i. they implement and keep under review an open, fair, transparent and inclusive admissions process, with appropriate entry requirements including competence in written and spoken English.
- ii. there are equality and diversity policies in relation to applicants, and that these are effectively implemented and monitored.
- iii. they implement a fair and appropriate process for assessing applicants' prior learning and experience.
- iv. all staff involved in the design and delivery of programmes are trained in all policies in the institution (including policies to ensure equality, diversity and inclusion), and are supportive, accessible, and able to fulfil their roles effectively.
- v. curricula and assessments are developed and evaluated by appropriately experienced and qualified educators and practitioners.
- vi. they involve the participation of students, patients and, where possible and appropriate, the wider public in the design and development of programmes, and ensure that feedback from these groups is regularly taken into account and acted upon.
- vii. the programme designed and delivered reflects the skills, knowledge base, attitudes and values, set out in the Guidance for Pre-registration Osteopathic Education (including all outcomes including effectiveness in teaching students about health inequalities and the non-biased treatment of diverse patients).
- viii. assessment methods are reliable and valid, and provide a fair measure of students' achievement and progression for the relevant part of the programme.
- ix. subject areas are delivered by educators with relevant and appropriate knowledge and expertise (teaching osteopathic content or supervising in teaching clinics, remote clinics or other clinical interactions must be registered with the GOsC or with another UK statutory health care regulator if appropriate to the provision of diverse education).
- x. there is an effective process in place for receiving, responding to and learning from student complaints.
- xi. there is an effective process in place for students to make academic appeals.

In this section below, describe how your institution currently meets the standards within this theme.

In your narrative, we ask that you evaluate how this may be met, identify any strengths, and review where you feel there might be gaps or risks around this area and provide evidence to support the narrative. If you identify gaps or risks, please articulate how you have identified them and how they will be addressed or mitigated and monitored.

Evidence that is uploaded should be cited in the narrative so that there is a clear link between these. Evidence without narrative will not be able to demonstrate the critical evaluation required as part of the annual monitoring report.

In the section below, describe good practice, challenges, and risk and risk mitigation against the standards. These may not apply for each individual standard,

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Good practice		
Challenges		
Risks and risk mitigation		
Evidence		

but the purpose of this part of the annual report is to allow for self-evaluation

on. For example, student feedback, meeting minutes, etc.

against the themes of the standards. We ask that to support the narrative, evidence is provided; this evidence should be specific to the academic year being reported

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2. Programme governance, leadership and management

- i. they effectively implement effective governance mechanisms that ensure compliance with all legal, regulatory and educational requirements, including policies for safeguarding, with clear lines of responsibility and accountability. This should include effective risk management and governance, information governance and GDPR requirements and equality, diversity and inclusion governance and governance over the design, delivery and award of qualifications.
- ii. have in place and implement fair, effective and transparent fitness to practice procedures to address concerns about student conduct which might compromise public or patient safety, or call into question their ability to deliver the Osteopathic Practice Standards.
- iii. there are accessible and effective channels in place to enable concerns and complaints to be raised and acted upon.

- iv. the culture is one where it is safe for students, staff and patients to speak up about unacceptable and inappropriate behaviour, including bullying, (recognising that this may be more difficult for people who are being bullied or harassed or for people who have suffered a disadvantage due to a particular protected characteristic and that different avenues may need to be provided for different people to enable them to feel safe). External avenues of support and advice and for raising concerns should be signposted. For example, the General Osteopathic Council, Protect: a speaking up charity operating across the UK, the National Guardian in England, or resources in Northern Ireland.
- v. the culture is such that staff and students who make mistakes or who do not know how to approach a particular situation appropriately are welcomed, encouraged and supported to speak up and to seek advice.
- vi. systems are in place to provide assurance, with supporting evidence, that students have fully demonstrated learning outcomes.

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Good practice	
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Risks and risk mitigation	

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3. Learning culture

Education providers must ensure and be able to demonstrate that:

- i. there is a caring and compassionate culture within the institution that places emphasis on the safety and wellbeing of students, patients, educators and staff, and embodies the Osteopathic Practice Standards.
- ii. they cultivate and maintain a culture of openness, candour, inclusion and mutual respect between staff, students and patients.
- iii. the learning culture is fair, impartial, inclusive and transparent, and is based upon the principles of equality and diversity (including universal awareness of inclusion, reasonable adjustments and anticipating the needs of diverse individuals). It must meet the requirements of all relevant legislation and must be supportive and welcoming.
- iv. processes are in place to identify and respond to issues that may affect the safety, accessibility or quality of the learning environment, and to reflect on and learn from things that go wrong.
- v. students are supported to develop as learners and as professionals during their education.
- vi. they promote a culture of lifelong learning in practice for students and staff, encouraging learning from each other, and ensuring that there is a right to challenge safely, and without recourse.

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4. Quality evaluation, review and assurance

Education providers must ensure and be able to demonstrate that:

- i. effective mechanisms are in place for the monitoring and review of the programme, to include information regarding student performance and progression (and information about protected characteristics), as part of a cycle of quality review.
- ii. external expertise is used within the quality review of osteopathic pre-registration programmes.
- iii. there is an effective management structure, and that relevant and appropriate policies and procedures are in place and are reviewed regularly to ensure they are kept up to date.
- iv. they demonstrate an ability to embrace and implement innovation in osteopathic practice and education, where appropriate.

