



Policy and Education Committee

10 March 2021

Quality Assurance Update

Classification	Public
Purpose	For discussion
Issue	An update on our approach to quality assurance .
Recommendation	To consider the development of our approach to quality assurance.
Financial and resourcing implications	We have contracted with Mott MacDonald to undertake visits and annual report analysis for us as part of our quality assurance model. The cost of this is approximately £18,920 per year.
Equality and diversity implications	We are now collecting data about enrolment and progression of students exploring the impact of particular protected characteristics on progression. We have strengthened our Standards for Education and Training in our Guidance for Osteopathic Pre-registration Education in relation to equality and diversity. We have also undertaken focus groups on equality, diversity, and inclusion to hear lived experiences of people to test our emerging outcomes and standards to ensure that they are fit for purpose. We will continue to develop and enhance our approach to equality, diversity, and inclusion in osteopathic education.
Communications implications	None specifically from this paper.
Annex	None.
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Key messages from the paper:

- Policy development is underway to update our outcomes for graduates and to link more explicitly our draft Standards for Education and Training and our more measurable review criteria to enhance our risk based approach to quality assurance moving forward.
- Annual report analysis is on track. Reports are being discussed with osteopathic educational institutions to ensure that information presented to the Committee at its meeting on 30 March 2021 is fully informed.
- Our response to quality assurance during the coronavirus pandemic appears to be in line with that of other regulators.
- A further review of removal of expiry dates is planned for June 2021.
- Ongoing dialogue and engagement with osteopathic educational institutions and students is an important part of our quality assurance and approach to embedding standards. It has continued throughout the pandemic, but further work is being undertaken to ensure that engagement with students is completed before the end of the academic year.

Background

1. Our Strategic Plan 2019-2025 sets out four goals for 2024 and they include: 'We will develop our assurance of osteopathic education to produce high quality graduates who are ready to practise.'
2. This paper seeks to provide an update on our progress against this strategic goal and the Committee are invited to provide feedback on progress at the end of year two and our planned next steps.

Discussion

Outcomes and standards

3. We have been developing our Guidance for Osteopathic Pre-registration Education and our Standards for Education and Training for consultation in 2021. These set out the outcomes that graduates are expected to meet (to demonstrate that they are meeting the Osteopathic Practice Standards) prior to graduating with a recognised qualification (RQ) entitling them to register with us. We are also, for the first time, developing our own Standards for Education and Training. These Standards for Education and Training set out the standards to be met by the osteopathic educational institution to ensure that only students meeting our standards are awarded the RQ. It is envisaged that over time, our quality assurance visit reports will be much more explicit about whether or not these standards have been met and conditions will be much clearer and linked to these standards providing a common reference point for all. Further information about this is provided in Item 4 – GOPRE, of this agenda.

Quality Assurance: Interim Handbook

4. The interim Handbook was agreed by the Policy and Education Committee in December 2020 and this is now in place for the forthcoming visits to the College of Osteopaths and the London College of Osteopathic Medicine later in 2021.
5. One of the key changes to this Handbook is the incorporation of a mapping tool with much clearer, more explicit, and more measurable review criteria, developed in consultation with our stakeholders. Previously these standards were drawn from the Quality Assurance Agency's Quality Code. However, we have now agreed that we should set out our own standards to aid transparency for osteopathic educational institutions and for the Committee and to align ourselves more closely to the frameworks in place in other health professional regulators.
6. The current draft Standards for Education and Training and the review criteria, map together with the standards generally being specified at a higher level and the review criteria sitting more specifically underneath those standards. However, following the London College of Osteopathic Medicine and College of Osteopaths visits and feedback on the review criteria (as part of the Handbook consultation) and following the consultation on the Standards of Education and Training (as part of the GOPRE), we will need to make more explicit how they link together and if and if so how, the Committee may use the review criteria to take decisions with regards to standards between visits.

Annual Report analysis

7. All osteopathic educational institutions have submitted a completed annual report including external third party feedback, for example external examiner reports and annual monitoring reports or action plans. Mott MacDonald are analysing all the reports in accordance with an analysis plan.
8. The Committee agreed the [Annual Report](#) at its meeting in June 2020. Previously, the analysis of the reports has focussed on the headings, areas of concern and recommendations in relation to these. Mott MacDonald and the team have been working on a slightly different approach to the analysis of the annual reports which focuses on context, key achievements and key issues before going into the detail of the analysis. It is hoped that this approach will provide a balanced assessment of the evidence and a greater degree of assurance about compliance with standards.
9. The papers therefore have introductory summaries to show a clear narrative which is then evidenced in more detail by the remainder of the paper:
 - Summary of progress from previous actions providing context to the progress made and areas outstanding
 - Key achievements
 - General review and summary of information provided
 - Recommendations
 - The report then goes into the detail of the annual report headings.

