GENERAL OSTEOPATHIC COUNCIL Business Plan April 2015-March 2016

Monitoring at 15 January 2016

GOsC BUSINESS PLAN 2015-2016

The General Osteopathic Council has agreed a corporate plan for 2013-2016 (<u>http://www.osteopathy.org.uk/about/our-work/strategic-business-plans</u>) which commits to achieving the 3 strategic objectives set out below, over the 3 year period.

Strategic Objectives

- 1. To promote public and patient safety through proportionate, targeted and effective regulatory activity
- 2. To encourage and facilitate continuous improvement in the quality of osteopathic healthcare
- 3. To use our resources efficiently and effectively, while adapting and responding to change in the external environment.

This document sets out progress against the detailed activities contained in the Business Plan 2015-2016 in support of each of the strategic objectives.

KEY

FR – activities identified within the GOsC's Francis report action plan

PSA – activities relating to best practice identified from the 2012-13 and 2013-14 PSA Performance Reviews

1. To promote patient and public safety through proportionate, targeted and effective regulatory activity

| Activity | Lead | Timing | Status | Change | Comments |
|--|---------------------------|-------------------------------|--------|--------|---|
| Quality assurance | | | • | | • |
| Complete tender process for quality assurance contract 2015 to 2018, monitor transition to new contract and confirm readiness for new contract to commence quality assurance activities. | Professional Standards | April to September 2015 | • | | Contract finalised and kick-off meeting held. Reported to ESRC October 2015. Further monitoring meeting took place at the end of October 2015. |
| Agree any changes to the Annual Report template. | Professional Standards | June 2015 | | | Annual Report template redrafted and discussed with OEIs September 2015. |
| Distribute Annual Report templates to OEIs requesting information which will allow GOsC to monitor that standards are maintained and identify any potential problems. | Professional Standards | October 2015 | • | | Distributed October 2015. |
| Collate and review Annual Report data; present to ERSC with recommendations for each OEI in terms of whether standards are being met and whether any potential issues have been identified, and disseminate good practice. | Professional Standards | March 2016 | • | | All Annual Reports were received in December 2015 and materials are currently being analysed by the QAA and GOsC ahead of consideration at the ERSC in March 2015. |
| Continue to monitor quality of course provision, for example by undertaking quality assurance reviews and monitoring any course closure plans. | Professional Standards | All year | • | | Finalised course closure process agreed by ERSC March 2015. Monitoring ongoing. BSO and CO review specifications agreed by ERSC October 2015. SIOM visit taking place |

| Monitor and review Action Plans and fulfilment of conditions linked to Recognised Qualifications to ensure that the necessary action identified by GOsC is being undertaken to maintain the standards of graduating students. | Professional Standards | May and September 2015, January 2016 | • | November 2015. The report has been prepared and sent to SIOM for the statutory period for comment and will be considered by the ERSC in March 2016. Updates on action plans discussed at June ERSC. Updates on conditions are considered as part of the Annual Report papers by ERSC in March 2015. |
|---|---------------------------|---|---|---|
| Undertake activities to ensure the quality of the education quality assurance process including: annual training and appraisal of all Visitors undertaking a quality assurance process and ongoing communications. | Professional Standards | All year | • | Visitor training is scheduled for March 2016 in advance of next RQ reviews. |
| Complete engagement process on quality assurance discussion document, report findings from engagement process and complete development of new proposals and method (in conjunction with quality assurance partner). | Professional Standards | May 2015 to March 2016 | • | Ongoing. Milestone plan noted by ERSC March 2015. Project completion likely to be delayed. |
| Undergraduate professionalism | | | | |
| Continue collecting data for undergraduate professionalism surveys in partnership with the osteopathic educational institutions from students, faculty and patients. | Professional Standards | All year | • | Data collection and facilitated peer group learning is planned for two OEIs during February and March 2016. |
| Continue supporting and facilitating sessions with OEI students and faculty about findings and implications in osteopathic context. | Professional Standards | All year | • | As above. |
| Report on evaluation of findings including relevance and impact to GOsC activities, engage with stakeholders to discuss findings and identify innovative ways to respond from the sector to these | Professional Standards | July 2015 to March 2016 | | |

