

Revalidation round-up

The monthly e-bulletin for osteopaths participating in the pilot

THURSDAY 22 DECEMBER

In this issue

- [Feeding back to KPMG](#)
- [Clinical audit](#)
- [Questions for Caitrian](#)
- -

Quick links

Revalidation Pilot Participation Manual

The Manual contains guidelines and templates to help you generate your four pieces of evidence for the purposes of the pilot. Completed examples are also included so you can see how each template might look when finished.

The Manual is available to view [here](#).

CPD Discussion Document

Revalidation and continuing professional development (CPD) are closely related. Is the current CPD scheme fit for purpose? Should there be changes to the CPD cycle and the required hours?

The [CPD Discussion Document](#) considers the purpose and aims of the current scheme, its effectiveness and possible options for change. If you have a view on how to take the scheme forward, please take a look at the [discussion document](#) and [response form](#) available on

Feeding back to KPMG

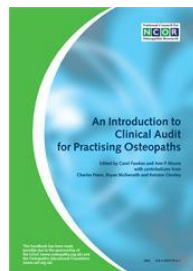
As part of their independent evaluation and impact assessment of revalidation, KPMG are asking you to complete a survey on your experiences of gathering your first piece of evidence. The survey asks you about the tools you used to collect the evidence, how long this took you, and whether there were any benefits to your practice.

KPMG will email you in early January, providing a link to their survey. The online survey is a quick and easy way of feeding back to KPMG and means that your answers can be in-putted directly onto a database from the website. If you have requested a hard copy, this will be posted out to you along with a freepost envelope, to be returned directly to KPMG.

You will be able to complete the survey between **9 and 20 January 2012**; all views will be anonymised before the findings are passed on to the GOsC. If you have not received an email or letter from KPMG by 11 January, please let us know as soon as possible.

There are just **four weeks** to go before the survey window closes so please do start thinking about what you would like to feed back to KPMG.

Clinical audit



our website.

For further information on the document, contact the Professional Standards Department on 020 7357 6655 ext 235 or email: cpd@osteopathy.org.uk.

Accessing Moodle

Since our last e-bulletin, we have seen a rise in the number of pilot participants registering with the site, which means that there are even more contacts for you share your experiences with and ask questions.

To access [Moodle](#), you will need to enter your GOsC registration number in the 'username' field. You will also need to enter your password, which you were sent in September. If you have forgotten your password, please contact the Professional Standards team on 020 7357 6655 ext 235 or email revalidation@osteopathy.org.uk.

FORWARD TO A FRIEND

UNSUBSCRIBE

Carol Fawkes, NCOR Research Development Officer and pilot participant, has heard from a number of you with regard to clinical audit. Here, Carol shares some of your thoughts with us.

Several osteopaths have commented that being able to conduct a clinical audit will be a very useful skill, irrespective of the demands of the revalidation pilot.

However, some have queried where the topics for clinical audit will arise. One of the strengths of clinical audit is that it is entirely the choice of the individual practitioner. It is simply about identifying a topic that interests you, is likely to have an impact on your practice, and/or will identify relevant CPD opportunities for you in the future.

With regard to auditing aspects of practice that relate to patient management, others have asked about sample size – what is the ideal number of patients needed for a clinical audit? A general guide is to use a minimum of 50 patients, but this will also depend on the size of your practice.

Further information on how to start and conduct a clinical audit is available on the [o_zone](#). All clinical audit templates are now available on [Moodle](#).

Questions for Caitrian



Caitrian Guthrie, Assessment Expert, is on hand to answer your questions.

This month, most of the queries we've received have related to objective evidence – either patient feedback, peer feedback or clinical audit.

One query, from Iqbal Hussein, was about peer feedback and how many questionnaires he would need from colleagues. He noted that although some of his peers would be able to comment on some

aspects of his practice, there would be other aspects of his practice about which they would be unable to offer comment. Iqbal wondered if this was ok.

In response to Iqbal, we explained that for the purpose of the pilot we have not set a required number of completed multi-source feedback questionnaires. In other professional environments, however, this number can range from 5 to 20 across a range of sources.

The purpose of the pilot is to collect data that tells us what works best in the osteopathic setting. So, when completing your mapping grid, tell us how many completed questionnaires you believe served to demonstrate the criteria in question, and why. There may be a range of reasons why you believe this could be adequately achieved with more – or fewer – completed questionnaires. Your experience and feedback is important here.

It's important too that this experience seems useful to you. For example, you may find it informative to seek peer feedback on your interaction with a wide cross-section of your patients, perhaps using a variety of techniques and presenting symptoms – but obviously this has to be balanced with the practicalities, size and nature of your practice. And, of course, if anyone is directly observing your practice, be sure this is only ever with your patient's consent.



[View it in your browser](#)

[Unsubscribe](#)