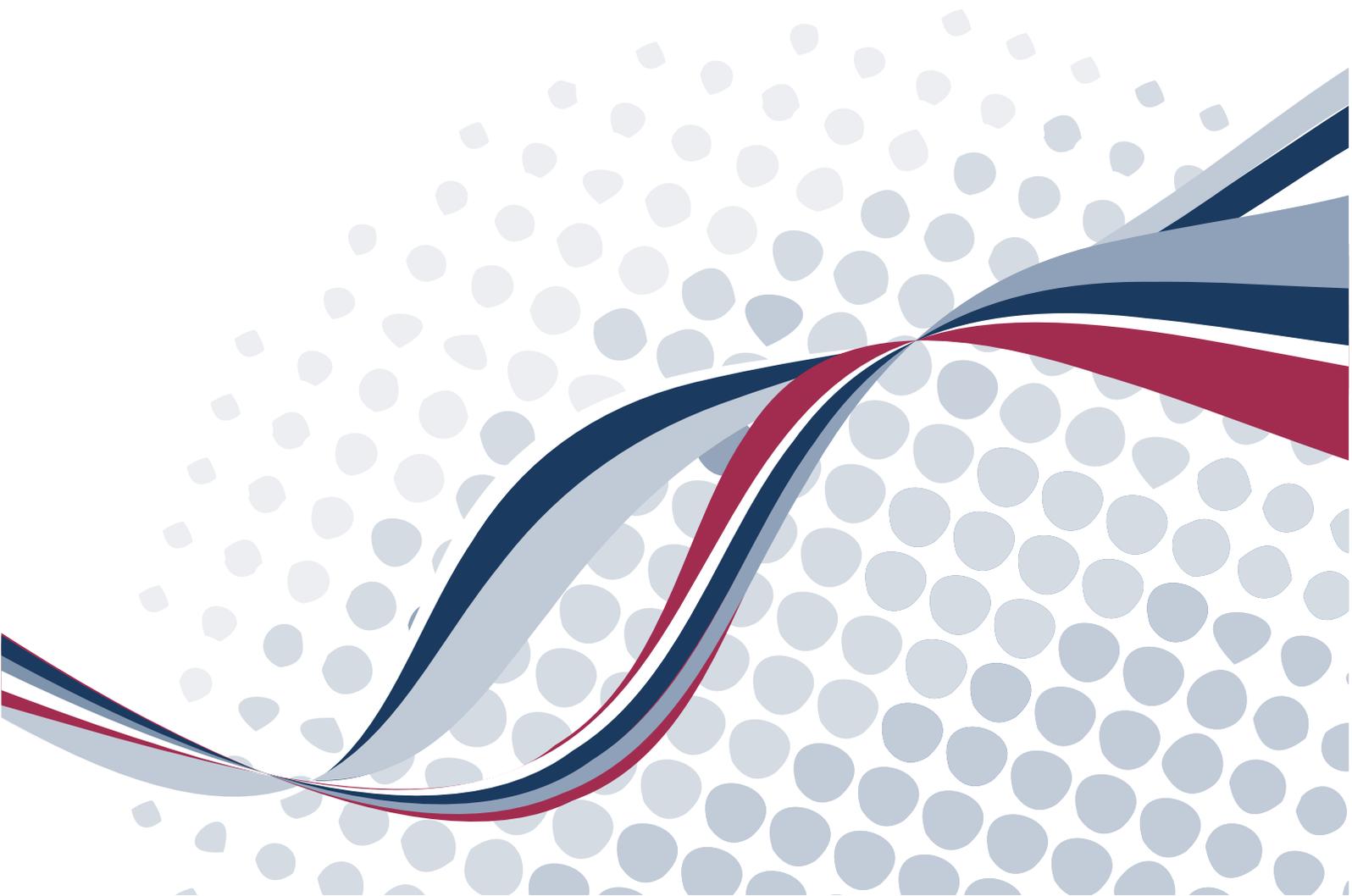




General
Osteopathic
Council

Corporate Plan

2013–2016



Introduction

This document sets out the priorities of the General Osteopathic Council (GOsC) for the next three years and has three main purposes:

- 1 It describes what Council wishes the organisation to achieve
- 2 It provides a mandate for the organisation's work programme, led by the Chief Executive and staff team
- 3 It provides a framework for the monitoring of the organisation's performance by Council.

