

### Policy and Education Committee 6 October 2022 Patient engagement

Classification

**Public** 

**Purpose** 

For discussion

**Issue** 

A progress report on our patient engagement activity and outline of current projects including the Values project and proposed Patient Council Associate Programme.

#### Recommendations

- 1. To consider and provide feedback on the development of a Patient Council Associate Programme.
- 2. To note the progress of the dissemination and evaluation of our resources for patients and practitioners to support the implementation of the Osteopathic Practice Standards and the implementation of values based practice.
- 3. To note our patient engagement activity since October 2021.

# Financial and resourcing implications

We have a budget of up to £51,000 for all our patient work for 2022/23. This includes: patient engagement activity; implementation and evaluation of our values resources and an independent patient perceptions survey.

## Equality and diversity implications

To ensure as many patients and members of the public can participate in our activities we always ask for their preferred method of engagement and to let us know any adjustments they might require (additional breaks, resources in alternative formats). Support is provided before, during and after every activity.

The Patient Council Associate programme provides an opportunity to proactively increase the diversity of Council.

The values resources were developed in partnership with a diverse range of patients. Feedback from both patients and the Patients Association, has been positive about the diversity of resources available and that they are user friendly. We have also acted on feedback that included: 'less text is easier, avoid patronising language, and have some imagery'. As part of the ongoing implementation and evaluation will continue to review and seek feedback



about the accessibility of the resources as part of our Equality Impact Assessment.

Communications implications

Implementing the values resources will involve an event at St Catherine's College Oxford, University of Oxford, as well as an extensive communications campaign to promote use of the resources among osteopaths and patients.

**Annex** None

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#### Key messages from this paper

- We are seeking feedback from the Committee on thinking about establishing a Patient Council Associate programme and a rationale for taking this approach to integrating the patient voice at a strategic level in GOsC.
- We have published and initiated our communications campaign to disseminate the values resources and promote their use among osteopaths and osteopathic patients.
- We will host a hybrid (online and face-to-face) shared decision making event showcasing the values resources on 2 November 2022 at St Catherine's College, Oxford.
- On 24 October 2022 we will be chairing a joint workshop with the General Dental Council and the General Chiropractic Council at the annual Scottish Regulation Conference in Edinburgh where we will discuss our work on patient engagement.
- Patients will be involved in the user testing of the Cloud Engage project reviewing the public Register and looking in particular at accessibility issues and forthcoming consultations.

#### **Background**

- A. Patient Associate Council Programme
- 1. Our <u>Strategic Plan 2019-2024</u> states that 'We will build closer relationships with the public and the profession based on trust and transparency.' And 'we will be an exemplar in modern healthcare regulation accessible, effective, innovative, agile, proportionate and reflective'.
- 2. Our Business Plan states we will 'Ensure patients are at the centre of our regulatory approach across all parts of our business.' It states that one of our regulatory principles is 'We will always be patient focused.'
- 3. Our Business Plan for 2022/23 states that we will 'Develop patient involvement in governance and strategy development beginning with the development of a Patient Council Associate Programme.' This paper sets out first steps in thinking about this and welcomes the Committee's feedback on our approach and matters to consider as we develop our thinking. (See paragraphs 6 to 13 below.)
- B. Values project
- 4. In June 2022, the Committee received <u>an update about the implementation and evaluation of our values and shared decision making resources</u>. This paper provides a brief update about the progress of the implementation and evaluation. (See paragraphs 14 to 26.)

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- C. Patient engagement activities
- 5. In October 2021, the Committee received <u>an update paper about our patient</u> <u>engagement activities</u>. This paper provides an update about activities and impact since then. (See paragraphs 27 to 35.)