| and agree sector response to findings and implementation plan. | | | | |
|--|---------------------------|-----------------------------------|---|--|
| Continue review of student fitness to practise and associated guidance taking into account findings of key reports in relation to candour, raising concerns and related issues and evaluation of student fitness to practise guidance including guidance about boundaries and sanctions and use of students as models. | Professional Standards | July 2015 | | Review commenced September 2015 with visits and discussions with OEIs. Consultation drafts have been prepared along with Equality Impact Assessments and also a consultation summary document is being developed. The consultation strategy has been developed and consultation is due to begin in March 2016. |
| Continue review of guidance about health and disability taking account of key findings and work of other regulators including concerns around mental health (PSA) . | Professional Standards | July 2015 | | Review commenced September 2015 with visits and discussions with OEIs. Consultation drafts have been prepared along with Equality Impact Assessments and also a consultation summary document is being developed. The consultation strategy has been developed and consultation is due to begin in March 2016. |
| Consult on new Student Fitness to Practise Guidance and associated Guidance about Professionalism (including student and tutor boundaries and students as models) and commence consultation analysis. | Professional Standards | December 2015 to March 2016 | • | Draft documentation has been updated and supplemented with case study examples in response to feedback and is planned for consultation in early 2016. |
| Consult on revised Guidance about health and disability and commence consultation analysis. | Professional Standards | December 2015 to March 2016 | | As above. |

| Work in partnership with OEIs to support identification of good practice in relation to teaching and learning of professional behaviours and support sharing of knowledge about student fitness to practise (FR) . | Professional Standards | All year | | Ongoing |
|---|--|---------------------------|---|--|
| Guidance for osteopathic pre-registration educ | ation | | | |
| Publish <i>Guidance for osteopathic pre-registration</i> <i>education,</i> develop and undertake implementation and awareness strategy. | Professional Standards | All year | • | Guidance now published on GOsC website |
| Work with partners to enhance methods of implementation of the <i>Osteopathic Practice</i> <i>Standards</i> in pre-registration osteopathic education including, for example, consideration of standards of related to delivery of education and particularly assessment as well as other models for ensuring assessment. | Professional Standards | March 2016 | • | A paper considering this is due to be considered in spring 2016 at the next OEI meeting. |
| Identify and agree next steps for development of pre-registration osteopathic education. | Professional Standards | March 2016 | • | As above. This is being incorporated into the 2016-17 Business Plan. |
| Osteopathic Practice Standards | · | • | | |
| Work with the OEIs to identify ways to support and develop educational faculty to support the delivery of the <i>Osteopathic Practice Standards</i> . | Professional Standards, Communications | All year | | Discussion commenced with OEIs at September 2015 OEI meeting and ODG Board in September 2015. |
| Continue to develop patient involvement in the delivery of osteopathic education by working in partnership with the OEIs to support the delivery of the <i>Osteopathic Practice Standards</i> and to share good practice in this area (FR) . Publish report about how patients are involved in osteopathic pre-registration education. | Professional Standards, Communications | All year/March 2016 | | Project currently on hold. |
| Review approach to engaging with pre-clinical | Professional | June to | | Discussion held with OEIs at |

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| students in OEIs and implement programme of visits. | Standards, Regulation, | December 2015 | September 2015 OEI meeting; individual approaches to be |
|---|---------------------------|------------------|--|
| | Communications | | agreed with all OEIs autumn |
| | | | 2015. |

| Goal: To increase understanding of the Register and | to make it more me | | | | 1 |
|---|--------------------|------------------|--------|--------|---|
| Activity | Lead | Timing | Status | Change | Comments |
| Awareness of the Register | 1 | | 1 | | |
| Encourage and equip osteopaths to promote public awareness of their registered status and the GOsC Register in their publicity material and online patient information. | Communications | All year | | | YouGov survey findings used to highlight to osteopaths the importance to patients of promoting regulated status, through regular features in the professional media and information for new registrants. |
| Assess level of registrant take-up of registration promotional tools (logos, patient information poster) and address deficiencies – test out in Registrants' survey 2015. | Communications | December 2015 | | | Take-up is regularly monitored to inform GOsC registrant communications. To date 1,365 Registration Marks have been issued, including individual (I'm Registered) and group practice (We're Registered) Marks in English and Welsh. Registrants' survey not now taking place in 2015 (see 2.2 below). |
| Seek opportunities to work in partnership with the wider healthcare community to increase knowledge and understanding of osteopathic regulation (e.g. NHS Choices, AQP commissioners, CQC, Healthcare Improvement Scotland etc.), and seek to improve information sharing with regulators and others | Communications | All year | • | | Discussion continuing on information sharing with systems regulators. Discussions on osteopathic services held with NHS England and NHS Choices, including revisions to |

