

College of Osteopaths RQ Action Plan

Condition	Action (s) & Evidence	Responsibility	Implementation of Changes (How)	How monitored
1. To ensure that the delivery and management of the CoO programmes are not compromised, and that the delivery of the OPS are not compromised, the actions from the governance and management audit should be monitored and implemented in line with the agreed timeframes. An update should be provided to the PEC in October 2021, followed by monitoring at the March 2022 PEC. Ongoing monitoring of implementation should be through the annual reporting process. [1.4]	<p>Governance and Management Action Plan in place and used as a working document (evidence – identified individuals against responsibilities)</p> <p>Action plan monitored implemented by the Governance subcommittee. (Evidence minutes)</p>	The Board of Governors	Implemented as scheduled in detailed Action plan.	By the Board of Governors via the follow-up of minutes and actions from Governance Sub-Committees meetings scheduled for x4/ year: September 2021 January 2022 April 2022 July 2022
2. To ensure there is clear direction for the CoO's ambitions in developing osteopathic education, a 2021-2026 strategic plan must be produced for the beginning of the 2021-2022 academic year. The plan	<p>Strategic Plan prepared for September 2021 (Evidence - Strategic Plan Sept vs & BoG minutes)</p> <p>Strategic Plan final sign off agreed by the BoG (Evidence – BoG minutes)</p>	Board of Governors with SLT	<p>Working document is prepared for September 2021</p> <p>Strategic Plan (finalised) agreed by BoG at (October Board meeting)</p> <p>Document disseminated to all stake holders by January 2022</p>	Strategic Plan progress report from the Principal to the Board of governors x 4 per year (standing agenda Item)

Annex C to 7

<p>should be agreed by the BoG and subsequently disseminated to all stakeholders by January 2022. An update should be provided to the PEC in October 2021, followed by monitoring at the March 2022 PEC. Ongoing monitoring of implementation should be through the annual reporting process. [1.4]</p>	<p>Plan disseminated to Stake holders (Evidence - dissemination to Students, staff patients & other external stakeholders)</p> <p>Evidence – Strategic Plan as Agenda item on Principal/SLT meetings with Students.</p> <p>Evidence – Strategic Plan as Agenda item on SSLC/PC meetings.</p>			<p>Strategic Plan progress monitored through SLT meetings – once a month.</p> <p>Items requiring further input & communicated are supported via MMT meetings (standing agenda item)</p>
<p>3. Minimum standards of clinical education, such as the inclusion of patient numbers and clinical hours in student logs, relating to the attainment of the OPS should be monitored on a regular basis. An update should be provided to the PEC in October 2021, followed by monitoring at the March 2022 PEC. Ongoing monitoring of implementation should be through the annual reporting process. [4.3]</p>	<p>(Evidence - Individual student's patient numbers / demographics and presenting symptoms are logged by both the student and the CoO. Clinical hours are logged in a similar manner).</p>	<p>Clinical Tutors supported by Clinical Leads with SLT</p>	<p>The clinic logbook is being compiled for the October Clinic Induction. The updated elements which have been prepared include guidelines and recording sections for different types of patients students have worked with. Clinical Leads work with Clinical Tutors enabling them to allocate patients with specific presentations to individual students who require experience with a particular patient presentation.</p> <p>Specific marketing strategies will be used if we find that either clinic needs to increase the number of patients with specific presentations to meet student needs.</p>	<p>Students will have regular tutorials with Clinical Tutors who are familiar with the student's progress. Overall student's progress will be monitored by the Clinical Leads who will address any needs.</p> <p>Internal Assessment Board will review these when looking at student assessments to fit in with a Board.</p>

<p>4. To ensure that the student voice in the maintenance of academic standards is realised, and that there is ongoing evaluation and monitoring of any risks to the OPS, student feedback should be monitored from SSLMs and the implementation and monitoring of actions arising demonstrated. An update should be provided to the PEC in October 2021, followed by monitoring at the March 2022 PEC. Ongoing monitoring of implementation should be through the annual reporting process. [6.2]</p>	<p>(i)Introduce once a semester Principal/SLT surgery (Evidence - outcomes and action plan, feedback with deadline dates)</p> <p>(ii)Student rep on Board of Governors. (Evidence – student recruited)</p> <p>(iii) BoG and reps to meet twice yearly (Evidence - action plan, feedback with deadline dates)</p> <p>(iv) SSLC/ PC meetings- to meet once per semester (evidence action plan, feedback, with deadline dates)</p>	<p>SLT</p> <p>Board of Govs</p> <p>Board of gov's</p> <p>SLT</p> <p>PL & Registrar</p>	<p>(i) Communicated to students in Sept 2021 - See attached Newsletter as evidence of communication (highlighted in orange)</p> <p>(ii) Role communicated to students July 21 & Sept 21 newsletter reminder with deadline for applications extended – see attached Newsletter as evidence (highlighted in green) plus email & accompany documents sent to students in July 2021.</p> <p>(iii) Continued practise dates tbc sem1</p> <p>(iv) Continued practise. Dates confirmed to students in Newsletter – see attached as evidence (highlighted in blue), plus reminder about where they can find the Action Plans.</p>	<p>Board of Governors via -</p> <p>Student engagement WG meetings & minutes</p> <p>Strategic Plan (activities cross-referenced to Strategic Objective 2)</p> <p>Action plans monitored by SLT & MMT to ensure all actions are being progressed within the deadlines.</p>
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