









Osteopathic Development Group Career Development Project Project Initiation Document

Author	Maurice Cheng (BOA) /Ben Katz OA	
Version	0.5	
Status	Draft	
Date	31 October 2013	
Document title	Career Development Project PID	

Document History

Version	Date	Description of Change	Author
0.1	31/5/13	Initial Draft	MCC
0.2	12/7/13	Second Draft (post subgroup meeting)	MCC
0.3	12/9/13	Third Draft	MCC
0.4	30/9/13	Fourth Draft with input from BK	MCC
0.5	30/10/13	Fifth draft	ВК

Table of Contents

1	Introduction	3
_ 1.1		
	·	
2	Project definition	
2.1	Background	3
2.2	Aim	3
2.3	Objectives	∠
2.4	Critical Success Factors	∠
2.5	Scope	∠
2.	2.5.1 Out of scope	4
2.6	Constraints and risks	∠
2.	P.6.1 Constraints	4
2.	2.6.2 Risks	4
3	Project methodology	5
4	Business case	5
4.1		
4.2		
5	Project approach	
5.1	High-level deliverables	(
5.2	Project milestones	6

1 Introduction

1.1 Purpose of this document

The purpose of this document is to define the scope and approach for the Osteopathic Development Group (ODG) project – Career Development.

2 Project definition

2.1 Background

There is at present no formal career structure for osteopaths and no common framework for recognising their development after registration. This results in a lack of clarity around the career development options for osteopaths once they qualify to the standards required for primary registration (ie with GOsC).

There are at present no generally agreed methods by which more senior practitioners can be recognised professionally. The main methods used to indicate competence relate to first qualification – eg the bachelor or masters level qualification, or DO, and that they have complied with ongoing CPD requirements (GOsC registration). There are some postgraduate diplomas but no common framework for evaluating them. There are a few doctorate programmes but holders of these are rare. There are a number of postgraduate colleges offering membership to practitioners with an interest in particular aspects of practice but the criteria for membership vary widely. This may make it difficult for employers and the public to evaluate practitioners.

Compared to many other professions, the majority of osteopaths are self-employed, and there are few external employer career structures (such as the NHS and large private practices or groups of practices) which are recognisable 'career ladders'. This means that some osteopaths may struggle to understand how best to advance their career.

An example of where such external career structures can be used is the physiotherapist profession, which has a recognised pay scale linked to a competency framework within the NHS. Indeed there are a number of examples where highly experienced osteopaths who have chosen employment within the NHS as a career direction have faced significant initial difficulties when negotiating salary levels, often being assigned to the lowest physiotherapist 'grades' due to the lack of comparable performance and competency information.

The focus of this project is to evaluate the need for a more clearly defined career pathway in osteopathy. Drawing on examples from other professions, a range of models of professional recognition will be considered and their appropriateness for osteopathy evaluated.

This project has to work closely with the ODG programme on Advanced Clinical Practice. There is also a close dependency on the Mentoring project, which is a key enabler for both the Advanced Clinical Practice and Career Development programmes.

2.2 Aim

To develop means of quality assuring and accrediting advanced clinical training (accredited specialist practice). The project would identify the most appropriate ways of assessing and recognising advanced practice for the benefit of patients and practitioners. This project might also embrace wider aspects of the quality assurance of CPD/post-graduate course provision.

2.3 Objectives

- 1. To map the current pathways taken by osteopaths in terms of career growth
- 2. To evaluate the need/demand for a more defined career structure in osteopathy
- 3. To explore possible models for this career structure and any implications for the profession, individual osteopaths, employers and the public
- 4. To develop a consensus within the profession about the need for a more defined career structure and the form it might take
- 5. To develop a plan for implementation agreed by all relevant stakeholders

2.4 Critical Success Factors

- Common agreement from OA, COEI and BOA is critical, and active support from GOsC and NCOR very much needed
- 2. Interactive communication channels with practitioners to promote understanding of the project

2.5 Scope

This project will cover the opportunities and required infrastructure to establish career development and recognition in the UK health market only.

2.5.1 Out of scope

This project will work alongside the ODG project on Advanced Clinical Practice, but will not in itself work on definitions of advanced practice, other than in areas which the other programme is not covering (but which may be relevant to career development). For example, there may be career streams for academics, or practice building and development, which may not be subject to review by the Advanced Practice programme.

2.6 Constraints and risks

2.6.1 Constraints

- 1. BOA will need to recruit a full time project manager to work on this and other ODG programmes
- Interactive communication channels need to be improved. In the meantime, we will
 need to coordinate best usage across our various journals, online channels, and in
 particular network and regional society meetings so that consistent approaches and
 messages are used
- 3. This project needs to integrate into the milestones and timescales for the Advanced Clinical Practice project

2.6.2 Risks

One major risk to this project lies in the speed/efficiency at which we can agree on the project terms, and get agreement to the various milestones and outcomes of the project as it proceeds, not just across the ODG members, but within individual organisations belonging to the stakeholder groups.

Methods of mitigation could include better use of videoconferencing to allow for quicker meeting setups, and perhaps ensuring the project manager has enough time allocated to be able to prepare paperwork and elicit agreements on positions and policies in advance of key meetings, across all parties.

The second major risk is that the career development recommendations are not seen by practitioners as relevant or beneficial. The mitigation strategy will centre on continual engagement with practitioner groups throughout this programme, so that frequent soundings on the progress of the project are built into on-going considerations at each stage. We should also take care to make the programme relevant to the broad range of career interests of osteopaths.

3 Project methodology

- 1. Research and map current career pathways in osteopathy using desk and original research with practitioners
- 2. Research practitioner needs/interest in relation to a defined career structure for osteopathy
- 3. Review possible models from other professions and identify key measures that might be introduced
- 4. Evaluate the likely impact of these measures including risk/benefit assessment
- 5. Construct a model programme for a establishing a defined career structure for osteopathy
- 6. Consult with practitioners, key stakeholders and external employers, modify as necessary
- 7. Conduct feasibility and impact assessment of putting this programme into practice
- 8. Prepare implementation plan

4 Business case

4.1 Rationale and strategic fit

Creating a clear career development pathway that is linked to professional or commercial reward could help osteopaths understand how best to develop their careers aligned with their own strengths and interests. The framework which is developed may also make it easier to determine skills fit with employers and commissioners, such as the NHS, insurers, and prime health contractors.

Working alongside the other ODG projects, this will lead to a higher performance and more focussed profession, which should ultimately benefit patient care, patient demand and consequently the market for osteopathy.

4.2 Timescale

Around 28-30 months after project initiation.

5 Project approach

5.1 High-level deliverables

Project phase	High level deliverables	
1 -3	Research summary	
4	Evaluation report	
5	Model career structure	
6	Consultation report	
7	Feasibility study	
8	Implementation plan	

5.2 Project milestones

Deliverable	Phase	Milestone elapsed time
Phase 1-3 research	1	+6 months
First draft evaluation report	4	+1 month
Liaise with Advanced Practice project	5	+1 month
Draft and agree consultation first draft	5	+2 months
Consult with practitioners	6	+6 months
Evaluate and modify consultation second draft	6	+3 months
Feasibility study and ODG signoff	7	+3 months
Implementation plan	8	+4 months