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5. Resources

Education providers must ensure and be able to demonstrate that:

- i. they provide adequate, accessible and sufficient resources across all aspects of the programme, including clinical provision, to ensure that all learning outcomes are delivered effectively and efficiently.
- ii. the staff-student ratio is sufficient to provide education and training that is safe, accessible and of the appropriate quality within the acquisition of practical osteopathic skills, and in the teaching clinic and other interactions with patients.
- iii. in relation to clinical outcomes, educational providers should ensure that the resources available take account, proactively, of the diverse needs of students. For example, the provision of plinths that can be operated electronically, the use of electronic notes as standard, rather than paper notes which are more difficult for students with visual impairments, availability of text to speech software, adaptations to clothing and shoe requirements to take account of the needs of students, published opportunities to adapt the timings of clinical sessions to take account of students' needs.
- iv. there is sufficient provision in the institution to account for the diverse needs of students, for example, there should be arrangements for mothers to express and store breastmilk and space to pray in private areas and places for students to meet privately.
- v. that buildings are accessible for patients, students and osteopaths.

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6. Students

Education providers must ensure and be able to demonstrate that students:

- i. are provided with clear and accurate information regarding the curriculum, approaches to teaching, learning and assessment and the policies and processes relevant to their programme.
- ii. have access to effective support for their academic and welfare needs to support their development as autonomous reflective and caring Allied Health Professionals.
- iii. have their diverse needs respected and taken into account across all aspects of the programme. (Consider the GOsC <u>Guidance about the Management of Health and Disability</u>).
- iv. receive regular and constructive feedback to support their progression through the programme, and to facilitate and encourage reflective practice.
- v. have the opportunity to provide regular feedback on all aspects of their programme, and to respond effectively to this feedback.
- vi. are supported and encouraged in having an active voice within the education provider.

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7. Clinical experience

- i. clinical experience is provided through a variety of mechanisms to ensure that students are able to meet the clinical outcomes set out in the Guidance on Preregistration Osteopathic Education.
- ii. there are effective means of ensuring that students gain sufficient access to the clinical experience required to develop and integrate their knowledge and skills, and

meet the programme outcomes, in order to sufficiently be able to deliver the Osteopathic Practice Standards. In this section below, describe how your institution currently meets the standards within this theme. In your narrative, we ask that you evaluate how this may be met, identify any strengths, and review where you feel there might be gaps or risks around this area and provide evidence to support the narrative. If you identify gaps or risks, please articulate how you have identified them and how they will be addressed or mitigated and monitored. Evidence that is uploaded should be cited in the narrative so that there is a clear link between these. Evidence without narrative will not be able to demonstrate the critical evaluation required as part of the annual monitoring report. In the section below, describe good practice, challenges, and risk and risk mitigation against the standards. These may not apply for each individual standard, but the purpose of this part of the annual report is to allow for self-evaluation against the themes of the standards. We ask that to support the narrative, evidence is provided; this evidence should be specific to the academic year being reported on. For example, student feedback, meeting minutes, etc. Evidence that is uploaded should be cited in the narrative so that there is a clear link between these. Evidence without narrative will not be able to demonstrate the critical evaluation required as part of the annual monitoring report. **Good practice** Challenges Risks and risk mitigation

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8. Staff support and development

Education providers must ensure and be able to demonstrate that:

- i. educators are appropriately and fairly recruited, inducted, trained (including in relation to equality, diversity and inclusion and the inclusive culture and expectations of the institution and to make non-biased assessments), managed in their roles, and provided with opportunities for development.
- ii. educators are able to ask for and receive the support and resources required to effectively meet their responsibilities and develop in their role as an educator.
- iii. educators comply with and meet all relevant standards and requirements, and act as appropriate professional role models.
- iv. there are sufficient numbers of experienced educators with the capacity to teach, assess and support the delivery of the recognised qualification. Those teaching practical osteopathic skills and theory, or acting as clinical or practice educators, must be registered with the General Osteopathic Council, or with another UK statutory health care regulator if appropriate to the provision of diverse education opportunities.
- v. educators either have a teaching qualification, or are working towards this, or have relevant and recent teaching experience.

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9. Patients

- i. patient safety within their teaching clinics, remote clinics, simulated clinics and other interactions is paramount, and that care of patients and the supervision of this, is of an appropriate standard and based on effective shared decision making.
- ii. Effective safeguarding policies are developed and implemented to ensure that action is taken when necessary to keep patients from harm, and that staff and students are aware of these and supported in taking action when necessary.
- iii. the staff student ratio is sufficient to provide safe and accessible education of an appropriate quality.
- iv. they manage concerns about a student's fitness to practice, or the fitness to practice of a member of staff in accordance with procedures referring appropriately to GOsC.
- v. appropriate fitness to practise policies and fitness to study policies are developed, implemented and monitored to manage situations where the behaviour or health of students poses a risk to the safety of patients or colleagues.
- vi. the needs of patients outweigh all aspects of teaching and research.

vii. patients are able to access and discuss advice, guidance, psychological support, self-management, exercise, rehabilitation and lifestyle guidance in osteopathic care which takes into account their particular needs and preferences.		
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Thank you for completing the template. The form and all relevant evidence should be submitted to Mott MacDonald (GOsC-Mott@mottmac.com) by Day Month 2024. If you have any queries, require support completing the form or there is any reason why you cannot meet this deadline, please contact Mott MacDonald via email at GOsC-Mott@mottmac.com.

Please make sure you complete all the required sections, and provide the relevant evidence.