Education Committee 14 December 2010 Public Osteopathic Practice Standards – update

Classification Public

To note **Purpose**

The attached paper provides an update on the Osteopathic Practice <u>Issues</u>

Standards consultation.

Financial & Resourcing

Implications

None

Equality & Diversity Implications

It will be important to take account of the feedback on equality and

diversity issues when making recommendations.

Communications

Implications

The next steps to be taken by the GOsC in relation to the

consultation will be widely communicated to registrants, patients

and the public and other key stakeholders.

Annex A Outline of consultation strategy for Osteopathic Annexes

Practice Standards

Terms of reference for Osteopathic Practice Standards Annex B

Working Group

Author: Marcus Dye December 2010

Summary

- 1. This paper provides an update of the consultation on the Osteopathic Practise Standards, outlines the next steps and provides an indication of future work on implementation. Of particular note is the appointment of an Osteopathic Practise Standards Review working group to review the analysis of the consultation and make recommendations. The group will consist of six Council members, 3 osteopath and 3 lay and be chaired by the Chair of the Fitness to Practise Policy Committee.
 - Julie Stone (Lay Chair)
 - Ian Hughes (Lay)
 - Kenneth McLean (Osteopath)
 - Nick Hounsfield (Osteopath)
 - Fiona Walsh (Osteopath)
 - Jenny White (Lay)

Background

- 2. In June 2010, the Council agreed that the revised Standard of Proficiency/Code of Practice, entitled Osteopathic Practice Standards should be published for consultation with the profession, the public and other stakeholders.
- 3. The consultation on this document commenced formally on 1 September 2010 and ended on 30 November 2010. The consultation was available for all our stakeholders to access online with paper versions and other alternative formats available on request for those who are unable to access the online consultation.
- 4. Responses to the consultation were forwarded directly to the independent consultant Hewell, Taylor, Freed & Associates, appointed by the GOsC. The consultant has been asked to ensure that feedback is received from all stakeholders including patients, public, a representative sample of osteopaths, osteopathic students, osteopathic educational institutions, post-registration training providers and the British Osteopathic Association. Full details of the consultation strategy are set out at Annex A.
- 5. Hewell Taylor Freed & Associates will produce an analysis report for the GOsC by January 2011. The Council will be asked to consider the report at its meeting of 3 February 2011 and, subject to agree a timescale for publication.
- 6. The consultation strategy used by Hewell Taylor Freed and Associates is wide ranging and diverse to ensure a large and representative response from all our stakeholders.
- 7. The report from Hewell Taylor Freed & Associates will contain a summary of the data collected during the consultation and the main findings. It may also contain some recommendations for improving the Osteopathic Practice Standards document in line with consultation responses. At its meeting of 3 February 2011, the Council will be asked to consider the following:
 - a. The analysis report.

- b. The proposed amendments required to the Osteopathic Practice Standards.
- c. The timeline for publication.
- 8. The Council has agreed to establish a working group to analyse the report findings and make recommendations in relation to how the Osteopathic Practice Standards should be amended to reflect the findings of the consultation.
- 9. The terms of reference for this working group are attached at Annex B.

Next steps

10. The timetable for moving forward is as follows:

7 January 2011: Receipt of draft Consultation Analysis Report

21 January 2011: Feedback and finalise copy of report

3 February 2011: Present report to the Council for initial comment

and to agree publication of the report

w/c 21 February 2011: Osteopathic Practice Standards Working Group

meeting

March 2011: Further revisions to Osteopathic Practice

Standards:

14 April 2011: Council decision on final draft of Osteopathic

Practice Standards and publication

<u>Further consideration of implementation of the Osteopathic Practice Standards:</u> <u>Support for the osteopathic profession</u>

- 11. In tandem, the GOsC will need to consider how to support the profession with the introduction of a revised Standard of Proficiency and Code of Practice. By law, the Standard of Proficiency must be published for a period of one year before taking effect. The same legal requirement does not apply to the Code of Practice, however it is proposed nonetheless to apply the same timeframe to it, assuming it remains part of a joint document following consultation.
- 12. During this period there are a number of ways in which the GOsC might the profession to become familiar with the new Osteopathic Practice Standards:
 - a. UK-wide meetings
 - b. Communication through the website, electronic bulletins and the *The Osteopath* publication
 - c. Communication through other stakeholders such as OEIs and BOA
 - d. Direct mail-outs
 - e. Suggested Continuing Professional Development
 - f. Highlighting relationship of new Osteopathic Practice Standards to revalidation
 - q. Podcasts
 - h. Development of self assessment questionnaires
 - i. Development of case studies showing how the new standards would apply

- j. Providing a training pack which includes self assessment
- k. Provide training to Regional Communication network representatives who would train the profession in turn.
- 13. There is also a range of measures which will need to be undertaken as part of the effective implementation of the revised Osteopathic Practice Standards. These include:
 - a. Revision of the written assessment and Assessment of Clinical Performance required for certain routes to registration.
 - b. Further training for registration assessors.
 - c. Further training for 'return to practise' assessors
 - d. Revision of fitness to practise guidance.
 - e. Training for members of the Investigation Committee, Professional Conduct Committee and any other fitness to practise panellists.
 - f. Revision of QAA guidance
 - g. Review of the Benchmark statement to determine whether changes need to be made as a result of the changes to the Osteopathic Practice Standards.
 - h. Further training for the QAA assessors to ensure that the revised standards are applied to QA activities from the implementation date.
 - Support and training for Osteopathic Educational Institutions to ensure that curricula and assessments are mapped to the revised Osteopathic Practice Standards.
 - j. Revision of our own presentations on the Osteopathic Practice Standards for OEI students before they commence their clinical training.

