



Policy and Education Committee

Minutes of the Policy and Education Committee (PEC)(supplemental) held in public on Monday 7 December 2020 hosted via Go-to-Meeting video conference

Confirmed

Chair: Professor Deborah Bowman

Present: Daniel Bailey
Dr Marvelle Brown
Sarah Botterill
Bob Davies
Dr Joan Martin
Professor Raymond Playford
Nick Woodhead

In attendance: Fiona Browne, Director of Education, Standards and Development
Duncan Clarke, Quality Assurance Professional Lead, Mott McDonald
Michelle McDaid, Quality Assurance, Project Director, Mott McDonald
Matthew Redford, Chief Executive and Registrar
Marcia Scott, Council and Executive Support Officer
Holly Sheppard, Mott McDonald

Item 1: Welcome and apologies

1. The Chair welcomed all to the meeting.
2. Apologies were received from:
 - Elizabeth Elander, PEC and Council Member
 - Dr Bill Gunnyeon, Chair of Council
 - Steven Bettles, Policy Manager, Professional Standards
 - Karim Kabir, Quality Assurance Liaison Officer

Observers with speaking rights (as the items on the agenda were all reserved items):

- Maurice Cheng, Chief Executive, Institute of Osteopathy
- Kerstin Rolfe, Council of Osteopathic Education Institutions (COEI)
- Dr Dawn Carnes, National Council for Osteopathic Research (NCOR)
- Michael Mehta, Osteopathic Alliance (OA)

Item 2: Interim Quality Assurance Handbook for forthcoming recognised qualification (RQ) visits

3. Fiona Browne, Director of Education, Standards and Development, introduced the item which sought the Committee's approval of the interim Quality Assurance Handbook to be used in relation to the Recognised Qualification (RQ) renewal visit in 2021 for the College of Osteopaths (CoO) and the London College of Osteopathic Medicine (LCOM).
4. The following points were highlighted:
 - a. It is planned that an interim Quality Assurance Handbook setting out the process and rules will be applied for the Recognised Qualification renewal visits for the College of Osteopaths (CoO) (May 2021) and the London College of Osteopathic Medicine (LCOM) (June 2021) undertaken by Mott MacDonald.
 - b. Mott McDonald have been engaging with the OEIs and Visitors to adapt, strengthen and build on the previous handbook. The interim handbook has been developed and shared with CoO and LCOM although they have not, as yet, provided any feedback.
 - c. The Committee agreement is sought along with feedback and comments on the interim Handbook which will be helpful in the development of the final Handbook in 2021.
5. In discussion the following points were made and responded to:
 - a. Mott McDonald responded to a number of suggestions relating to the interim QA Handbook and supporting documents:
 - the category of 'Partially Met' can be included on the Assessment of Review Criteria form (Annex C) .
 - the category of 'Recommendations' on the Assessment of Review Criteria form (Annex C) is included in the main text of the Handbook and will be more clearly linked.
 - there is scope for flexibility on the confirmed agenda(diagram at 4.3 of the QA Handbook) once the Visit has commenced and the narrative can be amended to support this, but it is preferred that the Agenda is finalised in advance of the Visit.
 - b. Review Criteria and reduction of Visit duration: It was explained that no specificity had been provided on the duration of review visits for CoO and LCOM have been made relating to the Interim QA Handbook. It was not expected that the Visits for the institutions would be shortened as there would be a need for flexibility dependent on the specifications. Once the Visits have been completed the process of transition and work on the final QA

Handbook will continue with any efficiencies being identified and incorporated.

- c. Removal of Review Co-ordinator: It was explained that as the process continues to develop, the Visit Team would have more ownership of co-ordination and communication. Moving into the first visits Mott McDonald would ensure the careful management and support for this transition and ensure there is transparency between the Visit Team and the OEI.
- d. Mapping tool – Focus on academic teaching but minimal reference to clinic: It was explained that it had not been the intention to minimise the clinical content and the importance of this was agreed. There would be no change in the way in which clinical observations are to be undertaken for CoO and LCOM visits and this would be made more explicit in the interim Handbook. Moving forward there would be an emphasis on clinics and this would be set out in the specifications.
- e. It was suggested that to stress and emphasise the importance of clinical provision this should be placed at the forefront of the QA process ahead of the academic provision as this supports clinical provision. It was added that, from an OEI perspective, it is important for clinical provision to be recognised as a substantial part of the QA process.
- f. Inclusion of SMART conditions (Specific, Measurable, Achievable, Relevant, and Time-bound): It was agreed that SMART actions were important but not clear that these should be included as part of the format within 'Conditions' and/or 'Recommendations' set for institutions. This was because quality was not a tick box exercise but an ongoing identification, management and monitoring of issues. It was suggested that SMART outcomes might be best utilised in the development of the OEI action plans which would better capture the monitoring and ongoing implementation and evaluation.
- g. Management of Concerns Policy and relationship to whistleblowing: The management of concerns policy does state that the identity of the complainant will normally be disclosed to the providers. In the case of a whistleblowing concern the individual's employment status is protected if they have made a qualifying disclosure. Where formal concerns have been raised by an institution or an individual, they have been able to speak to a member of staff about those concerns and as part of this they are made aware of the Management of Concerns and Whistleblowing Policies. What has been found is that concerns about anonymity can be managed without inhibiting the concerns process. To date no concerns have been unable to be investigated because a complainant wishes to be anonymous. The GOsC take concerns and complaints seriously and always will ensure support to the person who has raised the concern.
- h. Unsolicited information: Members welcomed the inclusion the section relating to 'Unsolicited information' suggesting this might be reinforced and make