#### **Discussion**

- A. Patient Council Associate proposal
- 6. As a statutory regulator it is essential that we put patients at the heart of what we do and do everything we can to maximise the opportunities patients and the public have to share their views. Without the patient voice, we cannot be clear that we are not making assumptions about what patients want and need.
- 7. Since June 2020 we have steadily increased our levels of patient engagement resulting in a Patient Involvement Forum made up of a range of diverse and committed representatives. As a result, patient insight is helping to ensure that we meet our core objectives of protecting, promoting and maintaining the health safety and well-being of the public.
- 8. However, there is more work to do to enhance the patient voice as part of our strategic development and decision making which is a necessary part of our aspiration of co-production and partnership. Ultimately, we aspire to a 'co-production' model which includes developing patient involvement in governance and strategy development. Ultimately valuing patient experience and the patient voice as part of our Council would enable GOsC to fulfil our ambition and our duty to put patients at the heart of what we do.
- 9. Taking a first step with a Council Patient Associate could support us to understand how best to do this.

Patient Council Associate: benefits for GOsC and patients

- 10. A Patient Council Associate could help us to reflect further about how we put patients first, in the same way that we expect osteopaths to do in a partnership model rather than a paternalistic model. Patients could, in future, inform our strategy, act as a critical friend challenging thinking as well as bringing a wealth of insight, perspectives, expertise and experience to the work of the GOsC.
- 11. In particular, a Patient Council Associate could help GOsC to further:
  - a. identify and address knowledge gaps and concerns/expectations of patients and the public.
  - b. assess policy development and processes at the outset to ascertain patient priorities and involvement requirements.
  - c. promote among the profession an enhanced appreciation of patient-centred care and the patient journey through care in partnership with a range of health professionals.

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- d. demonstrate that we are committed to valuing the patient voice/perspective as an equal partner modelling this approach for all our stakeholders.
- e. consider how we better reflect the patient voice (as we do the osteopath voice) in our governance structure and recruitment in the future.
- f. contribute to us becoming a more inclusive and transparent organisation.
- g. proactively increase the diversity of Council.
- 12. It is also an opportunity for prospective patient leaders to:
  - a. learn more about health regulation
  - b. learn about how GOsC works
  - c. learn how Council members work, contribute
  - d. develop influencing and board member skills.

#### Consideration and feedback

- 13. The Committee is invited to consider and feedback on our approach in general and in particular on the following questions:
  - a. Is creating a Patient Council Associate programme the right approach for integrating the patient voice at a strategic level?
  - b. What are the strengths and weaknesses of the suggested approach?
  - c. Are there any gaps in our thinking?
  - d. Are there are any barriers and enablers to implementing a Patient Council Associate programme?
  - e. What should we consider further as we develop our model?
- B. Values project: Implementation and evaluation of values resources
- 14. In July 2022, we hosted a series of focus groups with patients to discuss how we should implement and evaluate <u>the values resources</u>. There was universal support for the resources. For the majority of patients, they hadn't seen resources like these and all participants said they would recommend them to their family and friends.
- 15. The lively and positive discussions have heavily shaped our thinking particularly regards implementing the resources and in particular our communications campaign. In addition, some of the feedback we received enabled us to improve the resources before we began promoting them. For example, we changed the name of the Patient CV to Patient History as patients didn't think CV was the right terminology in a health context. We edited the animation so that it includes subtitles, and we are offering the patient leaflet in a larger font option as requested by patients. Some of the group said they wanted to fill in the forms by hand rather than online and so we are in the process of exploring print options.
- 16. Patients also received a copy of our draft specification to recruit a researcher to evaluate the resources. Their feedback centred on how the researcher(s) could recruit patients for the evaluation and engage with them effectively. For example, making sure appropriate budget is set aside to incentivise feedback, having a single point of contact, setting patients a task before and after any

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discussions with researchers as well as suggestions on how GOsC can use sections of the website to encourage patients to pilot the resources. We are now in the process of sharing the specification with interested parties for the purposes of selection. We expect an interim evaluation report in spring 2023 with a second final report later in 2023 (subject to discussion and negotiation with our evaluator).

