



**Minutes of the Public Session of the 90<sup>th</sup> meeting of the General  
Osteopathy Council held on Thursday 4 February 2016 at  
176 Tower Bridge Road, London SE1 3LU**

*Confirmed*

Chair: Alison White

Present: John Chaffey  
Colin Coulson-Thomas  
Jorge Esteves  
Jonathan Hearsey  
Kenneth McLean  
Joan Martin  
Haidar Ramadan  
Julie Stone

In attendance: Fiona Browne, Head of Professional Standards  
Sheleen McCormack, Head of Regulation  
Samantha Peters, Chief Executive and Registrar, General Optical  
Council (GOC) (Item 9)  
Matthew Redford, Head of Registration and Resources  
Marcia Scott, Council and Executive Support Officer  
Brigid Tucker, Head of Policy and Communications  
Tim Walker, Chief Executive and Registrar

Observers: Nick Hounsfield  
Robin Lansman, President, Institute of Osteopathy (iO)  
Kim Lavelly  
Brian McKenna  
Nigel Kavanagh, Registrant  
Penny Sawell, Registrant  
Jenny White

**Item 1: Welcome and apologies**

1. The Chair welcomed all to the meeting. A special welcome was extended to observers at the meeting.
2. Apologies were received from Mark Eames who was unable to attend the meeting for personal reasons. The Chair on behalf of Council passed best wishes to Mark and his family.

### **Item 2: Questions from observers**

3. There were no questions from the observers.

### **Item 3: Minutes and matters arising**

4. The minutes of the 89<sup>th</sup> meeting of Council held on 12 November 2015, were agreed as a correct record of the meeting.
5. There were no matters arising.

### **Item 4: Chair's Report and Reappointments**

6. Before giving her report to Council the Chair informed members that due to an administrative oversight, the agreed constitutional changes to Council, reducing membership from 14 to 10, had been made by the Privy Council with effect from 18 December 2015 instead of 1 April 2016. This had only very recently come to light and meant that the meeting could not proceed with fourteen Council members.
7. The Chair had discussed this with a number of members who had agreed that they would stand down from Council with immediate effect. The members were:
  - Nick Hounsfield – Registrant
  - Kim Lavelly – Lay
  - Brian McKenna – Registrant
  - Jenny White – Lay
8. The Chair invited the four individuals to remain at the meeting as observers. She also stated that clarification on the implications for any further meetings scheduled to take place before 1 April 2016, would be sought from the Department of Health.
9. The Chair then gave her report to Council. The main points were:
  - a. Re-constitution of Council: the Chair stated that overseeing the re-constitution had been a challenge for all concerned, and the Chair was grateful for the professionalism shown by all involved. She thanked everyone for their exemplary service and commitment to Council, and for those retiring, she wished them well for the future.
  - b. Members were informed that the recommendation for Council appointments would be submitted to the Privy Council on 5 February, following a period of due diligence, so the final shape of the new Council would not be in the public domain for some time. A report about the learning from the process would be made to the Remuneration and Appointments Committee in due course, to consider any improvements that were needed. Advice had already been taken from the Committee about the content of the induction for the new Council.

- c. Appointments to the Investigating and Professional Conduct Committees: members were informed that the Chair had also been engaged in a process of appointments for vacancies for both the Investigating and Professional Conduct Committees the outcomes of which would be reported to Council for its approval. In reviewing the appointment process there is some scope for further support in encouraging a wider diversity of applications, particularly from registrants. These opportunities will be discussed with the Remuneration and Appointments Committee in due course.
- d. Charitable status: the Chair advised members that the meeting was particularly important for Council as decisions were to be taken about charitable status, a new corporate plan, and the future of the CPD scheme. It was therefore clear that there would be no 'winding down' of this Council as it continued to operate at a pace in terms of the scrutiny it provides of critical matters before it, demonstrating its continued effectiveness and strength of governance, for which members were thanked.

