

# **General Osteopathic Council**

**Annual Report and Accounts 2015-16**



General  
Osteopathic  
Council



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Annual Report and Accounts 2015-16**

Presented to Parliament pursuant to section 40(5) of the *Osteopaths Act 1993*

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# 1. About the General Osteopathic Council

The General Osteopathic Council (GOsC) has a statutory duty to develop and regulate the osteopathy profession in the UK 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.*

Our core functions are:

- assuring the quality of osteopathic education and training
- registering qualified professionals on an annual basis and ensuring their continuing fitness to practise
- setting and promoting high standards of osteopathic practice and conduct
- helping patients with complaints or concerns about osteopaths and, where necessary, dealing with those complaints through fitness to practise procedures.

At 31 March 2016 we registered just over 5,100 osteopaths.

## 2. Chair's statement



The past year has been an important one in a number of aspects. Significantly, the Department of Health (England), at our request, consulted on reducing the size of the GOsC Council from 14 to 10 members. This change took effect from 1 April 2016, when a new Council took office following a major recruitment exercise for new Council members. This also meant that eight of our former Council members stood down, and I want to thank them for their hard work and dedication throughout their periods in office.

I also wish to highlight the successful completion of our 2013-16 Corporate Plan, which contained both an ambitious programme of work and a strong commitment by the GOsC to work more closely with a range of partner organisations. This strength and breadth of activities was recognised when we were judged once again by the Professional Standards Authority (PSA) to meet all the standards of good regulation.

The end of one corporate plan marks the beginning of another. Council and the GOsC executive team have worked hard on developing a new Corporate Strategy for 2016-19 which renews our commitment to 'patient-centred, proportionate, targeted and effective regulatory activity'. It also continues to reflect our commitment to strong partnerships and seeks to develop the capacity of the osteopathic profession to deliver higher standards of treatment and care.

Many of our projects take more than a year to implement. This year we commenced work on a review of the current *Osteopathic Practice Standards* and completed consultation on our new continuing professional development scheme. These are major pieces of work, with real significance for the development of the profession. Both will come to fruition in the period of the new Corporate Strategy, and both will continue to guide and support osteopaths to meet the needs and expectations of their patients.

I was honoured that in September 2015 the Privy Council reappointed me as Chair of Council for a further four-year term. It has been a privilege to serve the GOsC during my first term and I relish the challenge of the next four years.

**Alison J White**  
Chair  
12 July 2016

## 3. Chief Executive and Registrar's introduction

The GOsC passed a small landmark during the course of 2015-16 when the Register of osteopaths exceeded 5,000 for the first time. Although this figure includes some osteopaths working abroad, it suggests that the profession remains in a healthy state, despite the severe recession from which the UK has now emerged.

The health of a profession working largely in the private sector depends on a continued demand from a patient population that not only benefits from the care they receive, but has confidence that the profession both works to high standards and is held to account for meeting those standards.

All regulators expend a significant amount of time and resource on fitness to practise activities. While these are essential for protecting the public and maintaining confidence in the osteopathic profession, we do not see this as the most important part of our role.

The work that we describe in this Annual Report – quality-assuring education, promoting continuing professional development and embedding the *Osteopathic Practice Standards* – are all aimed at promoting high standards of care and a quality experience for all osteopathic patients. Our view is that the more we can do to promote the highest standards, the less the likelihood that complaints will be made about osteopaths, something that is in the best interest of patients and practitioners alike.

This is also why we continue to work in partnership with other groups within the profession to help support the profession's development. This year we report significant progress with the projects that we have helped to initiate through the Osteopathic Development Group. We are grateful for the commitment of all our partners in continuing to help take this work forward.



We also believe that effective regulation requires ongoing engagement with registrants. The more that we understand the concerns of individual osteopaths and the effects of our work on day-to-day practice, the more effective our work will be. That is why we continue to dedicate a significant amount of time and resources to our communication activities.

We hope all those we work with will find encouragement from what is contained in this report and we look forward to a further year of progress for ourselves, the profession and those who benefit from osteopathic treatment and care.

A handwritten signature in blue ink, appearing to read 'Tim Walker', with a horizontal line underneath.

**Tim Walker**  
Chief Executive and Registrar  
12 July 2016

# 4. Our work in 2015-16

This Annual Report reflects the work of the General Osteopathic Council in the year to 31 March 2016.