#### Launch of the resources

- 17. We have begun rolling out a communications campaign to promote the resources which are hosted on a <u>dedicated webpage</u> on our website. The aim of the campaign is to raise awareness of the concept of shared decision making, explaining how the resources can be used by practitioners to support practice and where and how to access the resources and share them with patients.
- 18. The resources are available to download in editable format and we will be promoting their use via all of our communications channels. A <a href="news-story">news-story</a> announcing the launch of the patient resources was published on 21 September 2022 launching the resources and on the same day an email was sent to all osteopaths directing them to the <a href="values webpage">values webpage</a> and providing context to the project. From the end of September onwards social media activity will begin, with versions of the resources having been created specifically for social media, including Twitter, Facebook and LinkedIn. The Collaborating Centre for Values Based Practice has committed to promoting the resources via their channels.
- 19. Our Communications team has ensured that the resources are engaging and in line with our established patient engagement design approach that we have been using to support all of our activities with patients and the public. In addition, we intend to ask osteopaths if they need the resources in alternative formats.

#### **Values workshop**

- 20. On Wednesday 2 November 2022 we will co-host a shared decision making workshop at St Catherine's College, Oxford University with Professor Bill Fulford and Professor Ashok Handa. The aim of the event is to raise awareness of shared decision making and how the resources might help drawing on a range of external expert speakers as well as staff.
- 21. The event will follow a hybrid model. The morning session of the event will be face-to-face as well as online via MS Teams to enable us to maximise participation. The afternoon session will be solely face-to-face. In person places are limited to 40, with 24 of those places fully funded by the Collaborating Centre for Values Based Practice.
- 22. The workshop will feature a range of speakers including Rachel Power, Chief Executive of the Patients Association, who will share the patients perspective

and discuss the findings of the **Shared decision making from the perspective of clinicians and healthcare professionals** report.

- 23. The afternoon session will take the format of an interactive workshop for in person attendees. We will explore:
  - the potential benefits of shared decision making for osteopaths and patients
  - barriers and enablers to implementing shared decision making
  - how osteopaths can formulate a plan to incorporate shared decision making in practice.
- 24. We expect a range of attendees including sector organisations: the Institute of Osteopathy, osteopathic educational providers, regional Leads of CPD groups, Osteopathic Alliance and organisations and individuals from other sectors, other health regulators, the Professional Standards Authority as well as a number of patients and patient organisations.
- 25. We intend to record speaker presentations and use those to produce training resources to support a better understanding of shared decision making among both patients and osteopaths as part of our ongoing support for patients and practitioners to enhance practice in accordance with the Osteopathic Practice Standards.

Consultations and engagement (October 2021-present)

- 26. Since October 2021, patients have contributed to the following:
  - a. **PSA Symposium: Bridging the Gaps in the patient safety system.**Rachel Heatley and Sandra Frost, a member of our Patient Involvement Forum opened the first day of the Professional Standards Authority's virtual three-day symposium.
  - **b. Fitness to Practise and standards related work around boundaries**Julie Stone hosted focus groups with a mix of osteopathic and nonosteopathic patients. Topics that emerged included the giving and receiving of gifts, where the balance of power lies, risk management processes and the role patients believe a regulator should play in safeguarding against boundary transgressions.
  - c. Standards for Education and Training and Outcomes for Graduates consultation

On 28 February 2022, the GOPRE Stakeholder Reference Group which included patient members, met to consider the outcomes of the consultation on the Guidance for Pre-registration Education and Standards for Education and Training. Patient feedback was overwhelmingly positive not just on the updated content but on the way the consultation was conducted, ensuring all voices were heard equally.

- d. Adjunctive Therapies consultation
  - Six patients fed into the consultation and discussions included the following points:
    - For a lay person, the guidance was seen as helpful.

- Would it be helpful to give some more guidance about providing written information for patients in advance to be clear about what to expect and what the demarcation was between osteopathic and other approaches, where relevant?
- Consent is an ongoing theme how do we make sure that osteopaths make it clear what patients can expect.
- Patients need to be clear on what basis they're being treated.

