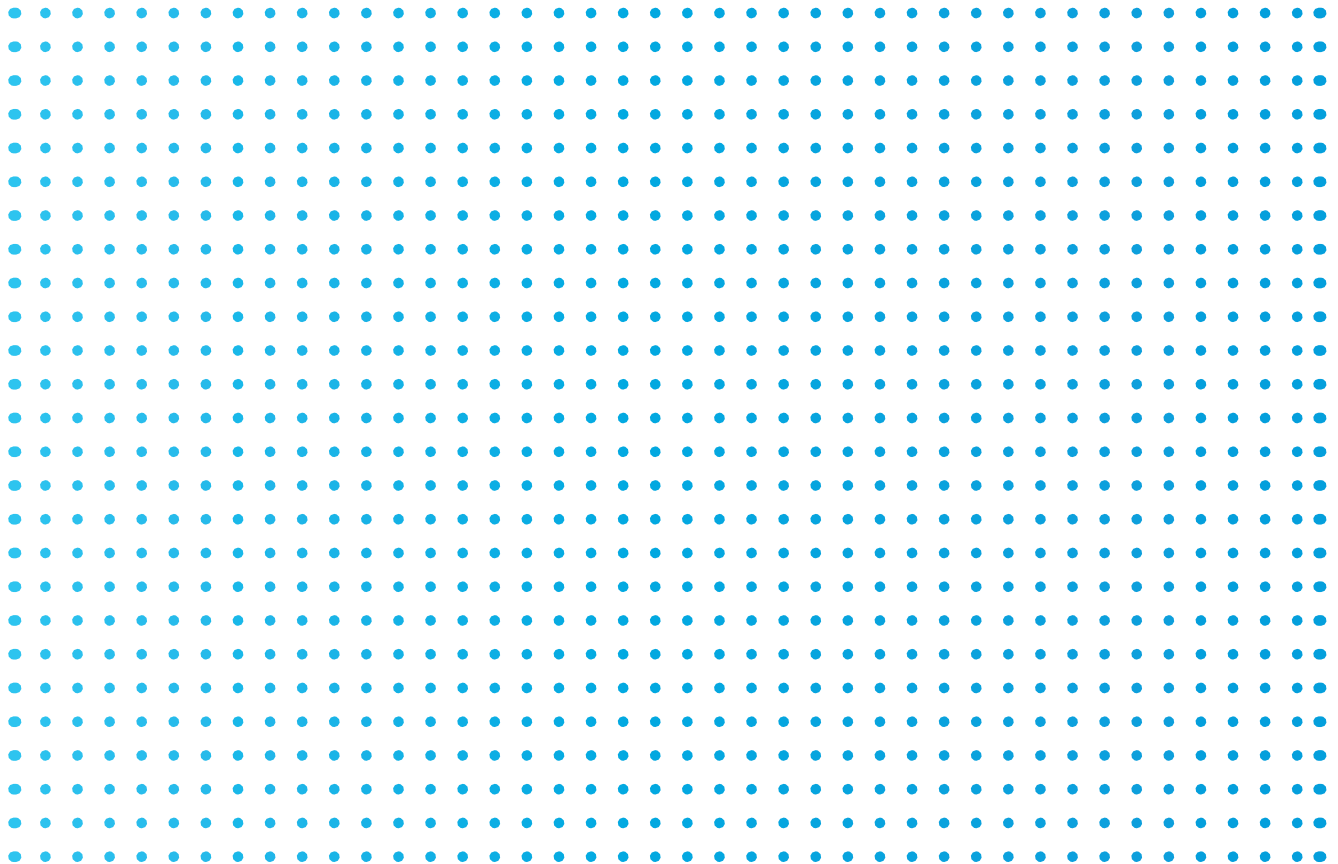


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Continuing Professional Development:
proposals for assuring the continuing fitness
to practise of osteopaths



Summary consultation



General
Osteopathic
Council

February 2015

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Introducing the consultation

This consultation sets out the General Osteopathic Council's (GOsC) proposals for a new Continuing Professional Development (CPD) scheme ('the CPD scheme') that will provide assurance to the public of osteopaths' continuing fitness to practise.

There are two consultation documents. The [Full Consultation](#) sets out the background and detail of our proposals and includes consultation questions for completion by any interested person. Also available is this shorter Summary designed particularly for patients and members of the public to encourage a wide variety of responses. However, we welcome responses from everyone to either version of the consultation.

This consultation runs from **February to 31 May 2015**. During the consultation period there will be a range of events taking place across the UK to hear views. These will primarily be facilitated by osteopathic regional groups, educational institutions, the Institute of Osteopathy and other osteopathic organisations. The GOsC will also host a programme of 'listening events' for groups, including patients and the public, other regulators and health professionals.