The plan describes our goals and key activities against three main objectives. It also describes how we will seek to demonstrate we have achieved the required outcomes.

Each year we will publish a detailed Business Plan setting out the work we will undertake in order to meet our goals. Council will receive at each meeting a report of progress against the annual Business Plan.

Our statutory duty

The statutory duty of the GOsC is to 'develop and regulate the profession of osteopathy' in order to ensure public protection.

Our aim as a regulator is:

'To fulfil our statutory duty to protect public and patient safety through targeted and effective regulation, working actively and in partnership with others to ensure a high quality of patient experience and of osteopathic practice.'

High-level strategic objectives 2013-16

We will be guided by three high-level strategic objectives over the course of the three-year planning cycle from 2013-16:

- 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.

Goals and activities 2013-16

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

GOALS

To ensure that initial education and training is of high-quality and is fit for purpose in an evolving healthcare and higher education environment

ACTIVITIES

- > We will quality assure 'Recognised Qualifications' including undertaking reviews and analysis of Annual Report submissions from the osteopathic educational institutions, and responding to concerns
- > We will produce guidance for osteopathic pre-registration education, developed with a wide variety of stakeholder input, publishing proposals, consulting and implementing changes in partnership with osteopathic educational institutions (OEs), the osteopathic profession, patients and others
- > We will support high standards of professional behaviours in students through student fitness to practise guidance, evaluation and ongoing activity
- > We will ensure the effective training and appraisal of educational Visitors undertaking quality assurance visits
- > We will develop proposals on changes to our quality assurance processes, consult on these and implement any changes
- > We will ensure the effective alignment of standards and quality assurance
- > We will work with the OEs to support the enhancement of educational expertise and professional role modelling within the academic and clinical faculty
- > We will support enhanced patient involvement in the delivery of osteopathic education
- > We will work with the OEs to ensure that osteopathic education continues to meet contemporary expectations of multi-professional healthcare.

GOALS

To increase understanding of the importance of the register and to make it more meaningful to patients and others

To work in partnership with the osteopathic profession to ensure that new osteopaths have access to appropriate support in their transition into practice

To ensure that through an appropriate process, registrants are able to demonstrate their continuing ability to meet the *Osteopathic Practice Standards*

ACTIVITIES

- > We will increase awareness of the register with patients and the public – working directly with patients and through the osteopathic profession – to foster a greater understanding of the role of the regulator
 - > We will increase knowledge and understanding of osteopathic regulation within the wider healthcare community (including health insurers, service commissioners, systems regulators and other professional regulators)
 - > We will work with professional bodies and educators to determine an appropriate approach to developing and recognising specialist practice (including research/teaching)
 - > We will take appropriate action against unregistered individuals describing themselves as osteopaths, prosecuting those who do not desist from doing so
 - > We will continue to work towards the development of international standards and mutual recognition.
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- > We will develop and consult on proposals to support new graduates' clinical practice in partnership with other organisations including osteopathic educational institutions, the British Osteopathic Association (BOA) and special interest associations.
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- > We will publish proposals for a proportionate framework for continuing fitness to practise taking into account responses to the Continuing Professional Development (CPD) Discussion Document consultation and the Revalidation Pilot (see page 6)
 - > We will consult on and implement a new approach to continuing fitness to practise, developing and providing resources to support practitioners as appropriate.

GOALS

To ensure that the fitness to practise processes protect patients and uphold standards in osteopathy, through firm, fair and timely handling of complaints about osteopaths

ACTIVITIES

- > We will investigate allegations made against osteopaths and manage the adjudication process for complaints where a case to answer has been found
- > We will identify areas for process improvement and implement them as appropriate
- > We will use the outcomes of adjudication to inform our other activities to ensure public and patient safety and uphold standards in the profession
- > We will liaise with other stakeholders (such as the BOA and insurers) to maximise understanding of fitness to practise concerns in osteopathic practice
- > We will review options for fitness to practise reform including a joint tribunal service with other regulators and possible approaches to mediation.