**Noted: Council noted the Chair's report**

**Appointments**

- 10. The Chair introduced the item which sought to obtain approval from Council for the appointment of five new members of the Professional Conduct Committee and approval for the appointment of four new members of the Investigating Committee to be agreed by email prior to the next meeting of Council. Members were informed that the final day of interviews on 10 February, for the Investigating Committee, would complete the current governance recruitment round.

**Council agreed:**

- a. **to appoint Claire Cheetham, Tracy Davies, Barry Kleinberg, Morag Mackellar and Mark Osborne as members of the Professional Conduct and Health Committees from 1 April 2016 to 31 March 2020.**
- b. **that the appointment of four members of the Investigating Committee should be agreed by email prior to the next Council meeting on 5 May 2016.**

**Item 5: Chief Executive's Report**

- 11. The Chief Executive introduced his report which gave an account of activities undertaken since the last Council meeting and not reported elsewhere on the agenda.
- 12. The Chief Executive highlighted the following:
  - a. Professional Standards Authority (PSA): the new Annual Performance Review process had commenced with the GOsC being one of the first regulators to

be reviewed. There had been a meeting with the PSA to discuss a number of issues and documents had been submitted for assessment. Once the assessment has been completed a decision as to whether a more formal review is required will be made by the PSA before the end of February.

- b. EU Directive on the Recognition of Professional Qualifications: members were advised that the deadline for the implementation by regulators of the new EU Directive 2013/55/EU on the recognition of professional qualifications had passed before the implementing regulations had been laid before Parliament. Members were informed that there had been some work undertaken around registration assessments to ensure compliance which had not been subject to scrutiny by the Education and Registration Standards Committee (ERSC) and Council, as the Executive would have liked, but a report would be submitted to the ERSC in due course.
- c. Business Plan: the Chief Executive was pleased to inform members that most of the slippage previously reported to Council had been addressed and that there would also be some work that would roll over into the 2016-17 Business Plan.

13. In discussion the following points were made and responded to:

- a. Department of Health legislation update: members noted that, following the meeting with the Parliamentary Under-Secretary of State, Ben Gummer MP, there would be no Healthcare Professional Regulation Bill in 2016-17. Members enquired how the future Council would be involved in future debate about reform.
- b. The Chair agreed this was an important issue and that substantive discussions would be required. Members were advised that meetings were in the process of being arranged for the Chairs of the health regulators to meet with the new PSA Chair, George Jenkins, to discuss a number of issues including that of regulatory reform. The Chief Executive added he had attended the Department of Health meeting with Mark Eames and commented that the current thinking on reform was aspirational rather than there being a clear road map. Members were advised that the Department of Health would develop proposals during 2016 with consultations beginning in the autumn.
- c. Members also asked if the Minister had given an indication about the areas in which he was particularly interested. It was suggested that the Government was not attracted by the type of legislation recommended in the Law Commission's review but were looking for something more flexible and less prescriptive, but the direction at this point was not entirely clear. The Government also wants to address some of the issues raised in the PSA's 2015 *Rethinking Regulation* report, including how to join up the work of the systems regulators with the professional regulators.

### Business Plan monitoring

14. Members queried the following projects which were designated as being on hold:
- Developing patient involvement – 1.1 Pre-registration education and training
  - CPD Evaluation – 2.1 Continuing fitness to practise.

It was explained that the delay with both these projects had been due to the staffing issues in the Professional Standards team during 2015 and both would roll over into the Business Plan for 2016-17.

15. It was suggested that once work did commence on the registrant opinion survey (2.2 Osteopathic Practice Standards) questions should be used from previous consultations. The Chief Executive agreed that repeating questions over a period of time was useful, but the current issue was a desire to avoid a further in-depth study at this time which could result in consultation fatigue.