The GOsC is committed to ensuring that this consultation process is as accessible as possible for everyone. Please contact us if you require any help in reading, understanding or responding to this consultation. If you would like to discuss any aspect of your response, or if you have any questions, please also contact us.

Contact

cpdconsultation@osteopathy.org.uk

020 7357 6655 x235

Background

Our consultation proposals presented here represent a milestone at the end of a comprehensive programme of work undertaken by the GOsC to develop an appropriate and effective CPD scheme¹, that:

- supports osteopaths to demonstrate that their knowledge and skills are up to date and they are fit to practise
- provides assurance to the public that osteopaths' knowledge and skills are up to date and they are fit to practise.

The proposals outline a new CPD scheme that aims to provide the public with assurance that osteopaths practise in accordance with the *Osteopathic Practice Standards*. These are the core standards for registration.

Initially, this work programme was driven by government expectations² and a report from the Professional Standards Authority, the body overseeing all health professional regulators in the UK³.

By working closely with osteopaths and patients, we believe we have developed a better CPD scheme for everyone.

Our proposals build on what most osteopaths are already doing. The scheme aims to enhance the role of colleagues within the learning process and focuses on the development of a respectful learning community. It is this type of environment that fosters continual improvements in practice and patient safety.

This consultation is about how we intend to provide assurance to patients and the public that osteopaths, as regulated health professionals, are up to date and fit to practise.

1 Further information about the programme of development and research that has informed our proposals is available in our *Introducing our new CPD proposals document* booklet at: <http://cpd.osteopathy.org.uk>

2 Trust, Assurance and Safety –The Regulation of Health Professionals in the 21st Century. Department of Health, 2007 (https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/228847/7013.pdf) – accessed on 11 December 2014.

3 *An approach to assuring continuing fitness to practise based on right-touch regulation principles*. Council for Healthcare Regulatory Excellence (now the Professional Standards Authority), November 2012 (<http://www.professionalstandards.org.uk/docs/psa-library/november-2012---right-touch-continuing-fitness-to-practise.pdf>) – accessed on 11 December 2014.

About osteopathy

Osteopathy is a system of diagnosis and treatment for a wide range of health conditions. Osteopaths use touch, physical manipulation, stretching and massage to increase the mobility of joints, to relieve muscle tension, to enhance the blood and nerve supply to tissues, and to help the body's own healing mechanisms. Osteopaths may also provide advice on posture and exercise to aid recovery, promote health and prevent symptoms recurring. Osteopathic patients often report very high levels of satisfaction with both their osteopath and their treatment.

Osteopathy is a relatively safe healthcare practice compared, for example, to interventions that involve surgery or drugs, but it is equally necessary that osteopaths keep their knowledge and skills up to date. This is particularly important as many patients see an osteopath without being referred by a doctor and the osteopath must be able to identify wider concerns about a patient's health. The majority (but not all) of osteopathic practice is independent, rather than within the NHS. Many osteopaths practise on their own rather than with other osteopaths or healthcare professionals.

Regulation

In the UK, practitioners in a number of recognised healthcare professions are covered by a system of legal regulation that requires them to be registered in order to practise.

Regulated health professionals include doctors, nurses, dentists, opticians, osteopaths, chiropractors and physiotherapists. Regulation ensures that individuals have completed an appropriate course of education and training, and sets certain minimum standards that they are expected to maintain in their practice. It also means that complaints about healthcare professionals are properly investigated and, when necessary, individuals can be disciplined and, in serious cases, even prevented from practising. The GOsC regulates osteopathic practice in the UK.

Traditionally, once entered onto a register of professionals, no further checks were made on a person's suitability to continue in practise, unless a complaint was made about them. More recently, most healthcare regulators have been exploring ways in which professionals can be checked at regular intervals to ensure they remain up to date and competent to practise. For doctors, this process is known as 'revalidation', but across the health professions it is also referred to as 'providing assurance of continuing fitness to practise' through continuing professional development (CPD) or continued education and training. There are also other non-healthcare professions where individuals have to undergo periodic checks, particularly in safety-critical areas (e.g. airline pilots and gas installers).

In order to maintain their GOsC registration, each year every osteopath must complete a minimum amount of study or other activity known as 'continuing professional development' or 'CPD'. At the moment, this is based on a time requirement of 30 hours of CPD a year, at least half of which must take place with others⁴ so as to reduce the risk of osteopaths becoming isolated from their peers.

4 Learning with others: any relevant activity that involves interaction with osteopaths, healthcare practitioners or other professionals.

Providing assurance of continuing fitness to practise

All healthcare professional regulators must introduce some form of continuing fitness to practise scheme in order that healthcare practitioners (and their regulators) can assure patients that practitioners are competent and safe.

It is often assumed that the best way to ensure that a healthcare professional's knowledge and skills are up to date is to make them take regular tests. However, while this approach might be appropriate at the point when a practitioner qualifies, it may be less helpful as their practice and career develops. Therefore, various regulators have explored different ways in which healthcare practitioners can be checked on an ongoing basis. For example, doctors' revalidation is based on a series of annual appraisals in the workplace.