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

GOALS

To ensure that through an appropriate process, registrants are encouraged continually to enhance and improve their practice

ACTIVITIES

- > We will publish proposals for a proportionate framework for continuing fitness to practise, taking into account responses to the CPD Discussion Document consultation and the Revalidation Pilot which supports a commitment to continually enhance practice and builds on practitioner autonomy (see also previous page).

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

- > We will issue supplementary guidance as agreed by Council
- > We will evaluate awareness of the standards among registrants and their effectiveness in practice
- > We will undertake a communication and engagement programme to address deficiencies and foster the development of osteopathy as a modern healthcare practice
- > We will develop and provide appropriate resources to support continuing professional development relating to the *Osteopathic Practice Standards*.

GOALS

To work in partnership with others to develop high quality, patient-centred osteopathic care

To work in partnership with others to support practice that promotes professional standards and values across the osteopathic profession, while reducing practitioner isolation

ACTIVITIES

- > We will encourage the use by osteopaths of tools to increase patient awareness of osteopathic practice standards
 - > We will seek to increase the level of public and patient engagement and feedback, including patient data collection, to develop and support high quality care
 - > We will encourage the development of clinical governance activities in osteopathy, including clinical guidelines, clinical audit and adverse event reporting
 - > We will continue to support the development of a research infrastructure within osteopathy.
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- > We will support capacity building of organisations and individuals for development of the profession independent of the regulator
 - > We will support and develop networks that encourage and facilitate mentoring, peer support and CPD activity
 - > We will support the development of a consensus around community values and behaviours informed by osteopaths, patients and the wider healthcare environment
 - > We will cooperate internationally to develop consistency and conformity in standards, and influence the international regulatory agenda.

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

GOALS

To continue to enhance the quality of service provided by the GOsC to patients and registrants

To engage effectively with, patients, the public, educators, osteopaths, other healthcare professionals and other key stakeholders for the delivery of our strategic objectives

ACTIVITIES

- > We will identify opportunities for improving customer service/service standards arising from patient and registrant feedback
 - > We will survey patients and registrants to test the effectiveness of GOsC customer service using the results of the Osteopaths' Opinion Survey 2012 as a benchmark
 - > We will review the online experience the GOsC website offers to patients and registrants, and continue to introduce new resources and functionality in our online services
 - > We will implement an internal audit programme to periodically audit areas of GOsC business to test robustness of data quality and control mechanisms, and implement any necessary changes
 - > We will continue to maintain high standards of information security and ensure business continuity
 - > We will work towards implementing a single point of contact and improved journeys for customer interactions.
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- > We will develop our communications strategy to support the changes described in this Corporate Plan
 - > We will provide stakeholders with a choice of communications and engagement channels
 - > We will ensure key areas of policy development are assessed at the outset to ascertain patient involvement requirements and develop patient impact assessments
 - > We will seek to leverage our communications efforts through a partnership approach wherever possible.

GOALS

To ensure that our governance is appropriate and effective

ACTIVITIES

- > We will move towards a leaner governance structure and aim to reduce costs and increase effectiveness, including through developing new ways of working
- > We will ensure that we meet our statutory duties under the Equality Act 2010 and other legislation and embed good practice in equality and diversity in all our work
- > We will develop and implement a corporate social responsibility policy
- > We will implement mechanisms for understanding and improving the effectiveness of our governance
- > We will ensure that our appointments meet Professional Standards Authority (formerly known as CHRE) best practice standards.

To continue to improve value for money in everything that we do

- > We will continue to examine the cost base to ensure resources used represent value for money
- > We will identify sustainable cost savings to ensure the GOsC offers a more cost-effective model of regulation with lower fees for registrants
- > We will ensure organisational processes are reviewed to maximise the efficient and effective delivery of services
- > We will identify new ways of working to maximise efficiency and reduce costs and ensure procured services represent value for money
- > We will ensure the GOsC holds sufficient reserves to meet unforeseen events.

To undertake a fundamental review of our Rules as part of the transition to a new Act

- > We will continue to engage with the Law Commission, Department of Health and Parliament on proposed changes to legislation
- > We will prepare new processes and systems to anticipate fundamental changes in our legislation, including drafting, consulting and implementing new Rules.

How we will measure our performance

Sources of assurance

The Council of the GOsC, supported by the Audit Committee, is responsible for ensuring that the organisation meets its statutory duty.