### Financial Report

16. The Head of Registration and Resources presented the Financial Report highlighting:
- a. A surplus is forecast for 2015-16.
  - b. The planned use of funds for an independent audit of decisions made by the Professional Conduct Committee which would be in keeping with a similar audit conducted for the Investigating Committee. The audit would provide assurance for the Regulation Team, the Committee and Council on the work of the PCC.
17. Members asked if there would be any merit in deferring the audit of the PCC decisions in light of the proposed introduction of guidance for the PCC in drafting determinations and a template for decisions. The Head of Regulation responded that no learning points following PCC decisions had been received from the PSA in almost a year, so she believed it would be useful to receive independent views so as to use learning points to improve the system and develop training, as has been demonstrated with the Investigating Committee.

**Noted: Council noted the Chief Executive's Report.**

### **Item 6: Fitness to Practise Report**

18. The Head of Regulation introduced the Fitness to Practise Report which gave the quarterly update on the work of the Regulation Department and the GOsC's fitness to practise committees. The following areas of the report were highlighted:

- a. Judicial Reviews and appeals: an appeal against a decision by the Health Committee to impose an interim suspension order against a Registrant in August 2015 had been dismissed. A further appeal against the High Court decision has been made by the Registrant and a further update would be provided at the next meeting.
- b. Members were also informed that the GOsC had been served with approximately 36 claim forms, stamped by the Queen's Bench Division at the Royal Courts of Justice, relating to a claim for damages by a Registrant. The claims have been 'struck-out' by the Court but an appeal has been made against this. A further update will be provided for the next meeting.
- c. Electronic case papers project: following the positive feedback received from members of the Investigating Committee and Legal Assessors, the roll-out of electronic case documents has been successfully extended to members of the Professional Conduct Committee, who have welcomed the initiative. It is anticipated that using the new system will cut down on the number of hearing days and improve security.
- d. Advertising: members were updated on the current position relating to advertising. As at 1 February, 25 new complaints had been received bringing the total to just over 200. Sixty-two complaints have been closed with another 20 expected to be closed within the next two weeks. No advertising complaints have been referred to a final hearing by the Investigating Committee. It is likely that the GOsC will continue to receive advertising complaints on the first day of every month for the foreseeable future.
- e. Integra database: the Regulation Manager updated members on the work to broaden the use of the Integra database as a case management system. It is anticipated that the system will prove very useful for regulation data management and reporting.

19. In discussion the following points were made and responded to:

- a. Members were assured that the work relating to the Integra database would not incur any additional cost.
- b. Advertising: members asked if there were any trends evident in the advertising complaints, did the complaints relate to certain conditions or breaches of the Advertising Standards Authority (ASA) guidelines. The Head of Regulation responded that the complaints were, as previously reported, relating to the treatment of babies and older children. Members were also advised that all the complaints were risked assessed to check if any urgent action was required.
- c. The Chief Executive stated that it was important to deal efficiently with the complaints and ensure that the GOsC meets its statutory duties, but it was also essential that complaints of a less serious nature did not impinge on

more serious cases. It had been put to the campaigners that their actions could impact on more serious cases but they did not agree and believed that the GOsC should be proactively policing the profession.

- d. The Chair stated that it was very important to make a public statement that there was no detriment to the GOsC's statutory duties and that in an appropriate way all cases received were being carefully risked assessed. Members were advised that the PSA is aware of the situation as it had been reported in some depth as part of the assessment for the Performance Review. If there were any concerns, the GOsC would welcome the PSA's views on the approach taken to ensure standards were being met and the most serious cases continue to be dealt with in an appropriate manner.
- e. In reference to a question relating to section 32 – protection of title cases – members were informed that the GOsC was very successful in claiming back costs in this area.
- f. Members expressed some concern and emphasised the importance in differentiating between sexual boundary and dignity breaches. It was agreed that this was an important issue and would be reviewed.
- g. PSA appeals threshold: members enquired if there were any learning points to be taken from the new threshold and if any guidance would be produced as a result. It was reported that to date no learning point letters had been received from the PSA but once the information was available it would be brought to Council.
- h. Decision review group (DRG): members asked if the GOsC could benefit from having a DRG similar to that of the NMC, where final fitness to practise panel decisions are examined and reviewed. The Head of Regulation explained that a number of regulators have review groups made up of senior staff who review final decisions and issue their own learning points in the absence of PSA learning points to committees. The NMC has included other regulators in their process and the GOsC is keen to set up something similar. Having an external audit on decisions would be the start in developing a review group and the NMC had been invited to work with the GOsC on developments in this area.