#### Upcoming activities

#### **Patient Perceptions Survey**

- 27. We commission a patient perceptions tracker survey every four years. The last patient perceptions tracker was undertaken in 2018. We intend to commission our patient and public perceptions tracker 2022 later this year. We will use our findings from our Patient Involvement Forum to inform our questions and to ensure we cover key current issues they have highlighted to us, such as the extent to which patient's feel their voice is heard by their practitioner and the impact of the COVID-19 pandemic on perceptions of osteopathy. We will also continue to use the majority of existing questions in order to continue to track our insight.
- 28. Questions will therefore focus on the following issues:
  - a. Trust in osteopathy in comparison to other healthcare professions
  - b. Contributors to confidence in healthcare professions
  - c. Awareness of osteopathy regulation
  - d. Understanding of role of GOsC in osteopathy
  - e. Barriers to raising a concern about treatment/osteopath
  - f. Contributors to confidence in and decisions to try osteopathy
  - g. Information expected before an osteopathy appointment
  - h. Experience of osteopathy, especially in relation to:
    - i. Active listening
    - ii. Communication
    - iii. Meeting the patient's needs
    - iv. Shared decision-making
    - v. Feeling at ease
  - i. Contributors to positive experience of osteopathy
  - j. The impact of COVID-19 on awareness of and confidence in osteopathy and osteopathy regulation.
- 29. We will aim to recruit 1,000 members of the public and 500 patients to answer our survey. This mirrors the approach taken in 2018. We plan to recruit an external organisation to carry out the survey for us as we did in 2018 with positive results. The survey will be designed to take ideally no more than 15 minutes to respond to encourage high response rates.
- 30. The expected timeline is (subject to agreement with the supplier/their advice):

Date	Activity
October 2022	Commission activity
November 2022	Survey undertaken
January 2023	Analysis report received
March 2023	Consideration by Policy and Education Committee
May 2023	Publication by Council

#### **Annual Scottish Regulation Conference**

- 31. On 24 October, the Chief Executive and Registrar will chair a session on 'Patient impact and engagement' at the <u>Annual Regulatory Event for Health and Social Care Professions</u> in Edinburgh. Matthew will be joined by Nick Jones Chief Executive and Registrar, General Chiropractic Council and Dr Joanne Rewcastle Associate Director for Communications and Engagement, General Dental Council.
- 32. As part of the session we will have the opportunity to talk about our patient engagement activities and how our learning has shaped osteopathic regulation and advanced our strategic objectives. All three speakers will also openly discuss the challenges they face in engaging with patients and seek feedback from participants on potential solutions to those challenges.
- 33. This year's conference focuses on Professional Health and Social Care Regulation: Looking to the Future. Attendees will include health regulators, a range of health practitioners, and policy makers.

#### **Cloud Engage project: Patient input**

- 34. A workstream in the Cloud Engage project will involve user testing with patients to seek their feedback on planned enhancements to the public Register. Their insights have already contributed to thinking to enhance the Register search function, for example, different search fields, and this has been built into the specification.
- 35. Our external supplier is expected to complete enhancements in late October and user testing with patients is currently planned to take place in November. We will work in partnership with patients during that time in order to test the search function and seek feedback about other aspects during that engagement. In accordance with our patient engagement policies, patients will get bespoke support before, during and after the testing phase but also to ensure we capture all their insights and feedback.

#### **GOsC** website: review of patient-facing content

36. We are embarking on a project to review the user journey for patients and participants visiting our public website with regard to how they raise a concern and what to expect during hearings. We intend to involve patients from the outset to better understand their needs and to ensure we don't make assumptions about how easy or difficult information is to find or to understand.

#### Questioning witnesses' consultation

37. Focus groups and a survey are planned for October 2022 to seek patient's views on the Questioning witnesses consultation.

#### **Recommendations:**

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