clear that the Visiting Team is willing to receive information not only from students, but others involved with the OEI under review. It was also commented that as much should be done as possible to ensure student concerns can be heard if there are shortfalls in the OEI complaints/concerns pathways.

- i. QA Handbook: The Visit (Section 5.6): It was that as well as the focus on the curricula and assessment documentation that there should also be a focus on delivery and that 'delivery' be included in the section and at the bullet point:
 - curricula and assessments enable students to achieve the OPS
- j. The Patients' Voice: It was commented that there was insufficient focus on the Patients' Voice in the relation to areas including patient safety, principles in co-production, patient experience in the clinic, the patients' voice in creating a curriculum and co-delivery. It was asked if this aspect of the review arrangements could be appropriately emphasised?
- k. Patient and Public Involvement: Members were informed that Rachel Heatley and Stacey Clift, Senior Research and Policy Officers, are currently developing a good practice seminar building on work previously undertaken for presentation to the OEIs in 2021. They have also been engaging with colleagues in other sectors on examples of in public/patient involvement in education. This work will fit into the GOsC's strategic aim of building trust with patients and feeding into education.
- l. Evolution of the Interim Handbook: It was explained that feedback from the visits will be integral to the evolution and development of the final Handbook. There will be consultation with all stakeholder groups to review and ensure that feedback from the current cycle of visits and changes are incorporated into the final document as required before bringing to the Committee for consideration.

Agreed: The Committee agreed the Interim Quality Assurance Handbook for use in conjunction with the RQ Renewal visits for the College of Osteopaths and the London College of Osteopathic Medicine in 2021.

Item 3: London College of Osteopathic Medicine (LCOM) – RQ specification

6. Bob Davies declared an interest and did not participate in the discussion.
7. The Director of Education, Standards and Development introduced the item which sought the Committee's approval for the Review Specification for renewal of the RQ review at the London College of Osteopathic Medicine.
8. The following points were highlighted:
 - a. The London College of Osteopathic Medicine currently has a three-year rather than a five-year expiry date for its Recognised Qualification due the

Committee's concerns in relation to issues concerning governance, admissions, and strategy as highlighted in the Conditions and Areas for Development.

- b. The Visitors are still to be agreed and the Committee will be asked for its electronic approval of the Visitors during January 2021.
 - c. The Review Visit is planned to take place in June 2021. The subsequent Report and Action Plan will be submitted to the Committee in October 2021 for its recommendation to Council in November 2021 and submitted to Privy Council for approval in 2022.
9. The following points were made and responded to:
- a. Outstanding conditions: It was considered that LCOM had shown progress against the conditions and actions plans. Regular meetings have taken place with the institution to support it in addressing the concerns raised by the Committee. If there were any areas of ongoing or new concerns the Committee would be informed.
 - b. Members were advised that dependent on the analysis of the Annual Report the Committee might consider a review of the RQ specification. Any substantive change to the specification will normally be reviewed and agreed by the Committee. The Executive may unilaterally change the dates and timetables following agreement with the relevant institution and Mott MacDonald.

Agreed: The Committee agreed the review specification for the London College of Osteopathic Medicine RQ review.

Item 4: College of Osteopaths – RQ specification

10. The Director of Education, Standards and Development, introduced the item which sought the Committee's approval of the Review Specification for the renewal of the Recognised Qualification (RQ).
11. The following points were highlighted:
- a. Since the last Visit, which took place in May 2016, the institution the College entered a validation agreement with the University of Derby to validate the Bachelor of Osteopathy (BOst - Part-time)
 - b. All conditions have been fulfilled but will be checked by the Visitors.
12. In discussion the following points were made and responded to:
- a. It was agreed that consistency of teaching across different sites and reduction in contact time due to the programme covering three sites would be made more explicit in the Review Specification.

Agreed: The Committee agreed the review specification for the College of Osteopaths RQ Review.

Item 5: Any other business

13. University College of Osteopathy (UCO):

- a. Nick Woodhead declared an interest.
- b. The Director of Education, Standards and Development gave an update on the situation regarding the recent fire at UCO Clinic. The building itself will be out of service for up to 12-months. It was explained that a fire underneath the clinic, had caused substantial damage to the clinic. Fortunately, no one had been injured. A temporary clinic has been set up in Borough High Street. Capacity in this clinic was being increased. Virtual sessions have continued in the interim. Updates will continue to be made.

Date of the next meeting: Wednesday 10 March 2021 at 10.00