- At the conclusion of the paper, the evidence and the analysis report is reviewed by the executive and final recommendations provided.
10. The Executive and Mott MacDonald discussed and agreed the approach to review and analysis of the 2019/20 Annual Report submissions. The steps below outline the process:
 - a. Reviewed the 2018/19 submissions and identify key areas for development and areas of good practice. These include reviews of any outstanding conditions/areas of concern that have been identified. The objective was to enable the reviewers to understand the current context of each osteopathic educational institution (OEI) and better to support in the analysis.
 - b. Reviewed the 2019/20 current year submission and identify obvious gaps- – if required follow up with OEI prior to analysis beginning. To ensure fairness and consistency across the OEIs this will predominantly be following up if referred attachments are missed, or obvious errors are made in the reporting.
 - c. Summarise key information presented in each response ready for the analysis.
 - d. Identify key improvements or issues/risks between previous and current reporting.
 - e. Undertake detailed analysis of submission and supporting documentation against the Osteopathic Practice Standards (OPS) and Guidance for Osteopathic Pre-registration Education (GOPRE) outcomes.
 - f. Analysis completed in the Mott MacDonald (MM) report template.
 - g. Review of analysis by MM team to ensure consistency in approach (moderation meetings)
 - h. Submission of report to GOsC when process is complete.
 11. The Executive reviewed the analysis report submitted by Mott MacDonald and will present the information in the GOsC Committee Papers format. These papers include a section which provide the Executive's supplementary analysis, accounts analysis, proven student ftp case and final recommendations. This section also enables us to provide a response to some of the Mott MacDonald finding based on the holistic information we have for OEI's and provide some context to the responses in their Annual Report submissions.
 12. This year, additional time has been built into the process to enable discussion with the OEIs about the draft papers and recommendations so that misunderstandings can be clarified and corrected prior to Committee consideration of the recommendations. These are areas which we believe we low risk and seeking clarification would present the PEC with a more comprehensive analysis to support their review and decisions.
 13. As is usual with annual report analysis, these individual papers are considered on the private agenda due to potential commercial sensitivities and the Committees will be asked to identify any risks and determine if the requirements of the OPS are being met.

High level key themes emerging from the annual reports include:

Good practice and key achievements

14. Good practice and key achievements were identified with all osteopathic educational institutions. Examples included:
- External examiner confirmation and stakeholder feedback that changes in delivery of teaching and assessment were positively viewed and standards were maintained.
 - High progression rates
 - In many cases improved recruitment
 - Good risk management and governance and strong feedback from stakeholder including students, staff, and patients
 - OPS mapping tools for students to retain and reflect on
 - Variety of mechanisms to support student wellbeing during lockdown including additional wellness activities such as meditation and yoga workshops
 - Staff support in the move to online and blended teaching approaches
 - Enhanced governance mechanisms

Focus on Risk

15. It should be noted the findings do not suggest any immediate or significant risk to the delivery of the OPS for any of the OEIs. All OEIs report and make references to risks identified and what action they took to mitigate them.
16. Mott MacDonald's analysis has identified a potential gap and a potential opportunity for improvement in the current GOsC Annual Reports with regard to risk to ensure that our approach and analysis is consistent in the area of risk. Our current Annual Report asks OEIs to report on their "approach" to managing and mitigating risks that could pose a risk to delivery of the OPS. The holistic review of all the 2019/20 submissions suggest that there is an inconsistent approach in the reporting of risks across the sector. Further clarity is required in some cases relation to overarching governance and links to the coronavirus.

Quality of submission

17. The review of Mott MacDonald's reporting on General review of information presented suggests that there are variations in the quality of the submissions by the OEIs. Some submitted a comprehensive narrative supported by high quality evidence. These submissions were clear, detailed, and informative. Other submissions were satisfactory, but there was less cohesion between the narrative and objective evidence submitted. In some cases, there were either insufficient evidence to support the narrative, the information lacked evaluative commentary or the manner in which the information was provided made analysis more challenging.

18. We are seeking further information in relation to the gaps identified in the Mott MacDonald analysis of their submission. For example, student data.

Evidence of meeting the Osteopathic Practice Standards

19. Overall, the 2019/20 RQ Annual Reports were able to generate evidence to confirm the maintenance of the *Osteopathic Practice Standards* (OPS), patient safety and public protection in pre-registration education and to identify issues for further exploration or action. The findings do not identify any significant issue or risks that would pose an immediate risk to the delivery of the OPS.

