



OSEAN Standard
for the Management of
Osteopathic Educational Providers (EP)

To be included in or applied in conjunction with the CEN standard on osteopathy

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1. General management requirements

- 1.01 A commitment to this Standard shall be demonstrated at the highest level of leadership within the educational provider (EP).
- 1.02 The EP shall establish and document a management system and ensure that it is understood, implemented, maintained and reviewed. The EP shall designate a member of the management team to be responsible for the management system.
- 1.03 The EP's application of and compliance with the requirements of this Standard shall be documented. These documents shall be accessible to all relevant personnel. Procedures shall be established to ensure the transparency, accuracy, relevance, circulation and security of the documentation.
- 1.04 The EP shall establish procedures for retaining records for a period consistent with its contractual and legal obligations. Access to these records shall be consistent with the confidentiality arrangements established by the EP.

2. Strategy and business management

- 2.01 In implementing this Standard, the EP shall draw up and document a business plan according to generally accepted business planning practices as indicated in Annex A (informative). The business plan shall include a strategy and business objectives, and a description of management structures, key processes, and the EP's quality policy.
- 2.02 The business plan shall include key performance indicators as indicated in Annex D (informative).

3. Management review

- 3.01 The EP shall establish procedures to review its management system at planned intervals to ensure its continuing suitability, adequacy and effectiveness, including the stated policies and objectives related to the fulfilment of this Standard. These reviews shall be conducted at intervals appropriate to the context.
- 3.02 The inputs to the management review shall include information as indicated in Annex B (informative).

4. Preventive actions and corrective actions

- 4.01 The EP shall establish procedures for identifying and managing nonconformities in the management system.

- 4.02 The EP shall also, where necessary, take actions to eliminate the causes of nonconformities in order to prevent recurrence. Preventive actions shall be sufficient to eliminate the causes of potential nonconformities. Corrective actions shall be appropriate to the impact of the problems encountered. In both cases, the procedures shall be as indicated in ANNEX C (informative).

5. Financial management and risk management

- 5.01 The EP shall have in place and document:
- a) an appropriate financial management system;
 - b) a system for identifying, assessing and managing risk.
- 5.02 The EP shall provide insurance coverage for staff, students and patients during lectures and clinical hours, where applicable.

6. Legal and contractual matters

- 6.01 The EP shall be a legal entity, or a defined part of a legal entity, such that the legal entity can be held legally responsible for all its activities.
- 6.02 The EP shall identify and collect all legal and other normative documents relevant for its activities.
- 6.03 All legal and normative documents shall be updated on a regular basis and made available to the employees.
- 6.04 The EP shall have a legally enforceable agreement for the provision of osteopathic education and training with each student. These agreements shall take into account the responsibilities of the EP and its students.

7. Accreditation or validation

- 7.01 The EP shall fulfil one of the following criteria:
- The EP is accredited nationally as a higher education institution, or
 - has at least one of its programmes validated by an accredited university leading to an academic degree, or
 - is able to demonstrate that accreditation or validation are actively pursued.
- 7.02 The EP shall provide the minimum standard of osteopathic education to allow the graduated student to enrol in the national osteopathic register, if such a register exists and represents the majority of osteopaths in the country.

8. Range of programmes

- 8.01 The EP shall offer one or more programmes leading to academic or professional degrees with defined goals.
- 8.02 The EP should participate in national or international exchanges of students, teaching and academic staff.
- 8.03 An EP that is offering a Type 1 AND a Type 2 programme (according to WHO benchmarks on osteopathy) shall clearly distinguish those 2 programmes in its organisation and external communication.

9. Research

- 9.01 The EP shall draw up a research strategy that is monitored and updated in regular intervals.
- 9.02 The EP shall ensure that current scientific findings are integrated into its teaching practices.
- 9.03 The EP should have a research budget that allows for professional research beyond students' projects.

10. Academic staff

- 10.01 The procedures for selecting, appointing, and promoting academic staff shall be regulated and made public. For teaching staff, these procedures consider both teaching skills and scientific qualifications.
- 10.02 The EP shall specify minimum requirements for the continuing education of its academic staff with respect to both teaching skills and subject knowledge.
- 10.03 The EP should pursue a long-range policy of promoting upcoming young academics.

11. Administrative and technical staff

- 11.01 The EP shall ensure that its staff and associates have the core competencies needed to carry out the processes outlined in this standard, and that these competencies are maintained.
- 11.02 The LSP should provide job descriptions that refer to the core competencies required.