**Noted: Council noted the Fitness to Practise report.**

### **Item 7: Corporate Strategy 2016-19**

20. The Chief Executive introduced the item which sought Council's agreement of the Corporate Strategy 2016-19. Earlier drafts of the document had been considered at previous meetings of Council and the suggested amendments had been incorporated. Members were informed that the next step would be a discussion at the Audit Committee in March about evaluation of the Strategy and a further report would be made to Council in May.

21. In discussion the following points were made and responded to:

- a. Members commented that the focus on strategic themes and overall look was good.
- b. Strategic Objective 1, point 3.4: members expressed some unease about working with the iO to support registrants and wondered if this was justified. It was agreed that in routine fitness to practice cases how the iO supported their members would not be a concern for the GOsC. However, particularly in health cases where registrants might be vulnerable and there was a perceived risk to the individual, it was appropriate to collaborate. The Chief Executive commented that the GOsC was aware of the support services provided by the iO but the question was how best to interface with these to ensure the right support was available to registrants. It was agreed that the wording of the objective would be carefully reviewed.
- c. It was pointed out that not all osteopathic practitioners are members of the iO, how would these individuals be supported if similar assistance was required? The Chief Executive stated that he hoped the iO would provide support to other osteopaths where possible. He added that the GOsC had a duty of care to registrants and should always be mindful of that.
- d. Strategic Objective 3, point 3.5: members queried whether it was correct that the GOsC would only work with the Department of Health (England). It was explained that statement reflected the devolution settlement and that although DH (England) is responsible for health services in England it is responsible for healthcare professional regulation UK-wide.
- e. Members commented that some of the themes were more aspirational than descriptive of action and it was not evident how the objectives would be achieved. The Chief Executive responded that it was a question of balance and for Council to ensure that objectives are being followed through consistently with the Business Plan.
- f. Members sought reassurance that within the aims of promoting equality and valuing diversity, disability was included. It was explained that the Equality Act 2010 covers a number of protected characteristics including disability.
- g. Members were also reassured that although there had been no formal responses to the draft Corporate Strategy from key stakeholders there had been discussions and opportunities to comment. The GOsC would continue to work in partnership with them on relevant activities where appropriate.

**Agreed: Council agreed the Corporate Strategy 2016-19.**



### **Item 8: Business Plan and Budget 2016-17**

22. The Chief Executive introduced the draft Business Plan 2016-17 which mapped out the key areas of work for the coming year and also linked to the themes of the Corporate Strategy. Council were asked for their thoughts and any comments about the draft plan which would be welcomed.
23. In discussion the following points were made and responded to:
- a. Council were informed of a number of additional work streams that the Head of Regulation would like to include in the draft Business Plan at 1.3: Fitness to Practise. These were:
    - to increase the pool of medical assessors
    - developing case management directions to increase hearings' efficiency.
  - b. Members suggested that research could be conducted to look at any trends in fitness to practise complaints which could be included as a work-stream at 2.3: Research, practice and regulation. Members were advised that there were areas of work currently being undertaken including looking at complaints and claims data and whether there were any identifiable trends. Research is also being undertaken around registrants who have had a case considered by the IC and whether any risk factors can be identified from the data held by GOsC. This work would possibly lead to further research which could be added to the Business Plan at a later point.