Council holds the Chief Executive to account for the delivery of the Corporate Plan, annual Business Plan, budget, risk mitigation and organisational performance. It also ensures that appropriate audit, control and assurance systems are in place.

External accountability includes an annual Performance Review and other audit activity carried out by the Professional Standards Authority (PSA), and an Annual Report which is laid before Parliament.

Performance measures

We will measure the effectiveness of the organisation in two different ways:

- 1 Through the regular publication of key performance indicators (KPIs)
- 2 Through an annual 'balanced scorecard' assessment.

KPIs will include:

- a Time taken to process registration applications and renewals
- b Number of fitness to practise complaints and proportion screened against target
- c Age of cases screened
- d Age of cases heard by Professional Conduct Committee
- e Income and expenditure against targets
- f Response times for letters, emails and calls against service targets
- g Registrant CPD audits
- h Staff absence and turnover.

Our 'balanced scorecard' will assess performance across a wider range of both soft and hard measures. Using the balanced scorecard approach we will review whether the GOsC is:

- > Meeting its statutory functions
- > Delivering benefit to stakeholders
- > Effectively and efficiently led and managed.

We will test our performance using a range of performance measures to underpin the scorecard as set out on pages 11 and 12.

Meeting our statutory functions

OUTCOME

Judged to be an effective regulator

PERFORMANCE MEASURES

- > PSA Annual Performance Review
- > Privy Council default powers not exercised.

Statutory decisions are timely

- > Registration performance
- > Fitness to practise performance
- > Recognised Qualification (RQ) processing
- > CPD audit statistics
- > Complaints information.

Statutory decisions are sound

- > Registration appeals
- > Fitness to practise appeals
- > QAA evaluation and feedback
- > PSA audits
- > Complaints information.

Delivery of benefit to stakeholders

OUTCOME

Public have access to appropriate information and are effectively supported and protected

PERFORMANCE MEASURES

- > Web statistics/surveys
- > Performance against email/mail/phone service standards
- > Fitness to practise hearing feedback
- > Section 32 enforcement
- > RQs and conditions
- > How we are meeting our principles of public and patient involvement.

Registrants are engaged in the development and implementation of standards

- > Registrant survey
- > o zone statistics/surveys
- > CPD audits
- > Leaver information
- > Participation in GOsC events and consultations.

Effective and efficient leadership and management

OUTCOME

Council provides effective leadership of the organisation

GOsC is well managed and we deploy our resources to achieve maximum value and benefit

Staff are well-led, motivated and able to deliver the requirements of the organisation

PERFORMANCE MEASURES

- > Council effectiveness measures.
- > Financial audit
- > Other internal audits
- > Benchmarking of value for money with other regulators
- > Complaints information.
- > Appraisal and training needs analysis
- > Staff survey
- > Staff turnover
- > Absence.

Principles that underpin the work of the GOsC

The GOsC is committed to conducting all its activities as a regulator and an employer based on a number of key principles:

Proportionality

We will ensure that the regulatory burden is no greater than it needs to be to deliver our statutory duty, focusing our resources on areas of risk to public protection and where there is scope to achieve the most in terms of improving standards of osteopathic practice.

Fairness

We will be consistent in the development and application of our policies and procedures in order to ensure fairness, with the aims of promoting equality, valuing diversity and removing any unfair discrimination shaping all our activities.

Accountability

We will publicise our actions and decisions, wherever possible, ensuring that the information is clearly explained and easily accessible. We will explain how we have taken our stakeholders views into consideration in developing policy and in improving our performance. Council will seek to exemplify high standards of governance.

Anticipation

We will monitor trends in healthcare, regulation, osteopathic practice and education, in order to respond effectively to change and to support the osteopathic profession to respond accordingly.

Inclusivity

We will respond to the needs of patients, the public, registrants and other stakeholders, taking their views into account in deciding the most effective way to carry out our regulatory functions and working in partnership with others, where appropriate, to achieve our goals.

Efficiency

We will foster a culture of innovation and continuous improvement, taking steps to benchmark our performance periodically and setting targets to achieve best practice. We will use our resources efficiently, seeking to achieve further efficiencies without compromising the quality of our work.



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