12. Students

- 12.01 The conditions and procedures for admission to the EP's range of programmes shall be declared and substantiated.
- 12.02 The EP shall indicate clearly the students' fees for all programmes and for any additional services that are offered.
- 12.03 The EP shall observe the development of students' achievements and the duration of study.
- 12.04 The EP shall ensure that students have access to counselling and guidance services.

- 12.05 The ratio of students to staff shall be adequate to ensure that the educational goals of the EP and its organisational units can be achieved. For practical skills lectures this ratio should not exceed 10:1, in clinical teaching the patient-per-tutor-ratio should not exceed a 3:1.
- 12.06 The EP shall establish policies regarding students' safety and the protection of students' data according to national law.

13. Stakeholder feedback

- 13.01 The LSP shall have in place and utilise systems for gathering feedback from stakeholders on the learning services provided, and for analysing, responding to, and, where appropriate, acting upon it.
- 13.02 The LSP shall have in place a system for handling complaints and appeals, and make this known to its stakeholders.

14. Infrastructure

- 14.01 The EP shall provide an infrastructure adequate to fulfil its medium and long-range objectives.
- 14.02 The facilities offered to the students shall include a secretariat, a library and internet access.

15. Cooperation

- 15.01 The EP shall establish successful relationships on the national and international level. It shall promote cooperation with other academic EPs, the professional environment, and relevant stakeholders in society.

16. Compliance with CEN standard

- 16.01 The EP shall comply with the requirements of the CEN standard (future EN 16686) on osteopathic healthcare provision.

Annex A

(informative)

Business plan content

A business plan usually covers the following areas:

- a) vision and mission: the EP documents its vision and mission, and how it supports the value of learning and the fair treatment of its stakeholders.
- b) development and regular assessment of strategy: the EP specifies its strategy and the revision period, and demonstrates that these periodic reviews are conducted.
- c) quality policy: the EP documents its quality and quality control policy.
- d) business and quality objectives: the EP
 - 1) documents its business objectives
 - 2) records actual implementation of improvement projects within the organization including timeframes.
 - 3) specifies measurable and verifiable objectives for improvement projects within the organization, linking them to its quality policy.
- e) market analysis: the EP periodically reviews and documents the demand for its services
- f) organizational and operational structure, including business areas and co-operations: the EP documents its organizational structure and ensures that this structure is communicated to all staff members and associates.
- g) identification and design of key processes: The EP provides evidence of the design of key processes including needs analyses, design, delivery and evaluation.
- h) associates: The EP plans and documents how the EP integrates the associates into their work.

Annex B

(informative)

Information for management system reviews

The information required for management system reviews should include:

- a) the results of internal and external audits;
- b) feedback from stakeholders related to compliance with this Standard;
- c) the status of preventive and corrective actions;
- d) follow-up actions from previous management reviews;
- e) the fulfilment of objectives;
- f) any changes that could affect the management system,
- g) any appeals and complaints, and the handling of them;
- h) identification and resolution of any nonconformities in its management system.

The management review should lead to decisions and actions about:

- i) improving the effectiveness of the management system and its processes;
- j) improving the certification of compliance with this Standard; and
- k) resource needs.

Annex C

(informative)

Preventive and corrective actions

Preventive and corrective actions include:

- a) identifying nonconformities in the management system;
- b) determining the causes of nonconformity;
- c) preventing and/or correcting nonconformities;
- d) evaluating the need for actions to ensure that nonconformities do not recur;
- e) determining and implementing in a timely manner, the actions needed;
- f) recording the results of actions taken, and
- g) reviewing the effectiveness of corrective actions taken.

Annex D

(informative)

Key performance indicators (KPI)

Key performance indicators in an osteopathic education provider typically include the following:

Finances

- a) Administration spending per student
- b) Teaching staff spending per student
- c) Departments exceeding budget
- d) Expenses for extracurricular activities

Students

- e) Student intake number
- f) Student retention rate
- g) Student grades
- h) Student graduation rate
- i) Student satisfaction
- j) Average study duration

Staff

- k) Average salary of administrative and teaching staff
- l) Job satisfaction of administrative and teaching staff
- m) Staff turnover rate

Research

- n) Number of publications
- o) Research budget

Infrastructure

- p) Cost of maintainance

Cooperations

- q) Number of active cooperations
- r) Student and staff mobility