| (FR). | | | | NHS Choices online public information. Inter-regulator initiative underway to promote early sharing of research aims and outcomes. |
|---|-----------------------------|------------------------------------|---|---|
| Implement recommendations based on analysis of results of national survey on patient/public perceptions of regulation and attitudes/expectations relating to osteopathic care. | Communications | July 2015 onwards | | For registrants, series of articles in <i>the osteopath</i> magazine, commencing June 2015, providing guidance and practice support, based on patient/public feedback. Information adapted into registrant support resources provided via the o zone. Findings shared with professional association and education providers. |
| Breach of title | - | • | | |
| Investigate individuals identified or reported to GOsC as incorrectly describing themselves as osteopaths, write 'cease and desist' letters to them, and prosecute those who ignore such letters. | Regulation | All year | | A review of all open s32 cases has been undertaken and a large number closed |
| Monitor activity of individuals removed from the Register during 2014-15, identified in accordance with procedures agreed with Registration department (writing 'cease and desist' letters and prosecuting them as necessary, as described above). | Registration, Regulation | All year | • | Ongoing. Internal audit of process completed June 2015. Report to July 2015 Audit Committee. |
| Review approach to surveying voluntary leavers from the Register, implement and analyse results. | Registration | April 2015 and then all year | | New Leaving the Register form now in operation and completed by all registrants who leave voluntarily. |

| Registration assessment | | | |
|--|---|-------------|--|
| Undertake activities to ensure the quality of registration assessments assessing whether registration applicants meet our standards to ensure patient safety. This will include GOsC registration assessors' and return to practice reviewers' appraisal and training, moderation meeting facilitation and regular communications. | Professional Standards, Registration | All year | Registration assessor and reviewer training (day 1) took place on 18 April 2015. Clarification of clinical responsibility at ACPs agreed by ERSC June 2015. Webinar briefing session on EU Directive 2013/55/EU held on 21 January 2016. |
| Publish initial scoping for a review of registration assessments to ensure compliance with revised EU Directive 2005/36 on the recognition of professional qualifications. | Professional Standards, Registration | May 2015 | Initial scoping report noted by ERSC March 2015. |
| Complete review and implementation of revised registration assessments | Professional Standards, Regulation, Registration | By Jan 2016 | Review of registration assessments to ensure compliance with the EU Directive has been completed and training of registration assessors took place in January 2016. This work will be reported in detail to the ERSC in March 2016. |
| Design evaluation of revised registration assessments. | Professional Standards | March 2016 | |
| Commence planning for major review of registration assessments as part of the review of the <i>Osteopathic Practice Standards</i> . | Professional Standards | March 2016 | Initial analysis and planning work has been undertaken and is proposed to focus on costs first, and then the revision of the assessment process in a subsequent business year. A paper about this will be considered at the March ERSC. |

| Continue to undertake registration assessments for international applicants and return to practice interviews. | Professional Standards | All year | To date, 20 assessments have been undertaken for international applicants and 17 return to practice interviews have been held. |
|---|--------------------------------|----------|---|
| Recognition | | | |
| Continue international work towards the development of mutual recognition and information sharing with other regulators and competent authorities. | Registration Communications | All year | CEN standard now approved. Collaboration with European colleagues on 'launch event' in April/May 2016, and development of public information. Discussions commenced with OCNZ and OBA/AHPRA about new MoU and competent authority pathway. |

| 1.3 Transition into practice Goal: To work in partnership with the osteopathic profession to ensure that new osteopaths have access to appropriate support in their transition into practice. | | | | | | |
|---|--|--------------|--------|--------|---|--|
| Activity | Lead | Timing | Status | Change | Comments | |
| Publish scoping report outlining options for supporting international registrants as they make the transition into practice and commence engagement with stakeholders to inform proposals for supporting international registrants as they make the transition into practice. (PSA) . | Professional Standards, Registration | By July 2015 | • | | Initial scoping report considered by ERSC March 2015. Workshop with registration assessors took place on 18 April 2015 to inform proposals. | |
| Develop, pilot and evaluate proposals to support international registrants as they make the transition into practice including engagement with stakeholders to provide feedback on proposals and support evaluation. Commence programme of implementation. | Professional Standards, Registration | March 2016 | | | Survey of experience of current international registrants has commenced. | |