#### Osteopathy House revaluation

24. The Head of Registration and Resources introduced this item reminding members of the discussions at the July 2015 meeting of Council. At that meeting members were advised that the value of Osteopathy House had been noted by the auditors as a single entry asset, not having a separate value between land and buildings, and that the value of OH might not reflect the actual market value of the asset.
25. A report completed by Cluttons LLP valued Osteopathy House at £3.8m, with the split between land and buildings being £1.17m and £2.62m respectively. If the accounts were amended to reflect this, the impact would be an increase in the asset on the balance sheet and a doubling of the depreciation charge that sits within the income/expenditure account from £40,000 to £80,000.
26. As Council has indicated it did not want to run a deficit budget, at this point it was advised that Cluttons' Report be noted and the GOsC enhance disclosure about this issue in its Annual Report and Accounts to ensure transparency. It was also noted that if the GOsC were to make an application for charitable status it would be necessary to account for the asset at market value.

27. Members were advised that it may be appropriate to review the economic life of OH and consider whether it should be extended beyond the remaining 32 years of its current useful economic life. As the building has stood for over 100 years, there is no reason that it should not continue to function.
28. In summary Council was asked to note the revaluation of OH and that no change should be made to the accounts, but agree to enhance the disclosure.
29. In discussion the following points were made:
  - a. Members asked what length of years would be required to realistically extend the economic life of the building. Also, in light of the undervaluation of the asset, it was asked why the GOsC/Council was not completely aware at an earlier stage of the issues especially with the proposal to seek charitable status. It was suggested there was a need to find a solution that works with achieving charitable status and managing the assets. It was also commented that there should be no perception of a dereliction of duties by the current Council.
  - b. It was explained that the current depreciation policy states that Osteopathy House should depreciate over a 50-year period and was currently in its eighteenth year. It would be reasonable and proportionate to increase this, for example, to 75 years.
  - c. In terms of the valuation of Osteopathy House, members were reminded the issues had been discussed by Council on a number of occasions; the most recent being July 2015. The auditors had first raised the issue of the valuation of Osteopathy House with the Audit Committee in June 2015 and it was also included in the auditors' Key Issues Memorandum brought to Council at the meeting of July 2015. The Chief Executive pointed out there had been discussions about the value of Osteopathy House at meetings of the Finance and General Purpose Committee during 2011 and the issue had been live since that time. He advised members that this current Council was not required to make a decision at this stage as it would be an action for Council in the future.
  - d. It was confirmed that if the GOsC did proceed with the application for charitable status the submission would not be affected if the accounts did not currently reflect market value. The Charity Commission would review the GOsC's accounts as part of the application process and the actions with regards to the land and building asset would highlight the robustness and transparency of the GOsC's governance.
  - e. Members were advised that the issues raised by Council would be discussed at the next meeting of the Audit Committee.

Budget 2016-17

30. The Head of Registration and Resources highlighted the designated funds of £100k which had been previously set aside to cover the costs of 'White Paper challenges' and for when the GOsC had been required to use the Appointments Commission for Council appointments. It was suggested that these funds be re-designated and used to support the development and implementation of the new CPD scheme as the cost of governance recruitment was contained within the expenditure budget.
31. Members were also informed that as it was expected there would be a surplus in the current financial year 2015-16, a further £20k would be allocated for quality assurance activity as there is expected to be a new application for recognised qualification status which would require a one-off increase in expenditure.
32. In discussion the following points were raised and responded to:
  - a. It was confirmed that there were no outstanding mortgage payments on Osteopathy House and the correction was noted at paragraph 41.
  - b. Members requested further clarification on fitness to practise costs. It was explained that the number of cases to be referred would be approximately 30 per year and that the relatively high number of Interim Suspension Order applications were likely to continue. The Head of Registration and Resources was confident that resources would be sufficient to meet the requirements of the GOsC's statutory duty to process complaints as quickly and effectively as possible.
  - c. Members raised a concern about the decrease in the budget for engagement activities given the amount of engagement which was being proposed and suggested that there was a need for flexibility for the activity. It was also asked what mechanisms would be used to monitor the outcome where a significant increase in website activity was shown.
  - d. In response, the Head of Registration and Resources explained that in relation to the engagement activity, the variance related to the planning in 2015-16 for the national survey, which was not required in 2016-17: therefore the movement masks what was actually taking place. A range of engagement activities are being planned including the Regional Communications Network and independently facilitated workshops. Members were assured that engagement was a key activity which he and the Policy and Communications team were planning for.
  - e. In relation to measuring the output of web enhancements, members were informed that this was already taking place; for example, investment in the online registration tool had seen online registration renewals increase from 25-30% to approximately 70% in the past year. Members were assured that regular reporting to Council would continue.

