Perceptions of preparedness of chiropractic graduates for practice
2017 Executive Summary

The General Chiropractic Council (GCC) commissioned Pye Tait Consulting to undertake a study and evaluation of the preparedness of chiropractic graduates for practice. The findings were reported upon in September 2017 and are based on views received from (number of respondents in brackets):

- Employers and colleagues working with new registrants (140)
- Newly qualified chiropractic practitioners or NQPs (60)
- Final year students (31)

**PURPOSE**

To evaluate:

- the extent to which individuals who complete a recognised chiropractic degree programme are perceived, and perceive themselves to be prepared for practice including meeting the GCC’s Code and Standards.

- the support available and perceptions of the usefulness of this support in helping the important transition from student to newly qualified chiropractic practitioner.

**METHOD**

This short research study began by reviewing literature available on preparedness in order to identify typical methods of design and topics. Similar studies conducted in comparable sectors were identified and their thematic* approach adapted to chiropractic.

The research comprised stakeholder and provider interviews (10), and online surveys for employers/colleagues, newly qualified practitioners and final year students (3).

Follow-up interviews with the Royal College of Chiropractors (RCC) employers (20) examined newly qualified practitioners in the handling of patients and the voluntary Post Registration Training (PRT) available to new graduates on successful completion of a chiropractic degree programme.

(* ) Five main themes, with similarly worded-questions emerged and allowed for comparison of perceptions from employers, newly qualified practitioners and final year students. The themes were:

1. clinical knowledge and skills;
2. levels of confidence in applying those skills;
3. the degree programme in preparation for practice;
4. entrepreneurial and business skills;
5. the transition phase in terms of support from student to newly qualified practitioner.

Application of the GCC’s Code of Conduct was also explored with employers and newly qualified practitioners.
Firstly, we asked what is involved in being prepared for practice? Common views by respondent group are set out below.

**Employers:** patient care and good communication, clinical skills and business skills; developing oneself, being able to learn from mistakes.

**Newly qualified practitioners:** patient care/management, patient safety, confidence, communication, being able to diagnose, knowing when to treat/refer.

**Final year students:** being safe and competent in practice, some mentioned having confidence and others referred to clinical practice and experience.

How well are graduates prepared for practice?

Around 64% of surveyed employers feel new registrants are either very well or sufficiently prepared for practice.

Around 84% of newly qualified practitioners feel they were very well or sufficiently prepared for practice when they started in their first job as a new registrant.

Benefits of employing newly qualified practitioners

Overwhelmingly employers were positive and endorsed the pipeline of new talent.

“Fresh knowledge, fresh research, enthusiasm and a willingness to learn. Cost effective practitioner”.

Key themes in being prepared according to employers, NQPs and students:

**Patient care** including good communication

**Business skills** as well as clinical

**Actively developing oneself** visiting different chiropractors; asking for help; practice and learning from mistakes.

“you can never really be prepared when you first graduate. it takes time and experience. You will learn from mistakes as time goes on. You leave with good knowledge, but often it can be difficult to translate this knowledge well in(to) working practice” (newly qualified practitioner)

“Confident enough not to harm the patient, humble enough to know that we aren’t the finished product” (newly qualified practitioner)
Employers feel new registrants are sufficiently prepared in:

- ‘soft’ skills: handling paperwork, own personal development and understanding confidentiality.

Newly qualified practitioners gave their views on what might help being better prepared

- More practice exposure to technique, exposure to more acute cases. Adjusting practise, more constructive environment in university.
- Being free to discuss - communicating chiropractic and being able to observe other chiropractors in all styles and settings.
- Improving communication skills: particularly with how to talk to the patient.