| Continue to work in partnership with key stakeholders in osteopathy, including, the Institute of Osteopathy (IO), Council of Osteopathic Educational Institutions (COEI), Osteopathic Alliance and regional groups to support development of mentorship work. | Professional Standards, Chief Executive | All year | • | Mentoring research report due to be completed January 2016 with plans for pilot in 2016. |
|--|--|-------------------------|---|--|
| Conduct annual programme of GOsC presentations to final-year osteopathy students at OEIs to embed understanding of the role of the GOsC and requirements for initial and continued registration. | Professional Standards, Registration, Regulation, Communications | January to July 2015 | | Presentations have taken place at 10 institutions to 305 final- year students. Completed. Adaptations to GOsC information based on student and faculty feedback. 2016 presentations commenced on 20 January 2016. |

| 1.4 Continuing fitness to practise (revalidation) – see also 2.1 below | | | | | | | |
|---|--|--------------------|-------------|-------------|---|--|--|
| Goal: To ensure that through an appropriate process, registrants are able to demonstrate their continuing ability to meet the Osteopathic | | | | | | | |
| Practice Standards (FR). | | | | | | | |
| Activity | Lead | Timing | Status | Change | Comments | | |
| Continuing professional development (providin | g assurance of co | ontinuing fitne | ess to prac | ctise) prop | posals | | |
| Conduct consultation and engagement on proposals and analyse consultation responses. | Professional Standards, Communications | By October 2015 | | | Seventeen engagement events, plus webinar, conducted as part of consultation activity. 196 consultation responses received to date. 4,833 website views, 1,587 document downloads and 788 video downloads; 170 feedback forms arising from 'listening events'. Independent consultation analysis commissioned: report to OPC meeting, Oct 2015 and Council Nov 2015. Published on | | |

| Develop implementation strategy for new CPD scheme (including specification work for new IT system to support) | Professional Standards, Registration, Communications | June 2015 to March 2016 | GOsC website, circulated to osteopathic organisations and reported in professional media. Consultation findings and high level plans for next stage of development reported to Council, November 2015. Further paper proposing the timing of a staged implementation will be considered by Council in February 2016. |
|---|---|----------------------------|---|
| Current continuing professional development a | oudits | I | |
| Audit 20% of CPD Annual Summary Forms each month to support registrants to meet existing standards and to identify areas of good practice and areas for development. | Professional Standards | All year | The 2014-15 CPD audit backlog, reported to Council in July 2015, has now been cleared. For the 2015-16 year, the team is working to a clear plan, with weekly targets, to ensure the 20% audit target is met by the end of March 2016. |
| Audit 2% of CPD Record Folders each year to support registrants to meet existing standards and to identify areas of good practice and areas for development. | Professional Standards | All year | CPD Record Folder auditing is ahead of schedule. Three batches of CPD Record Folder submissions (n=100) have been audited. The final batch of CPD record folders were requested in January 2016 with the audits to be completed by March 2016. |

| Goal: To ensure that the fitness to practise processes | s protect patients | s and uphold stand | ards in ost | eopathy, th | rough firm, fair and timely |
|---|--------------------|--------------------|-------------|-------------|--|
| handling of complaints about osteopaths. | - | | | | |
| Activity | Lead | Timing | Status | Change | Comments |
| Develop new format for the Fitness to Practise Annual Report and publish. | Regulation | July 2015 | | | Completed and published. |
| Continue to monitor Quality Assurance Framework including quality audits/peer review of decision making (PSA) . | Regulation | All year | | | Ongoing. |
| Implement new data collection on complainants and registrants (FR) . | Regulation | By March 2016 | | | |
| Implement new fuller Bank of Conditions for PCC. | Regulation | By March 2016 | • | | Delayed – incorporated into 2016-17 Business Plan. |
| Implement Bank of Conditions for HC. | Regulation | Timing TBC | | | Consultation concluded and agreed by Council November 2015. |
| Review the Indicative Sanctions Guidance taking account of new guidance to registrants on the duty of candour (FR) . | Regulation | Timing TBC | • | | Delayed – incorporated into 2016-17 Business Plan. |
| Implement new Practice Note on Admission of Character Evidence. | Regulation | By October 2015 | | | Agreed by Council 14 May 2015. |
| Implement new Practice Note on Acting in the Public Interest. | Regulation | By October 2015 | | | Agreed by Council 14 May 2015. |
| Implement new advice on Osteopaths with HIV. | Regulation | By October 2015 | | | Agreed by OPC and published. |
| Implement new guidance for screeners and/or IC in relation to 'threshold criteria'. | Regulation | By June 2015 | | | Screeners and IC members were trained on the use of Threshold Criteria on 18 May 2015. |
| Develop new guidance on Imposing Interim Suspension Orders | Regulation | By October 2015 | | | Consultation concluded and to by Council November 2015. |
| Seek to enhance the pool of osteopathic expert witnesses acting in fitness to practise cases and | Regulation | December 2015 | | | Delayed – incorporated into 2016-17 Business Plan. |