- f. Members enquired whether, in acquiring charitable status, there would be an expectation for the GOsC to make more use of its reserves by the Charity Commission and if there would be a need to justify the reserves held. The Chief Executive agreed that the reserves could be an issue but commented that there are significant challenges in not having reserves. A consequence of acquiring charitable status would mean the GOsC would need to think differently when considering and handling financial issues and the accounts. There might also be a need to revisit the GOsC Reserves Policy when reviewing its compliance with charity law.

**Council agreed and noted:**

- a. The Business Plan 2016-17 as set out at Annex A**
- b. The Budget 2016-17 as set out at Annex B**
- c. Council noted the revaluation of Osteopathy House**
- d. There should be no immediate adjustment to the value of Osteopathy House in the accounts.**

**Item 9: Charitable Status**

33. The Chief Executive introduced the item which concerned Council's consideration of whether to seek registration as a charity.
34. The Chief Executive reminded Members of the previous discussions held on the merits of applying for registration as a charity during 2015 and supported by legal advice provided from Field Fisher Waterhouse LLP.
35. The General Optical Council (GOC) made a successful application for charitable status in 2012 and the Chair invited Samantha Peters, Chief Executive and Registrar of the GOC, to give her insights and experience of the process.
36. In her overview of the application process the Chief Executive of the GOC highlighted:
- a. The move to charitable status had been beneficial in both a financial and a cultural context. The financial implications although significant were more immediate, with the cultural impact taking a little longer.
  - b. One of the unexpected cultural benefits was that the GOC attracted more staff from the voluntary sector who bring a different outlook in a number of areas.
  - c. The move to charitable status had made the GOC's purpose clearer and more disciplined in demonstrating its public benefit remit. It had been beneficial in improving governance and encouraging sharper thinking of its Council and Committees, for example in looking at risk and conflicts of interest. It was suggested that as a board it would be necessary for a

change in mind-set. It would also be necessary for the Executive to have a change in thinking especially in the handling of financial reserves.

37. In discussion the following points were made and responded to:

- a. It was explained that the GOsC should be prepared in advance for the anticipated changes when making the application and subsequent transition to charitable status. This would require training for Council and Committee members and staff, in understanding the requirements and responsibilities of being a charity especially in terms of finance and accounting.
- b. Members asked if any advice had been available about the level of reserves that an organisation should maintain. It was explained that there had been no formula on what levels of reserve would be expected by the Charity Commission but there were expectations on how reserves were managed and designated.
- c. It was explained that the application process was not as difficult as had been expected. The challenge for the Charity Commission was recognising and understanding the difference between registrants and members, and also defining the status of GOC as it regarded it as a lobbying organisation. Resolving this misunderstanding did delay the application.
- d. Members asked if there had been any additional regulatory burden on the GOC. It was thought that there had not been any additional burden. The Charity Commission forces a rethinking on reporting and subsequently improves reporting rather than adding a burden. There was no additional burden on Council members as they had become more used to the changes as time progressed. One of the areas of difficulty had been the registrant trustee/board members and declarations of interest.
- e. Members asked about fees and expenses to Council members. This had not been an issue for the Charity Commission and, if fees and expenses were in primary legislation, then it did not apply.

38. The Chair thanked Samantha for her presentation and for attending the meeting.

**Agreed: Council agreed to make an application to the Charity Commission for charitable status.**

### **Item 10: Guidance for the PCC on Drafting Determinations**

39. The Head of Regulation introduced the item which proposed new guidance on drafting determinations which will enhance both the quality and consistency of the Professional Conduct Committee's (PCC) decision-making. While primarily produced for the PCC, it was intended that the guidance could also be of some assistance to the Health Committee.