1. Clinical skills and knowledge preparedness

Employers rated employees’ level of preparedness for practice, whilst newly qualified practitioners and students rated their own, from a common list of 14 competences - from 1 (not at all prepared) to 10 (very well prepared):

Most prepared (top 3) – clinical skills/knowledge:

<table>
<thead>
<tr>
<th>Employers</th>
<th>Newly qualified practitioners</th>
<th>Final Year Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>How to obtain consent from a patient</td>
<td>How to obtain consent from a patient</td>
<td>How to obtain consent from a patient</td>
</tr>
<tr>
<td>8.1</td>
<td>9.3</td>
<td>9.0</td>
</tr>
<tr>
<td>Taking a patient’s history</td>
<td>Being able to assess a patient’s capacity to make a decision</td>
<td>Taking a patient's history</td>
</tr>
<tr>
<td>8.0</td>
<td>8.7</td>
<td>8.8</td>
</tr>
<tr>
<td>Completing a physical examination of a patient</td>
<td>Taking a patient’s history</td>
<td>How to maintain and protect patient information</td>
</tr>
<tr>
<td>7.9</td>
<td>8.6</td>
<td>8.5</td>
</tr>
</tbody>
</table>

Least prepared (bottom 3) – clinical skills/knowledge

<table>
<thead>
<tr>
<th>Employers</th>
<th>Newly qualified practitioners</th>
<th>Final Year Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowing when and how to make referrals</td>
<td>Knowing when and how to make referrals</td>
<td>Legislation relating to chiropractic care</td>
</tr>
<tr>
<td>6.3</td>
<td>7.3</td>
<td>7.6</td>
</tr>
<tr>
<td>Developing and documenting a plan of care</td>
<td>Developing and documenting a plan of care</td>
<td>Developing and documenting a plan of care</td>
</tr>
<tr>
<td>6.0</td>
<td>6.7</td>
<td>7.5</td>
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<tr>
<td>Applying therapeutic psychomotor and condition management</td>
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<td>Applying therapeutic psychomotor and condition management</td>
</tr>
<tr>
<td>5.9</td>
<td>6.0</td>
<td>6.8</td>
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</table>
Regardless of whether employers currently employ or work with a new registrant or not skills they commonly feel new registrants are least prepared in are:

- ‘applying therapeutic psychomotor and condition management’
- ‘developing and documenting a plan of care’

58% of employers highlighted additional areas in which they believe new registrants are poorly prepared

Employers also cited technical skills as an area which they believe new registrants are insufficiently prepared:

45% of these mentioned communication (in general or with patients)

Examples are: the ability to prepare treatment schedules; interpreting x-rays and using a variety of techniques including adjusting skills.

2. **Levels of confidence: (1 to 5)**

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<th>Employers</th>
<th>Newly qualified practitioners</th>
<th>Final Year Students</th>
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<tbody>
<tr>
<td>Highest for ‘applying clinical skills’</td>
<td>Highest for ‘applying clinical skills’</td>
<td>Highest for ‘communicating with patients’</td>
</tr>
<tr>
<td>3.7</td>
<td>4</td>
<td>4.45</td>
</tr>
<tr>
<td>Lowest for ‘understanding the work environment’</td>
<td>And ‘communicating with patients’</td>
<td>And ‘team working’</td>
</tr>
<tr>
<td>3.1</td>
<td>4</td>
<td>4.22</td>
</tr>
<tr>
<td>And, ‘communicating with patients’</td>
<td></td>
<td></td>
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<tr>
<td>3.2</td>
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### 3. Degree course preparations for practice and some limitations

<table>
<thead>
<tr>
<th>Employers</th>
<th>Newly qualified practitioners</th>
<th>Final Year Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agree or strongly agree</td>
<td>Agree or strongly agree</td>
<td>Agree or strongly agree</td>
</tr>
<tr>
<td>new registrants are prepared with clinical knowledge</td>
<td>the degree provided them with knowledge of addressing patient safety</td>
<td>the degree will provide the requisite clinical knowledge</td>
</tr>
<tr>
<td><img src="image" alt="85%" /></td>
<td><img src="image" alt="100%" /></td>
<td><img src="image" alt="94%" /></td>
</tr>
<tr>
<td>new registrants are prepared for addressing patient safety</td>
<td>the degree allowed them to develop good interpersonal/communication skills</td>
<td>the degree will have developed their professional skills</td>
</tr>
<tr>
<td><img src="image" alt="87%" /></td>
<td><img src="image" alt="90%" /></td>
<td><img src="image" alt="90%" /></td>
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<tr>
<td>the degree allowed new entrants to ‘develop good interpersonal and communication skills’</td>
<td>the degree provides the requisite clinical knowledge</td>
<td>the degree will have allowed them to develop ‘good interpersonal/communication skills’</td>
</tr>
<tr>
<td><img src="image" alt="33%" /></td>
<td><img src="image" alt="92%" /></td>
<td><img src="image" alt="87%" /></td>
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85% of employers agree new registrants are prepared with clinical knowledge and addressing patient safety (87%). While 33% of employers agree that the degree course ‘allowed them to develop good interpersonal and communication skills’, 27% disagree.

Newly qualified practitioners agree or strongly agree that the degree provided the requisite clinical knowledge (92%) and believe the degree allowed them to develop good interpersonal/communication skills (90%).
Potential course content improvements cited by a small number of:

- EMPLOYERS: areas of improvement
  - Nutrition;
  - Planning management of care;
  - Insufficient emphasis on ‘real world’ practice, as opposed to the college/university environment;
  - Examination techniques: new registrants demonstrate poor physical examination skills, often do not corroborate findings or suspicions or provide a full explanation of findings to patients.

- NEWLY QUALIFIED PRACTITIONERS: wished they had learned more about:
  - Identifying psychosocial issues with patients;
  - Managing other chiropractors and managers/practice management skills;
  - Technique skills: Yellow flags/red flags, differential diagnosis considerations;
  - Management of people in acute pain;
  - GCC regulations/legal side;
  - Functional rehabilitation;
  - Diagnostics;
  - Ethical treatment of patients.

- FINAL YEAR STUDENTS: wish to learn more about:
  - Patient handling/patient communication and safety/developing a good rapport;
  - Acting as a professional individual to patients and moving to a new stage of development;
  - Adjusting technique and treatment techniques;
  - Home exercise and self-care;
  - Running a business and record keeping.

4. Preparedness for practice in Business skills/Entrepreneurship

Employers rated newly qualified practitioners in terms of a range of business skills:

56% strongly agree or agree that newly qualified practitioners are good at patient care.

In terms of business skills, fewer than 13% of employers agree that newly qualified practitioners exhibit good skills in marketplace awareness, business development, strategic and ongoing developments and managing budgets.
Areas where employers mention newly qualified practitioners are performing well in are: working out earnings, social media and marketing, communication and enthusiasm to learn.

Considering their business/entrepreneurship skills: newly qualified chiropractors say they feel strongest in cross cutting skills such as:
  - marketing,
  - business development,
  - organisation,
  - sales,
  - networking,
  - financial and communication/building rapport.

5. Transition Phase

91% of employers feel mentoring is the most appropriate way to help newly qualified practitioners with transition into practice.

88% newly qualified practitioners chose mentoring followed by shadowing (81%) as the most useful forms of support

94% of final year student respondents chose mentoring as the most useful form of support followed by ....

working in group practice and multi-disciplinary environments (81%)
6. **Recommendations**

In summary, the recommendations relate to the following broad areas:

1. **Repeating the research to measure progress**

   Repeat the research to measure change and contrast responses across target audiences, supplementing the survey research with student focus groups for qualitative detail.

   Extend and explore the scope of future research to include investigation of challenging situations and communication skills.

2. **Consider a mandatory postgraduate training scheme (subject to legislative change)**

   Consider building on the existing PRT as a mandatory training scheme for all newly qualified practitioners, recognising this would be subject to legislative change. Provide guidance to employers/registrants on mentoring practice and other areas of good practice to support the transition.

3. **Developing newly qualified practitioners’ communication skills**

   Increase the number of work placement, mentoring and role-playing opportunities by which graduates can further develop vital communication skills.

4. **Ensuring that the course content sufficiently covers key patient-centred skills**

   This includes those areas identified as weakest in newly-qualified practitioners: when and how to make referrals; developing and documenting a plan of care; applying therapeutic psychomotor and condition management and legislation relating to chiropractic care.

5. **Continuing Professional Development (CPD)**

   Widen opportunities for, and encourage greater take-up amongst newly qualified practitioners of mentoring, shadowing and other forms of development to broaden experience, including CPD and PRT.