| organise dedicated training for them. | | | | |
|---|-------------------------------|---------------------|---|---|
| Provide training as required to fitness to practise panellists, including provision of an annual training day for IC Members and an annual training day for PCC/HC members. | Regulation | By December 2015 | | IC Training Day held on 18 May 2015. Agenda included outcomes of IC Audit, presentation from PSA; data protection; and a workshop on the duty of candour. PCC Training Day held on 27 November 2015. Agenda includes interactive training on positive behaviours including questioning vulnerable witnesses and interim orders |
| Manage the caseload to deal with cases in an efficient, effective, fair and timely way seeking to achieve a target of 12 months for the majority of complaints to reach a hearing (FR) . | Regulation | All year | • | Initial scoping of changes to case management requirements has been completed. Discussion on improving functionality of Integra with external providers. |
| Communicate case learning points and any fitness to practise bulletins issued by PSA, to fitness to practise panellists (and arrange further training where necessary). | Regulation | As required | • | Issue 1 of Committee Bulletin issued in June 2015, Issue 2 October 2015. |
| Implement any changes to procedures recommended by PSA's initial stages audit, the Performance Review or other source. | Regulation | As required | • | |
| Engagement with osteopathic organisations (iO and Professional Indemnity Insurers) to review 2014 complaints/claims data; identify trends; agree action, and review/revise data collection and dissemination strategy for 2015. | Regulation, Communications | July 2015 | | NCOR report on analysis of 2014 data collection presented to participating organisations, Aug 2015. Meeting with iO and PII providers, Sept 2015, to review findings and agree action. Findings considered by OPC and ERSC (October 2015). |

| | | | Presentations to PSA Conference (March 2015), FORE meeting (May 2015), OIA, October 2015. Key findings reported in <i>the</i> <i>osteopath</i> , Oct-Nov 2015 issue. |
|---|------------------------------|------------------|---|
| Review best practice across regulators for the support of vulnerable registrants in the fitness to practise process and identify proposals for consideration by OPC (PSA) . | Regulation Communications | October 2015 | Initial meeting with Witness Support, July 2015. Development of new witness and registrant guidance document and supporting video content for GOsC public website. Considered by OPC, October 2015. Expected launch of witness support material, early 2016. |
| Move towards electronic case papers for Committees project | Regulation | December 2015 | Three month pilot concluded autumn 2015. |

2. To encourage and facilitate continuous improvement in the quality of osteopathic healthcare

| 2.1 Continuing fitness to practise (CPD) – see also 1.4 above | | | | | | | |
|---|---------------------------|-----------|--------|--------|---|--|--|
| Goal: To ensure that through an appropriate process, registrants are continually encouraged to enhance and improve their practice | | | | | | | |
| Activity | Lead | Timing | Status | Change | Comments | | |
| Current continuing professional development evaluation | | | | | | | |
| Share identified areas of good practice and areas of development with registrants using a variety of mechanisms including e-learning, engagement with key osteopathic stakeholders and articles in media including <i>The Osteopath</i> . | Professional Standards | All year | • | | Ongoing. | | |
| Design osteopathic continuing professional development evaluation to feed into report of 'State of Osteopathic continuing professional | Professional Standards | June 2015 | • | | Initial scoping considered by OPC March 2015. | | |

| development'. | | | | |
|--|---------------------------|----------------------------|---|----------------------------|
| Conduct continuing professional development evaluation (see above) and prepare report about the 'State of Osteopathic continuing professional development'. | Professional Standards | July 2015 to March 2016 | • | Project currently on hold. |

2.2 Osteopathic Practice Standards

Goal: To embed the role of the *Osteopathic Practice Standards* as the core principles and values for good osteopathic practice and high standards of professionalism.