40. It was added that a number of amendments had been incorporated since the last meeting to make the guidance more accessible.
41. In discussion the following points were made and responded to:
- a. Members asked for clarification under 'Responsibility for drafting the determination' where it stated that 'responsibility for producing the Committee's final determination ultimately rests with the Chair of the Committee hearing the case.'
  - b. The Head of Regulation explained that although the Chair had ultimate responsibility for the determination, the members had a collective responsibility and had to agree it.
  - c. Members also raised a concern about the template and wondered if it could be expanded to capture more detail to help facilitate the process. The Head of Regulation explained that the previous template had been over-prescriptive and it had been the intention to develop a more workable document, but the comment would be noted and discussed further.

**Agreed: Council agreed the draft Guidance for the Professional Conduct Committee on Drafting Determinations as set out at Annex B.**

### **Item 11: International Activities**

42. The Chief Executive introduced the item which concerned the strategic rationale for the GOsC's international activities in line with the Corporate Plan.
43. The Chief Executive highlighted the following:
- a. International osteopathy: in reviewing international relationships it was thought more appropriate for the GOsC to support those overseas stakeholders and forums with which the organisation has a relationship rather than take the lead.
  - b. Overseas registration and registrants: significant resources were invested in registering a small number of non-UK qualified registrants (less than 1% of the register) who have qualified overseas. As the number of these registrants is so small costs needed to be reviewed. There was also a question of UK-qualified registrants who practise elsewhere in the world. Although Council tried to make a decision in 2001 that a requirement of registration should be that registrants worked in the UK, this was not in accordance with the Osteopaths Act and the restriction could not be applied as a condition of registration. It was noted that a significant number of registrants work in countries which already have regulation.
  - c. Relationships and future directions: members were informed that the GOsC has very good and useful relationships with the Alliance of UK Health Regulators on Europe (AURE), the Osteopathic International Alliance (OIA),

the Australian Osteopathic Accreditation Council (AOAC), the Osteopathic Board of Australia (OBA), and the Osteopathic Council of New Zealand (OCNZ). It is planned to continue building on these relationships, with relevant competent authorities in the European Economic Area, and aim to develop a competent authority pathway for Australian and New Zealand osteopaths.

- d. Although FORE (Forum on Osteopathic Regulation in Europe) had made significant moves forward, it was suggested that GOsC should step away from such direct involvement while continuing to support a merger with the European Federation of Osteopaths (EFO).
  - e. In summary the Chief Executive said that the GOsC had an important role in Europe and beyond in assisting development in the regulatory arena but it remained important that the organisation remains focussed on its statutory functions.
44. Members asked if it would be feasible for another organisation to take on the role which the GOsC had undertaken, for example in relation to CEN. The Chief Executive responded that the GOsC played a major role in the CEN document but it was important to encourage other organisations to develop further.

**Agreed: Council agreed the future approach to international activities as set out at paragraph 37 of the paper.**

### **Item 12: Governance Handbook**

45. The Chief Executive introduced the item which set out a number of recommended amendments to the Governance Handbook in advance of the reconstitution of Council.
46. The Chief Executive also proposed that the meetings between the osteopathic educational institutions (OEIs) and the GOsC would be chaired jointly, without the involvement of the Chair of the Education and Registration Standards Committee.
47. It was added that a revised policy on whistleblowing would be completed and returned to Council in due course, taking into account learning from a recent PSA report.
48. In discussion the following points were made and responded to:
- a. Members supported the suggestion for changes to the OEI/GOsC meeting with the OEIs sharing responsibility for these.
  - b. Members were given assurances regarding the security of electronic payments which had been reviewed by the Audit Committee and external auditors.

**Agreed: Council agreed the amendments to the Governance Handbook as set out in the paper.**

**Item 13: Continuing Professional Development (CPD) – next steps**

49. The Head of Professional Standards introduced the item which concerned the next steps in the implementation of the GOsC's new CPD Scheme.