Outline of consultation strategy for Osteopathic Practice Standards

- 1. Following a rigorous tender appointment exercise, the GOsC has employed Hewell Taylor Freed & Associates to undertake the consultation on the Osteopathic Practice Standards document. Following an initial phase of research and discussion with the GOsC the following approach to the consultation was planned and began implementation on 1 September 2010:
 - a. Online consultation available to all via the GOsC website. Letters sent to all of the osteopathic profession and various stakeholders drawing their attention to the consultation.

Osteopaths

b. Osteopaths will be consulted in a number of ways, via a consultation document, telephone interviews, face to face interviews and the participation in focus group meetings.

A stratified sample of 250 osteopaths has been taken, to obtain participants for 100 telephone interviews. This stratified sample is based on the information which the GOsC holds on its database. This includes:

- i. Age to represent the views of a wide age range of osteopaths
- ii. Location to take account of urban vs rural and representation from all countries of the UK
- iii. Sex to be a representative split between male and female

An additional stratified sample has been used to select 20 face to face interviews based on the same criteria above.

The consultation document has been issued in advance of the interviews and these will not take place unless the participant confirms that they have read and familiarised themselves with the document. It should be noted that due to the small population of osteopaths in Northern Ireland, all of these osteopaths will be contacted directly by telephone as part of the sample. The stratified sample will help to provide as representative as possible quantitative information on the questions in the consultation.

- c. Other information which could influence how representative the stratified sample is. As we improve the range of data held on our database, we will be able to target an even more representative sample. Currently we do hold data on the following areas:
 - i. Disability
 - ii. Sexual orientation
 - iii. Ethnicity
 - iv. Religion/belief
 - v. Type of practice

In order to gain this information to help to ensure the representativeness of the sample, the approach taken will include the following:

- i. Information requested from individuals as part of the online, telephone and face to face interviews. For telephone and face to face interviews, this information will be requested separately in writing, in advance, to avoid any potential embarrassment or discomfort that the individual might have in providing this information verbally.
- ii. The extra data will be monitored during the consultation exercise to ensure that the consultation incorporates the viewpoints of a wide range of osteopath society. If the views of a particular sector are under-represented then alternative methods of consultation may be considered.
- iii. All participants are encouraged to comment on the potential impact of the wording and the standards in terms of equality and diversity issues. To bolster the feedback in this area, two of the osteopath focus group meetings described below will particularly focus on the aspects of equality and diversity.
- d. To support the information gained from the stratified sample, there will be 10 osteopath focus group meetings distributed around the country as outlined in Appendix 1. These focus groups will also help to capture more qualitative information.
- e. These meetings will involve group discussion with between 12-15 osteopaths at each meeting and will represent both rural and city locations as well as England, Scotland and Wales (all Northern Ireland osteopaths will be contacted directly by telephone due to small numbers). Two groups will have a specific focus on equality and diversity issues surrounding implementation of revised document and this will be advertised in advance.
- f. A response rate from 10% of the osteopaths on the GOsC Register will be guaranteed during the consultation.
- g. Whilst the stratified sample will be targeted to specific osteopaths, all osteopaths will have the opportunity to submit a response to the consultation, which will also be sent directly to Hewell Taylor Freed and Associates and considered as part of the final analysis report.

Education

h. Education and training providers are important stakeholders. The principals of the 10 Osteopathic Educational Institutions offering pre-registration education will be contacted directly via the telephone for their opinion. They will also be asked to encourage their students to participate in the consultation. A further incentive to encourage students to participate is the inclusion in a draw to win one of three £30 book tokens.

 Post-graduate training providers including the Foundation for Paediatric Osteopathy, Sutherland Cranial College, Osteopathic Sports Care Association and the Society of Osteopaths in Animal Practice are to be consulted directly by telephone.

Osteopathic Representative groups

- j. The British Osteopathic Association, currently the only representative association for the profession will be consulted via a face to face meeting with the Chief Executive and Council members.
- k. The regional societies have been emailed a link to the consultation to encourage responses in their areas, but also invited to submit a regional response.