| Activity | Lead | Timing | Status | Change | Comments |
|---|---|------------|--------|--------|---|
| Develop appropriate case studies and learning materials to support the professional duty of candour (FR). | Regulation, Professional Standards, Communications | All year | | | Initial case studies developed and trialled at IC Training Day (18 May) and osteopath workshop on 3 June. Independent report on focus group considerations provided by Community Research, September 2015. Proposals for development of guidance and learning tools, as part of OPS review, considered by OPC, October 2015. |
| Scope review of the Osteopathic Practice Standards including: key reports and their implications (including the Francis report and the duty of candour, and best practice on whistleblowing); feedback on the Osteopathic Practice Standards; joint work with other regulators; the effectiveness of regulation research; values based practice activity; and new methods of engagement (PSA) . Establish an outline project plan and governance mechanisms. | Professional Standards, Communications | March 2016 | | | Scoping study considered by OPC and ERSC, October 2015 and strategy for review agreed by Council, November 2015. Pre-consultation communication and engagement plan presented to Council, Feb 2016. |
| Working in partnership with stakeholders, develop and implement plan for raising awareness of | Professional Standards, | All year | | | Ongoing. |

| professional and personal boundary issues, including the potential for producing dedicated learning materials. | Regulation, Communications | | | |
|--|---|----------------------------------|---|--|
| Complete review of implications of effectiveness of regulation research across all policy development and functions and publish report evaluating options for next steps. | Professional Standards, Regulation, Communications | September to October 2015 | • | Considered as part of OPS review |
| Conduct registrant opinion survey to compare professional attitudes and awareness of standards with findings of 2012 Osteopath Opinion Survey, and implement recommendations based on survey findings. | Communications | October 2015 to March 2016 | • | Project cancelled and a data analysis project commenced instead in January 2016. |

| 2.3 Quality and patient care |
|--|
| Goal: To work in partnership with others to develop high quality, patient-centred osteopathic care. |

| Activity | Lead | Timing | Status | Change | Comments |
|---|--|----------|--------|--------|---|
| Work in partnership with osteopaths and osteopathic organisations to encourage the promotion of patient awareness of osteopathic practice standards. | Communications | All year | | | Development of 'candour' workshop material in conjunction with OEI faculty. Completed and trialled in focus groups in May-June 2015. Independent report on focus group feedback and recommendations (Community Research, July 2015) considered by Osteopathic Practice Committee, Oct 2015, and published on GOsC website. |
| Continue to support, through the Osteopathic Development Group and directly, the agreed development projects for the osteopathic professions, namely: • Evidence/data collection/adverse events (FR) | Communications Professional Standards Chief Executive | All year | • | | Mentoring project final research report due January 2016. Advanced Clinical Practice research report due early |

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| Service standards (FR) Advanced practice Regional support and capacity building (see also 1.4 above) Mentoring (see also 1.3 above) Leadership (FR) International collaboration. | | | | 2016. Leadership programme , first cohort completed October 2015, planning taking place for second programme of workshops. Service standards discussion being held with external stakeholders and work integrated with iO Patient Charter. International website launched October 2015. Evidence (PROMs) project live from autumn 2015. Regional support guide completed, Dec 2015, circulated to regional groups, and promoted in professional media. |
|---|-----------------|----------|--|---|
| Contribute to the work of the NCOR Management | Chief Executive | All year | | New NCOR contract with QMUL |
| Board and Research Council. | Communications | | | agreed. |

| 2.4 Professional standards and values | | | | | | |
|--|--------------|--------------|--------|--------|---------------------------------|--|
| Goal: To work in partnership with others to support practice that promotes professional standards and values across the osteopathic profession, | | | | | | |
| while reducing practitioner isolation. | | | | | | |
| Activity | Lead | Timing | Status | Change | Comments | |
| Work in partnership with patients, iO, COEI, | Professional | May 2015 | | | Follow up seminar held at St | |
| Osteopathic Alliance to explore the need for a | Standards | (seminar) | | | Catherine's College, Oxford, on | |
| common statement of osteopathic values to support | | and all year | | | 20 May. Next steps to be | |
| the review of the next edition of the Osteopathic | | (follow-up) | | | decided. | |
| Practice Standards. | | | | | | |

| Consider how any learning from professionalism project (see 1.1 above) can be incorporated into wider osteopathic practice, e.g. in the revision process for the OPS and communications activities. | Professional Standards, Communications | All year | • | Project currently on hold although work is informing OPS revision proposals. |
|--|--|----------|---|--|
| Work with the Osteopathic Development Group to develop and implement a programme for leadership development with the osteopathic profession. | Chief Executive | All year | • | Leadership programme, first cohort of 20 has completed programme. Planning underway for second year programme. |
| Continue to participate actively in the Osteopathic International Alliance to promote high standards of osteopathy world-wide, including the organisation of an annual regulation forum. | Chief Executive, Communications | All year | • | Regulation forum took place in Montreal, September 2015, with side meetings to develop joint working with Australia and New Zealand. |