50. The Head of Professional Standards highlighted the following:

- a. If the mandate to proceed with the model set out in the paper was agreed the next stage would be to establish a governance structure to oversee the process. This would include detailed project management led by the Chief Executive and Senior Management Team, a Delivery Board which would include a number of osteopathic partners/stakeholders, and Council who would oversee the process.
- b. Implementation of the scheme would be in two waves:
  - Wave 1, comprising osteopaths who wished to engage in 'early adoption'.
  - Wave 2, comprising osteopaths who did not engage as 'early adopters' and required mandatory elements of the scheme to be in force before they complied.

51. In discussion the following points were made and responded to:

- a. Members were pleased with the phased approach to the proposal as it gave registrants an opportunity to get used to the scheme.
- b. Members suggested that terms of reference be established which would include a chart showing the structure of governance especially [that] between the Delivery Board and the Osteopathic Practice Committee.
- c. Members enquired if there were any areas of the scheme which had not been covered. It was pointed out that there might be isolated/sole registrants who might not be captured, but it was envisaged that the wider osteopathic community would assist in communications.
- d. Members were advised that the scheme would be very flexible as it was important to maintain a standard that would benefit patients.
- e. There was some concern about the time between 'early adoption' and the introduction of the mandatory elements. Was the time period long enough for meaningful feedback? It was agreed that time was a factor to be considered but a phased approach would be taken. It was suggested that March 2017 would be a good time to review.



52. In summary the Chair thanked the Head of Professional Standards for the work to date in developing the new CPD Scheme.

**Agreed: Council agreed the following:**

- a. The CPD model as outlined in figure 1 of the paper**
- b. The approach to governance as outlined in paragraphs 14-25 of the paper**
- c. A staged approach and the outline timetable for implementation of the CPD Scheme, recognising that this will be reviewed at regular stages as part of the project implementation plan.**

**Item 14: Review of the Osteopathic Practice Standards**

53. The Head of Policy and Communications introduced the item which outlined the plans for engaging stakeholders in the process of reviewing the 2012 *Osteopathic Practice Standards*.

54. The broad terms for the engagement process were set out as follows:

- a. The existing four themes for the OPS should be retained: communication and patient partnership; knowledge, skills and performance; safety and quality; professionalism.
- b. The OPS should continue to comprise both the Code of Practice and the Standard of Proficiency, as specified in the Osteopaths Act 1993.
- c. A call for evidence, using a diverse range of communications, which would target all stakeholders.
- d. A reference group comprising a range of stakeholders would be engaged to ensure a balanced approach to the analysis of pre-consultation feedback and the development of new draft standards.
- e. The scope of the review would embrace the four levels of standards and guidance outlined in the November 2015 paper to Council.

55. The Chief Executive advised members there was an important relationship to be acknowledged between the four themes of the *Osteopathic Practice Standards* and the proposed CPD scheme.

56. In discussion the following points were raised and responded to:

- a. Members commented that there could be an impact on RQ qualifications if there were significant changes made in the structure.
- b. Members commented on the timescale noting that there would be a lot of activity during July and that some registrants would be reluctant to take part with the amount of activity envisaged. The Head of Professional Standards

noted members' concerns and advised that the Executive were alive to the issues raised about timing and consultation fatigue.

**Agreed: Council agreed the following:**

- a. The principles of the Osteopathic Practice Standards review**
- b. To consider the pre-consultation approach**
- c. The timeframe for the review of the Osteopathic Practice Standards.**

**Item 15: Minutes of the Remuneration and Appointments Committee – 25 November 2015**

57. The Chair of the Remuneration and Appointments Committee had no additional comments relating to the minutes of the meeting.

**Noted: Council noted the minutes of the Remuneration and Appointments Committee.**

**Item 16: Minutes of the Audit Committee – 25 November 2015.**

58. The members of the Audit Committee had no additional comments relating to the minutes of the meeting.

**Noted: Council noted the minutes of the Audit Committee.**

**Item 17: Any other business**

59. There was no other business.

**Item 18: Date of the next meeting:** Thursday 5 May 2016 at 10.00