Patients

- Patient feedback is also important. The following patient/consumer representative organisations have been contacted to inform them of the online consultation. The 17 groups marked with an asterisk will also be targeted directly via telephone.
 - i. Action Against Medical Accidents*
 - ii. Age UK
 - iii. Arthritis and Musculoskeletal Alliance*
 - iv. Back Care*
 - v. Carers UK
 - vi. Consumer Focus England*
 - vii. Consumer Focus Wales
 - viii. Consumer Focus Scotland
 - ix. Citizens' Advice*
 - x. Equality & Human Rights Commission*
 - xi. General Consumer Council for Northern Ireland*
 - xii. Long Term Conditions Alliance Scotland
 - xiii. Mind*
 - xiv. National Association for Patient Participation*
 - xv. National Children's Bureau
 - xvi. National Patient Safety Agency
 - xvii. National Voices*
 - xviii. NSPCC
 - xix. Patient Concern*
 - xx. RADAR
 - xxi. RNID
 - xxii. Scope
 - xxiii. Scottish Consumer Council*
 - xxiv. Sense
 - xxv. Stonewall
 - xxvi. The Clinic for Boundaries Studies*
 - xxvii. The Patients' Association*
 - xxviii. The Patients' Forum*

xxix. Welsh Consumer Council*

xxx. Which (Consumer Association)*

Copies of the Osteopathic Practice Standards consultation were also distributed to delegates at the national Citizens Advice service conference held on 14-16 September in York.

The GOsC has recently commissioned the University of Brighton to undertake research into the expectations of osteopathic patients, entitled: 'Investigating osteopathic patients' expectations of private osteopathic care: the OPEn project'. Some of the outcomes from this research have an impact on the wording and content of the Osteopathic Practice Standards and it is intended to feed this into the consultation analysis.

GOsC

m. All GOsC Committees and Council were sent an email link to the consultation. The GOsC Professional Conduct Committee and the GOsC Investigating Committee will be consulted directly through two further focus group meetings (detailed in Appendix 1). These Committees are important in terms of the usage of the finalised document in a legal context, so will have valuable input.

Other Stakeholders

- n. The consultation was also circulated to the following stakeholder groups:
 - i. Department of Health in all countries of the UK
 - ii. Council for Healthcare Regulatory Excellence
 - iii. Forum for Osteopathic Regulation in Europe
 - iv. UK Professional Indemnity Insurers
 - v. UK Private Health Insurers
 - vi. Australian Registration Board (to support our work on mutual recognition)
 - vii. New Zealand Register of Osteopaths (to support our work on mutual recognition)

Focus Group meeting plan as at 15 November 2010:

	Criteria	Focus Group	Suggested Location	Suggested Contact	Date/Comment
1.	Fitness to Practise	Investigating Committee	London, Osteopathy House	Kellie Green	23.09.10
2.	Fitness to Practise	Professional Conduct Committee	London, Osteopathy House	Kellie Green	24.09.10
3.	Osteopath	South East	BBENSCH - Harpenden	Cathy Hamilton-Plant	03.10.10
	(E&D focus)				Two focus groups at the same time at BBENSCH to run consequetively.
4.	Osteopath	South East	BBENSCH	Cathy Hamilton-Plant	03.10.10
					Two focus groups at the same time at BBENSCH to run consequetively.
5.	Osteopath	Wales	North Wales/English border	Genevieve Brown	06.10.10
6.	Osteopath	Wales	Cardiff/Bristol area	Charles Millward	26.10.10
7.	Osteopath	North England	Sheffield	Sue Pawsey	01.11.10
8.	Osteopath	South East	Redhill/Reigate	James Olorenshaw	01.11.10
9.	Osteopath	South East	Central London	Tony Longaretti	04.11.10
10.	Osteopath	Scotland	Glasgow	Fiona Davison	06.11.10
11.	Osteopath	North England	Preston	Richard Griffiths	20.11.10
12.	Osteopath	East	Suffolk	John Singleton	24.11.10
13.	Osteopath (E&D focus)	Midlands	Droitwich	Jane O'Connor Carol Fawkes	25.11.10
14.	Osteopath	South West	Plymouth	Arranged by GOsC	27.11.10

Terms of Reference for the Osteopathic Practice Standards Review Working Group

<u>Purpose</u>

 The purpose of the Osteopathic Practice Standards Review Working Group is to review the analysis report produced by Hewell Taylor Freed & Associates following the consultation on the new Osteopathic Practice Standards document, which incorporates revised versions of the Standard of Proficiency and the Code of Practice.

Terms of Reference

- 2. To critically review the analysis report produced by Hewell Taylor Freed & Associates and make recommendations to Council in the following areas:
 - a. Any amendments required to the Osteopathic Practice Standards document
 - b. The timeline for publication of the document

Method of Delivery

3. Necessary documentation will be circulated electronically, with a one-off meeting initially scheduled in February 2011.

Membership

- 4. The group will consist of six Council members, 3 osteopath and 3 lay and be chaired by the Chair of the Fitness to Practise Policy Committee.
 - Julie Stone (Chair)
 - Ian Hughes
 - Kenneth McLean
 - Nick Hounsfield
 - Fiona Walsh
 - Jenny White

Reporting and Accountability

5. The group is accountable directly to Council.