Work of other regulators during COVID and beyond

20. Across the board other regulators are reporting necessary changes to infection control and adaptations to their courses. Many other health profession students played an active part in the management of the pandemic undertaking service placements.
21. Minimising unnecessary face to face contact has been necessary. So other regulators have been undertaking remote quality assurance visits rather than visits in person.
22. Increased capacity has been required to deal with increased enquiries from institutions and students to ensure that standards could still be met.
23. One regulator introduced emergency education and training standards to deal with the need for service placements. Others introduced more rapid approvals for changes. Some clinical placements increased, and others reduced. Increased flexibility and engagement with the regulators supported educational institutions to move rapidly to maintain standards and patient care. Approaches were generally regarded as proportionate and pragmatic. Enhanced online education and training as generally worked well removing barrier to completion. But equally face to face teaching was regarded as essential to clinical courses.
24. Overall, our approach to the changes to education during COVID seems to be in line with that taken by other regulators.

Progress on removal of RQ expiry dates

25. The purpose of removing expiry dates from RQ orders for eligible institutions enables more flexibility for the Committee in terms of scheduling visits (so that they can coincide with for example, validation visits, changes to curricula or assessment, rather than being held within a small window). This approach also enables increased transparency in terms of the matters that are being actively monitored by the Committee being outlined in a published action plan providing more information in the public domain about the quality picture of an institution.

26. At its meeting in July 2018, following a recommendation from the Policy Advisory Committee in June 2018, Council agreed:
- the principle of removal of expiry dates and the approach of publication of 'conditions'.
 - the approach to further development of the implementation process.
27. In March 2019, the Committee agreed the process for quality assurance of institutions which have expiry dates removed. Our policy on this is set out below, for clarity:

The General Osteopathic Council will usually recognise qualifications for a fixed period of time in the following circumstances:

- a new provider or qualification
- an existing provider with a risk profile requiring considerable ongoing monitoring.

For existing providers, the General Osteopathic Council will usually recognise qualifications without an expiry date (but subject to regular monitoring and review ...) in the following circumstances:

- an existing provider without conditions or
- an existing provider with fulfilled conditions and without any other monitoring requirements or
- an existing provider who is meeting all quality assurance requirements (providing required information on time) or
- an existing provider with outstanding conditions, an agreed action plan and which is complying proactively with the action plan and
- an existing provider engaging with the GOsC.

28. To date, three of the nine Osteopathic Education Institutions have RQ Recognitions without expiry dates. The Executive will consider which other to submit to the Committee for consideration for the June 2021 meeting based on the decisions made by the Committee following the annual report analysis at the March 2021 meeting.

Update on good practice seminar in March about public and patient involvement

29. Learning from each other both within and outside the sector through listening, dialogue and the sharing of good practice is a key component of continuous enhancement of osteopathic education.

30. As part of this approach Stacey Clift and Rachel Heatley have been working in partnership with the General Chiropractic Council and others to explore patient and public involvement in osteopathic and chiropractic education.
31. On 11 March 2021, the Professional Standards team is hosting a joint workshop with the General Chiropractic Council to encourage discussion between osteopathic and chiropractic institutions regards the role of patient and public involvement (PPI) in their respective organisations.
32. The workshop will be attended by both osteopathic and chiropractic patients. The osteopathic patient representatives have all received treatment at osteopathic educational institutions.
33. Workshop attendees will hear about examples of best practice of PPI in other educational settings, which will include speakers from the University of Hertfordshire and the University of Leeds Medical School. The workshop also aims at encouraging educational institutions to reflect on the impact of COVID-19 on patient and public involvement in their work. We hope that the workshop will help OEIs to identify further action the sector may wish to consider to continue to enhance the opportunities for involving patients in education, and to identify the support they might need in the further development of patient involvement in education and training.

Student presentations

34. A key part of our strategy to support implementation of the Osteopathic Practice Standards, professionalism and an understanding of the 'why' as well as the 'what' of regulation, we offer sessions to all osteopathic educational institutions in year 1, 2 and in the final year.
35. This year we have undertaken the following presentations to year 1 or 2 students:
 - European School of Osteopathy – October 2020
 - Swansea – November 2020
 - London School of Osteopathy (arranged for March 2021)
36. This year we have undertaken the following presentations to year 4:
 - European School of Osteopathy and British College of Osteopathic Medicine – January 2021
37. We are engaging with the other institutions to do some joint online presentations before the end of the academic year.

Engagement and dialogue with the OEIs

38. We meet regularly with OEIs together, as part of our GOsC / COEI meetings and also on a one to one basis. Issues for discussion have included:

- Common approach to infection control
- Common approach to adaptation of courses
- Sharing of information about government guidelines and access to testing etc.
- Feedback about quality assurance requirements
- Discussion about the strategic direction of the sector.

39. This focus on dialogue, both facilitates the information required to enable the Committee to exercise its scrutiny role but also encourages development and collaboration to support the continual enhancement of education and patient care as well as the strategic development of the sector.

Recommendation: To consider the development of our approach to quality assurance.