Many osteopaths practise alone or in very small groups. The GOsC's challenge has been to identify a process that is appropriate for the way in which osteopaths actually work, is practical and not too burdensome. The process should support continual improvement in osteopathic practice and patient safety, and provide assurance to patients.

Our approach

The starting point for our approach is the current requirement for CPD by osteopaths. Osteopaths will continue to be required to undertake 30 hours of CPD each year, including at least 15 hours that involves learning with others. We will expect osteopaths to declare each year that they have done this and to keep a record of what CPD activities they have carried out over the scheme's three-year cycle.

In looking at how osteopaths undertake CPD, we have noticed that they often focus on the things that interest them most, particularly learning new techniques or refreshing their knowledge of existing techniques. But we think it is important that CPD covers a wide range of activities and includes keeping up to date in other areas, such as effective communication with patients, safety and quality, and professionalism – core areas of the *Osteopathic Practice Standards*. This is why, under our new proposals, we will seek evidence that over a three-year period, each osteopath's CPD covers all of these areas.

We also know from the complaints received about osteopaths that the complexities of communication and consent are sometimes a challenge. This is particularly significant because of the physical nature of osteopaths' interactions with patients. So the new scheme also expects osteopaths every three years to refresh their knowledge and skills in the area of consent.

It is also important that osteopaths find ways to seek the views of others and reflect on their practice. That is why we are proposing that at the start of each three-year cycle of CPD, an osteopath will have to undertake an objective activity that informs their CPD, such as:

- Seeking patient feedback, e.g. using questionnaires
- Being observed in practice by a peer
- Discussing elements of their practice or specific cases with colleagues
- Undertaking an audit of their practice.

Finally, there needs to be a mechanism for reviewing and checking that the osteopath has undertaken these required activities.

Normally such checking would be carried out by the regulator or an individual they appoint. Our approach is different: we will be encouraging osteopaths to work with their peers to review their CPD activities and to identify whether they have achieved what is expected or would benefit from doing more. This discussion will allow them to review their practice and their CPD with another health professional. We call this the Peer Discussion Review and it will normally take place towards the end of the three-year CPD cycle.

There are many ways in which such a review could take place: osteopaths working with colleagues could review each other; osteopaths with an employer or affiliated to a college could ask the relevant organisation to undertake the review; or osteopaths who are part of a regional society, advanced practice group or member of the Osteopathic Alliance could involve those bodies. As a fall-back, the GOsC could undertake the review. The important point is that the osteopath must discuss their practice with another osteopath or other health professional and that this discussion must include areas of development and ways of addressing these, supporting safe practice and a focus on continual improvement.

This does not mean that the CPD scheme is a 'soft' option because the regulator itself is not checking all individual osteopaths. Our proposals about quality assurance (e.g. we will provide material to support the quality of the review) and audit (we propose to target a greater proportion of Peer Discussion Reviews that take place outside an organisational context) are outlined in the [Full consultation](#).

If an osteopath fails to engage, or does not undertake all the required activities, they will be removed from the Register of osteopaths and prevented from practising. If the Peer Discussion Review process identifies the need for further development, the osteopath will be expected to undertake this CPD to ensure that they meet our standards. The GOsC will also be monitoring implementation of the CPD scheme to ensure that the Peer Discussion Reviews are working properly.

We have taken this overall approach because we think the CPD process should focus on osteopaths improving their practice, rather than on us testing them against basic standards of practice (and providing little incentive to share and discuss areas of development). We believe giving osteopaths the scope to consider how to improve what they do is likely to produce better outcomes in terms of both safety and quality of practice.

Consultation questions

1. Do you consider that our approach enables patients to know that the knowledge and skills of the osteopath looking after them are up to date and that s/he is fit to practise?

Yes No

2. What else would help patients to know that the knowledge and skills of the osteopath looking after them are up to date and that s/he is fit to practise?

If additional space is needed for handwritten comments, please use the area provided on the following page.

Comments:

3. Do you consider that any aspect of this proposed CPD scheme may adversely impact on anyone because of their gender, race, disability, age religion or belief, sexual orientation or any other aspect of equality?

Yes No

If additional space is needed for handwritten comments, please use the area provided on the following page.

Comments:

4. If yes, please suggest how the impact could be eliminated or reduced?

If additional space is needed for handwritten comments, please use the area provided on the following page.

Comments:

5. Do you have any other comments?

If additional space is needed for handwritten comments, please use the area provided on the following page.

Comments:

Thank you for your response to this consultation

About you

We would also like to ask you some questions about you. Completing the [diversity questionnaire](#) is optional but we would welcome information about our respondents.

The information you provide will only be used for the purposes of analysing the consultation responses.

Additional comments: