



GENERAL OSTEOPATHIC COUNCIL
[GOsC]

CORPORATE PLAN FY 2004-05/06/07



FOREWORD

1. The General Osteopathic Council (GOsC) was established by an Act of Parliament (The Osteopaths Act) on 1st July 1993, to regulate, develop and promote the osteopathic profession for the greater protection and benefit of patients and the public. A Council designate (Board) was appointed by the Privy Council in 1996 to prepare the first business plan and to obtain required funding. The first member of staff (the Chief Executive and Registrar) was appointed on 1st April 1997.
 2. Today the GOsC comprises of:
 - a. a 24 person Board,
 - b. four statutory committees: Education, Health, Investigation, and Professional Conduct,
 - c. seven non-statutory committees: Audit, Communications, Finance and General Purposes, International Affairs, Practice and Ethics, Remuneration and Section 32 (the section of the Act that protects the osteopathic title)
 - d. an operating structure with five sections: Secretariat, Communications, Development, Legal Affairs and Registration,
 3. During its existence, the Organisation has achieved positive results in all areas of its statutory mandate. The Organisation has evolved through transitory and consolidation phases and is now a forward thinking regulator, which places increased importance on risk analysis, corporate governance and proactive management of its core and regulatory roles.
 4. The Corporate Plan of the General Osteopathic Council, covering the three years 2004-2007, is based on the strategic priorities agreed by the Board on 18 December 2003. Key objectives and activities underpin these priorities and make up the Business Plan. Further information is shown in section 1, STRATEGIC CONSIDERATIONS.
- N.B.** *It should be noted that in this Plan, the term **Organisation** is used to refer to the entire corporate entity known as the General Osteopathic Council (i.e. both the staff members of the GOsC and the Board). The term **Board** is used in reference to the 24 members of the Board appointed and elected to direct the Organisation's activities.*



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1. STRATEGIC CONSIDERATIONS

Key Role and Mission Statement

- 1.** The Organisation's Statutory Role, set out in the Osteopaths Act 1993, is

“... to provide for the regulation of the profession of osteopathy, including making provision as to the registration of osteopaths and as to their professional education and conduct; to make provision in connection with the development and promotion of the profession; and for connected purposes.”

[1st July 1993]

- 2.** This broad-based and all-encompassing role can be distilled to produce two over-arching goals for the Organisation:

- a.** to ensure the integrity and development of the profession, and
- b.** to position osteopathy as an integral part of the nation's health care system.

- 3.** Its Mission Statement falling from its role and goals is:

To regulate, develop and promote osteopathy, for the protection and benefit of patients and the public, as a safe and effective form of primary health care.



Strategic Priorities

- 4.** On 15 December 2005, the Board reviewed its 11 strategic priorities originally agreed on 18 December 2003. The priorities incorporate, and are over and above, its core duties. It is not envisaged that these priorities will change during the life of the Plan, but they will be re-evaluated by the Board before the next plan is introduced. In essence the 11 strategic priorities are that Council should continue to:
- a.** fulfil its mandate by “commanding the support of the profession and the public”,
 - b.** “develop effective and active communications with key stakeholders”,
 - c.** “work toward a system of mainly web-based communications with registrants”,
 - d.** “increase its knowledge of the market for osteopathy across the U.K.”,
 - e.** “facilitate widening participation in pre-registration osteopathic education”,
 - f.** “strengthen the pre-registration educational process”,
 - g.** “ensure its visibility internationally”,
 - h.** develop “a robust evidence base for practice”,
 - i.** “expand meaningful public/lay involvement in all aspects of the Council’s work”,
 - j.** “increase awareness and understanding of the nature of osteopathic care and treatment”, and
 - k.** “remain abreast of, and contribute to, developments in healthcare regulation”.



Key Objectives

- 5.** The Organisation's key statutory objectives are reflected in the activities of its five Sections:
 - a.** To manage the Organisation both operationally and financially (Secretariat).
 - b.** To communicate with and promote the profession of osteopathy (Communications Section).
 - c.** To develop safety and competence through the enforcement of standards of proficiency (Development Section).
 - d.** To ensure practitioners are fit to practise by regulating the practice of osteopathy (Fitness to Practise Section).
 - e.** To maintain a definitive register of those who may lawfully practise (Registration Section).

- 6.** These objectives have been further refined to reflect the scope of work of individual Sections and form the key Objectives for FY 2004-05/06/07. The following paragraphs give this detail.



7. Key objectives of the Secretariat Section	Focus of Work
<p>a. To manage the GOsC and to hold responsibility for all financial and facility controls, human resources, management information systems, and adherence to the spirit of the Act.</p>	<ul style="list-style-type: none"> • Manage GOsC on both a day-to-day and long-term basis, including the identification and development of policy, ensuring good practice in all of the Organisation’s undertakings. • The annual audit and related financial functions. • The annual report and accounts. • Management Information Systems. • Facilities management.
<p>b. To ensure that the organisation is compliant with applicable legislation and best practice.</p>	<ul style="list-style-type: none"> • Review the Osteopath Act and Rules of 1993. • CPD Rules. • Freedom of Information (FOI) Act. • Other relevant legislation and consultations. • Judicial reviews (JR).
<p>c. To enhance the organisation’s effectiveness and relevancy within the healthcare arena.</p>	<ul style="list-style-type: none"> • The regular “health” check. • Adherence to the strategic vision which positions GOsC as an effective and relevant regulator . • CHRE Performance Review.
<p>d. To ensure that the GOsC Board has the necessary tools to enable it to operate efficiently, in the public’s interest and to satisfy its governance requirements.</p>	<ul style="list-style-type: none"> • Ensure that Board operations are based on the five principles of good regulation and an enforceable Code of Conduct. • Organise and service GOsC Committees.



8. Key objectives of the Communications Section	Focus of Work
<p>a. To promote and increase awareness of the osteopathic profession.</p>	<ul style="list-style-type: none"> • GOsC Osteopathic Data Collection exercise. • Public/Patient Involvement strategy (PPI). • Production and distribution of high quality and technically -advanced communications and promotional material. • National conference exhibitions: Representing the osteopathic profession at major national conference exhibitions. • National Council for Osteopathic Research (NCOR) collaboration and International Journal of osteopathic Medicine (IJOM) formerly JOM. • Maintain and enhance the Osteopathic Information Service (OIS). • OIS publicity material ordering service. • Communications Committee.
<p>b. To promote best practice by providing communications support to the osteopathic profession and enhancing two-way communications and partnership activities.</p>	<ul style="list-style-type: none"> • The Osteopath magazine: Production of 10 issues of The Osteopath magazine per year. Distribution to all UK-registered Osteopaths, Osteopathic Education Institutions, final-year osteopathy students, and selected external audiences. • Regional Communications Network: Comprehensive network of regional osteopathic societies (currently 22 known societies) and representation across the UK and Ireland. Important in the introductory stages of mandatory CPD, the Regional Network also represents a practical mechanism for GOsC consultation with the profession. • GOsC Regional Conferences 2005. <p style="text-align: right;"><i>... cont/</i></p>



8. Key objectives of the Communications Section	Focus of Work
b. <i>To promote best practice by providing communications support to the osteopathic profession and enhancing two-way communications and partnership activities. ... cont/</i>	<ul style="list-style-type: none"> • Fitness to Practise Guidelines for Osteopaths. • CPD Guidelines for Osteopaths. • Promotional Training Workshops for osteopaths to assist and build relationships with GPs. • Undergraduate and graduate support: Annual programme of GOsC presentations to second and final year students of osteopathy to assist integration of new graduates into the profession. • NHS Working Group activities.
c. To increase web-based communications activities.	<ul style="list-style-type: none"> • Extensive further development of GOsC Internet capabilities.
d. To provide an effective media relations and public affairs function.	<ul style="list-style-type: none"> • GOsC press office / media activities. • GOsC Public Affairs campaign. • Public awareness raising strategy to support development of the profession. • GOsC Advertising / advertorial. <ul style="list-style-type: none"> – GOsC Corporate Advertising Schemes – External advertising • CC Working Groups.
e. To develop and effectively use international communications networks.	<ul style="list-style-type: none"> • International Affairs Committee. • Raise profile of GOsC and UK osteopathy in the international political arena.



9. Key objectives of the Development Section	Focus of Work
<p>a. To ensure continuing standards of competency in the osteopathic profession.</p>	<ul style="list-style-type: none"> • Recognised Qualification (RQ) process implementation and evaluation for pre-registration osteopathic education, and revision of the process. • Framework for osteopathic pre-registration education (this links with the Osteopathic Practice Framework). • “Osteopathic Practice Framework” for the profession (this links with the Framework for osteopathic pre-registration education). • The standard of clinical competence of practitioners registered or applying to be registered as osteopaths, including students. • Continuing Professional Development (CPD) scheme. • The Standard of Proficiency (S2K). • Revalidation for osteopaths. • Integrated Quality Enhancement Strategy for maintaining and improving osteopathic clinical practice standards at the pre- and post-registration stages. • Integrate key areas of work.
<p>b. To facilitate the establishment and maintenance of a comprehensive infrastructure to develop and support osteopathic research.</p>	<ul style="list-style-type: none"> • The National Council for Osteopathic Research (NCOR) and other research initiatives. • The international osteopathic research journal.
<p>c. To establish and maintain a pro-active presence in international osteopathic education.</p>	<ul style="list-style-type: none"> • International osteopathic education. • International higher education.



9. Key objectives of the Development Section	Focus of Work
<p>d. To position osteopathic education in the wider healthcare arena so as to ensure the place of osteopathy as a discrete healthcare profession.</p>	<ul style="list-style-type: none"> • A framework for osteopathic pre-registration education linking with a framework for osteopathic practice. • The position of GOsC in healthcare education and higher education arena. • An evidence base for osteopathy.
10. Key objectives of the Legal Affairs Section	Focus of Work
<p>a. To enhance and maintain high standards of conduct within the profession.</p>	<ul style="list-style-type: none"> • Code of Practice. • Practice and Ethics Guidance. • Fitness to Practise Report.
<p>b. To ensure a sound legal basis for the GOsC operations.</p>	<ul style="list-style-type: none"> • Legislative Review. • CPD Rules. • Responding to consultations. • Contracts. • Advise Council generally.
<p>c. To operate a fair and effective complaints handling process to protect members of the public and the reputation of the profession.</p>	<ul style="list-style-type: none"> • Develop GOsC fitness to practise procedures. • Operate fitness to practise procedures.
<p>d. To protect the osteopathic title (Section 32 of the Act).</p>	<ul style="list-style-type: none"> • Privately prosecute offenders. • Liaise with other authorities as appropriate.



11. Key objectives of the Registration Section:

Focus of Work

a. To maintain and enhance the GOsC Register.	<ul style="list-style-type: none">• The Register.• Production and publication of the Register.
b. To check all new applicants with The Criminal Records Bureau (CRB) and offer service to existing registrants.	<ul style="list-style-type: none">• The Criminal Records Bureau (CRB).
c. Increase knowledge and awareness of the GOsC within the Osteopathic Institutions and to undergraduates.	<ul style="list-style-type: none">• Familiarise osteopathic undergraduates with the work of the GOsC.
d. To promote Best Practice in registration issues.	<ul style="list-style-type: none">• To keep current with best practice within health care regulation.



2. CORPORATE GOVERNANCE

- 1.** The Board recognises that one of its critical roles is that of establishing and maintaining Corporate Governance within the Organisation. This can be defined as *'the act of governing; the exercising of authority'*. Corporate Governance is intrinsically linked to RISK ANALYSIS and PERFORMANCE MEASUREMENT. More information is available in sections 3 and 4 respectively.

- 2.** In essence, the key to good governance is:
 - a.** having the right leadership at Board and Executive level,
 - b.** ensuring the correct strategy and control procedures are in place, and
 - c.** sustaining the delivery of the Business Plan remit.

- 3.** The Board is committed to the continuing development of its governance standards. This is demonstrated by the establishment of an Audit Committee with a constitution requiring 50% of the membership to have no links with the Organisation, and also the co-option of independent lay members onto the remuneration and fitness to practise committees. This highlights the openness and transparency embraced by the Organisation.

- 4.** The Organisation is planning further expansion to the governance aspect of its work and is confident it has the necessary skills to meet the challenges ahead. Proposed activities include:
 - a.** the introduction of a governance handbook for Board Members.
 - b.** consideration of the appointment of independent internal auditors.



3. RISK MANAGEMENT

- 1.** Risk Management is an essential element of the Organisation's planning process, and a fundamental ingredient in the development of all work projects. A Risk Register has been implemented with the 'top' risks considered by the Board on 19 July 2005. Risk Management is a continuous process and mechanisms for review at Section level through to the Board have been established. The Organisation is committed to the continuous assessment of risk and participates keenly in an inter-regulatory forum on this matter.
- 2.** The Organisation also accepts that changing public attitudes, new technologies, new priorities and the more sophisticated way in which business is carried out dictate that a higher level of risk is inherent in work activities. The acknowledgement of these risks and how to analyse, prevent and or/monitor them is therefore integral to our thinking to help mitigate these new threats.
- 3.** In essence, the vital components of the Organisation's risk management strategy include:
 - a.** defining an issue,
 - b.** analysing the possible risks involved,
 - c.** listing the reasons for each possible risk,
 - d.** detailing the possible solutions for each identified cause,
 - e.** selecting the optimum course of action to mitigate the identified risk, and
 - f.** ensuring mechanisms are in place to review the status of existing risks and for detecting new risks.



4. PERFORMANCE MEASUREMENT

- 1.** The establishment of strategic priorities and key activities is not meaningful unless a robust system for performance measurement is in place. The Organisation is committed to adhering to such a system and developing it in line with best practice. Performance Measurement of the Organisation can currently be broken down into three key areas:
 - a.** Organisation Health Check (Internal),
 - b.** Council for Healthcare Regulatory Excellence [CHRE] Performance Review (External).
 - c.** Past Performance (Achievements against target dates and budget)

Organisation Health Check (Internal)

- 2.** This internal control enables the Organisation to assess whether it is achieving its remit in the most efficient and effective manner. The evaluation will be carried out by analysing organisational requirements, interviewing stakeholders and Board representatives and comparing actual results with those anticipated from the Business Plan. The outcome would be to complete a 'health card' which:
 - a.** defines success criteria,
 - b.** rates each Section against its plan requirements,
 - c.** identifies strengths and weaknesses, recommending any corrective actions.

Council for Healthcare Regulatory Excellence [CHRE] Performance Review (External)

- 3.** CHRE undertakes an annual performance review of all the statutory healthcare regulators. This process consists of a questionnaire followed by a meeting. The regulators have also agreed to work together to deliver three initiatives this year which demonstrates their ability to generate consistent good practice. In the spirit of openness and transparency the 2005 performance review report is annexed to the plan.



Past Performance (Achievements)

4. The Organisation is able to assess past performance by highlighting the positive achievements accomplished. Since 2004 the key achievements of the Organisation can be summarised as follows:

2004-2005

- Established Audit Committee with 50% external representation
- Total revision of the Osteopaths Act 1993 and the associated Rules
- Embedded risk management ethos and developed framework for risk management
- Co-option process for Fitness to Practise and Education committees resulted in the appointment of the first class members
- Launched public website
- Held 9 Regional conferences, consulting on CPD, achieving a 42% attendance rate from the osteopathic profession
- Facilitated delivery of NCOR strategic plan through Regional Conferences
- Developed and initiated the QAA / GOsC Recognised Qualification Process
- Completed consultation with profession and related parties on the development of a new Code of Practice
- Became the first healthcare regulator to check all new applicants through the Criminal Records Bureau
- Introduced retrospective checking of ethnicity

2005-2006 (year not yet completed)

- Completed remuneration benchmarking exercise for all staff positions
- Held 9 Regional conferences, consulting with profession over proposed changes to the Osteopaths Act and new Code of Practice
- Introduced Risk Register with top risks considered by the Board
- Implemented Board appraisal
- Reduced unnecessary committee meetings, saving costs and creating capacity for other work projects
- Held training workshops for osteopaths to assist and build relationships with GP's