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# Continuing fitness to practise in UK osteopathy

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General  
Osteopathic  
Council

# The UK osteopathic context

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- c.4,500 practising osteopaths
- Largely independent rather than NHS (c.90%)
- Low risk and high patient satisfaction
- Little clinical governance/documentated practice
- High levels of autonomy/professional isolation
- Few teams/employers and related support structures



# Current situation

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- Annual re-registration process
- Declaration of good health and good character
- Continuing professional development requirement – 30 hours of which 15 must be ‘learning with others’
- Proof of indemnity insurance
- Payment of GOsC fee



# What others say

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- ‘The current standard for re-registration – completing 450 hours of practice and 35 hours of professional development – is wholly inadequate, as this tells patients and the public nothing about the quality of [nursing and midwifery] practice undertaken by the registrant’
- ‘Compliance with continuing professional development requirements is not in itself a demonstration of continuing fitness to practise’



# Where have we got to?

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- Developed and consulted on a draft revalidation scheme
- Conducted a year-long revalidation pilot
- Developed and consulted on a CPD Discussion Document analysing our current scheme and looking at options for change
- October 2013 – adopted a draft framework for continuing fitness to practise and commenced initial engagement



# Revalidation pilot outcomes

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- + High awareness of the Standards
- + 74% of participants reflected more on areas of clinical practice
- + 37% to 44% of practitioners changed the way that they practised as a result of using a pilot tool
- Complexity
- Time requirements
- Communication with osteopaths
- Challenge for osteopaths in adequately demonstrating analysis and reflection



# A new single CfP framework

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- A three year 90 hour CPD cycle:
  - 30 hours of CPD and 15 hours learning with others declared annually
  - Within the three years CPD activities must have been completed in each of the four domains of the Osteopathic Practice Standards
  - All osteopaths will need to undertake at least one defined activity that focuses on consent and communication
- An objective feedback and analysis activity at the start of the cycle:
  - Patient feedback
  - Clinical audit
  - Peer discussion (including patient notes)
  - Case based discussion (including patient notes)



# Peer discussion review

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At the end of each three year cycle, a peer discussion review, undertaken:

- By a professional colleague (either an osteopath or other healthcare professional)
- Within arrangements put in place by:
  - An employer
  - An osteopathic educational institution
  - A regional society or group
  - A postgraduate CPD provider
- By the GOsC



# Principle of engagement

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- Expectation that osteopaths will engage with the process
  - Undertaking the required elements
  - Interacting with others
  - Demonstrating positive response to feedback
- Not a pass/fail for those who engage – removal possible for non-compliance (as with current CPD)
- Assumption that a formative approach is more likely to improve quality and safety than a pass/fail test



# Challenges

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- Meeting political/government expectations
- Meeting patient expectations
- ‘Change management’ – including institutional and individual capacity building and training
- Developing appropriate QA mechanisms
- ...But an ultimate prize of a more engaged, reflective and effective profession