3. To use our resources efficiently and effectively, while adapting and responding to change in the external environment

| 3.1 Service quality | | | | | | |
|---|------------------|---------------|--------|--------|------------------------------|--|
| Goal : To continue to enhance the quality of service provided by the GOsC to patients and registrants. | | | | | | |
| Activity | Lead | Timing | Status | Change | Comments | |
| Continue to embed Information Governance | All Departments | All year | | | Ongoing. | |
| Framework within operational processes. | | | | | | |
| Implement year three of the internal audit | Chief Executive, | April 2015 to | | | Individual audit plans being | |
| programme and report findings to Audit Committee, | Finance | March 2016 | | | tabled at Audit Committee | |
| including audit activity around: | | | | | November 2015 for completion | |
| 1. Return to practice process audit | | | | | and reports to March 2016 | |
| 2. Performance against customer service standards. | | | | | meeting. | |
| Assess impact of changes made to IT infrastructure, | Registration, | From July | | | Meetings with similar | |
| including online registration tools in previous | Regulation, | 2015 | | | organisations (within and | |
| business plan year and identify any further | Communications | | | | outside of healthcare) have | |
| improvements in use of IT (including mobile | | | | | been held in order to help | |

| applications) to be incorporated into 2016-19 Corporate Plan (PSA) . | | | inform initial thinking around development of IT strategy. GOsC teams have submitted proposals, thoughts, ideas which will feed into this work. Draft IT strategy document in production. |
|---|---------------------------------|-------------------------------------|---|
| Continue to identify opportunities for enhancing customer service standards and implement. | Communications | All year | Ongoing. |
| Undertake survey of graduates joining the Register in 2015 to assess quality of registration process with a view to making customer service improvements. | Registration, Communications | November 2015 to January 2016 | Survey of those joining the Register in 2015 launched 2 November. Results will be reported to the ERSC and Council in 2016. |

3.2 Engagement

Goal: To engage effectively with patients, the public, educators, osteopaths, other health care professionals and other key stakeholders for the delivery of our strategic objectives.

| Activity | Lead | Timing | Status | Change | Comments |
|--|----------------|-------------------|--------|--------|---|
| Continue implementation of 2013-16 Communications and Engagement Strategy in support of the delivery of the Corporate Plan including identifying targeted approaches to specific stakeholder groups. | Communications | All year | • | | Northern Ireland parliamentary reception, 2 June 2015. Collaboration with Healthwatch England network and Scottish Health Council to maximise awareness of GOsC 2015 CPD consultation. Representation at Scotland Regulation Conference, November 2015. |
| Develop and publish a consultation protocol which sets out clear requirements and expectations for GOsC consultations (to be informed by discussion on common approaches with other regulators). | Communications | By August 2015 | • | | Draft protocol discussed with Regulators' Public Patient Engagements leads (PPE Group), June 2015. Further development work underway for |

| Support consultation and engagement on policy and operational developments identified in the business | Communications | All year | • | discussion with PPE group, December 2015. Sixteen-week public consultation on new CPD scheme up to 31 |
|---|----------------|----------|---|--|
| plan and those required ad hoc, including through the use of the GOsC Patient Partnership Group (FR). | | | | May 2015. Public consultation on draft bank of health conditions – July to September 2015. Public consultation on imposing Interim Suspension Orders – July to October 2015. Public consultation on Drafting determinations – July to October 2015. |
| Continue to recruit to the GOsC Patient Partnership Group, keeping members informed and engaged. | Communications | All year | | Targeted emails and GOsC bi- annual newsletter to PPG members, July 2015. Extensive promotion of PPG membership through c. 50 newsletter/social media postings by Healthwatch organisations across England, Scottish Health Councils, Welsh Community Health Councils and the Northern Ireland Patient and Client Council. |
| Ensure key areas of policy development are assessed at the outset to ascertain their PPI requirements and develop a PPI plan where appropriate (FR) . | Communications | All year | | Ongoing. |
| Identify opportunities for partnership working with advocacy organisations, voluntary, community and PPI bodies to build links with the wider public. | Communications | All year | | Amendments to NHS Choices online information about osteopathy agreed July 2015. Further links established with |

| | | | | members of the Healthwatch Network, Patient and Client Council (Northern Ireland), Welsh Community Health Councils and Scottish Health Councils to improve communication and collaborative working. |
|--|--|----------|---|---|
| Provide GOsC representation at appropriate healthcare conferences/exhibitions across the UK to promote awareness of osteopathic regulation, registration and practice standards, and foster partnerships. | Communications | All year | • | Northern Ireland Assembly Reception, Belfast, 2 June. 2015 Scottish Government Regulation Conference held in Glasgow, 2 November 2015. |
| Implement communications programme to support profession-wide engagement in the development of the profession. | Communications | All year | | Work underway with iO on a joint communications strategy to increase awareness of development work. Development of new ODG website and branding for launch in early 2016. |
| Support regular engagement activities and events including: Two meetings of the Regional Communications Network Four meetings with the OEIs The work of the Osteopathic Development Group in the development of the profession A programme of visits to regional osteopathic groups. | Professional Standards, Chief Executive, Communications | All year | | Regional meetings in Sussex, Bristol, London, Cheshire, Bournemouth and Worcester as part of CPD consultation. September OEI meeting. Scottish Osteopathic Society meeting, 5 September 2015. RCN focus group (with COEI, iO, NCOR, OA): 18 March 2016. |

| 3.3 Governance | | | | | |
|--|-------------------------------|----------------------------------|--------|--------|--|
| Goal: To ensure that our governance is appropriate a | ind effective. | | | | |
| Activity | Lead | Timing | Status | Change | Comments |
| Develop, consult and agree a new Corporate Plan for the period 2016-19 including undertaking a review of resource prioritisation with the organisation. | Chief Executive | All year | | | Plan due to be agreed by Council February 2016. |
| Provide regular reports to Council on progress against the business plan, and financial, asset and risk management. | Chief Executive | All year | • | | Ongoing. |
| Complete any new appointments to the governance structure using the appointments procedure approved by PSA. | Chief Executive | All year | | | Chair's reappointment finalised, recruitment of new Council due to be completed February 2016. |
| In conjunction with the Department of Health develop consultation and legislation for the reconstitution of Council from April 2016. | Chief Executive Regulation | May 2015 | | | Order approved and now in force. |
| Organise training day for potential registrant applicants for Council and other non-executive roles. | Chief Executive, HR | October 2015 | | | Event took place on 12 September with 24 attendees. |
| Review the equality and diversity policy and present to Council, implement new policy. | Chief Executive | May 2015 and all year | | | New policy agreed by Council 14 May 2015. |
| Prepare report on performance against PSA Standards of Good Regulation. | Chief Executive | October 2015 to March 2016 | • | | Initial data for new process submitted to PSA December and January 2016. |
| Take necessary steps to address any issues arising from the annual PSA Performance Review. | Chief Executive | June to December 2015 | | | None required in 2015. |
| Prepare an Annual Report on activities undertaken in year and submit to Parliament. | Chief Executive | June to September 2015 | | | Completed. |
| Undertake preparations so that the financial statements, and the control framework, are ready | Resources | August 2015 to March | | | Paper considered at July 2015 Council meeting. |

| for the transition to FRS102 which will take effect | 2016 | | |
|---|------|--|--|
| from FY2016 and beyond. | | | |

3.4 Value for money Goal: To continue to improve value for money in everything that we do.

| Activity | Lead | Timing | Status | Change | Comments |
|--|-------------------------------|------------------------------|--------|--------|--|
| Continue to review scope for operational cost savings and identify proposals for further cost efficiencies and savings, and where possible implement in time for FY2016-17. | Chief Executive, Resources | April to December 2015 | • | | Budget strategy for 2016-17 considered by Council November 2015. |
| Undertake a review of procured services (items to be confirmed) to ensure cost effectiveness and efficiency, including how we might increase the use of local suppliers. | Resources | All year | • | | QAA tender process completed and contract finalised. |
| Continue to explore options for charitable status application and efficient use of assets. | Chief Executive, Resources | All year | | | Due to be considered by Council February 2016. |

| 3.5 Legislative reform | | | | | | |
|--|--------------------------------|---|--------|--------|--|--|
| Goal: To undertake a fundamental review of our rules as part of the transition to a new Act. | | | | | | |
| Activity | Lead | Timing | Status | Change | Comments | |
| Continue to engage with the Department of Health and Parliament on proposed changes to legislation. | Chief Executive, Regulation | From May 2015 dependent on Queen's Speech | • | | Bill not in Queen's Speech but discussions continuing with DH. | |
| Commence scoping study for transition to new rules (subject to legislation in Queen's Speech 2015). | Chief Executive, Regulation | TBC | | | Now not taking place. | |
| Implement new Professional Indemnity Insurance Rules and compliance mechanisms. | Registration, Regulation | May 2015 onwards | | | Completed. | |