In 2013, the GOsC's Council approved a new three-year Corporate Plan which set out what the organisation aimed to achieve in the period 2013-16. The new Corporate Plan included our revised aim as a regulator:

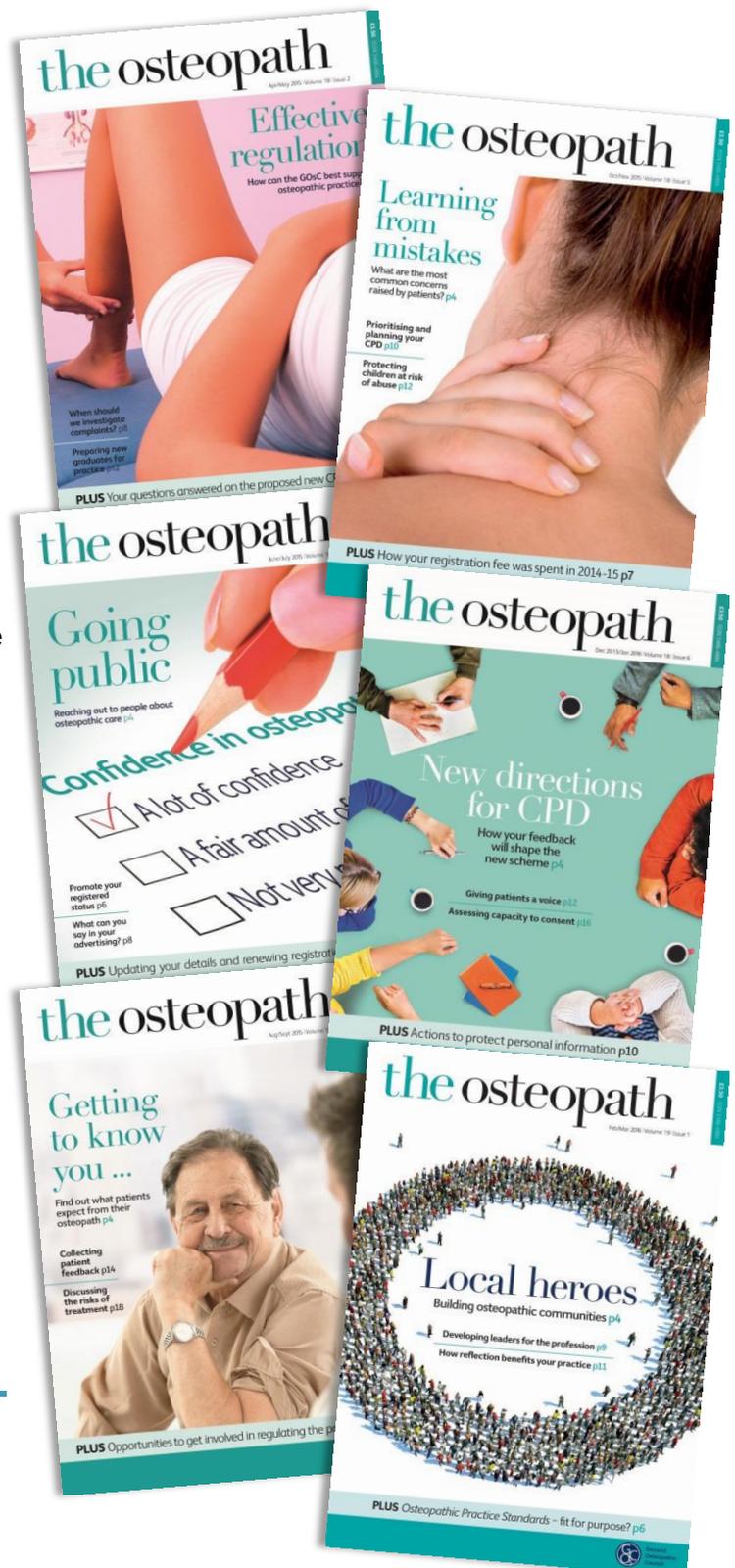
*'To fulfil our statutory duty to protect public and patient safety through targeted and effective regulation, working actively and in partnership with others to ensure a high quality of patient experience and of osteopathic practice.'*

This aim was underpinned by three high-level strategic objectives which set the course of the three-year planning cycle from 2013 to 2016:

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

This report describes what we have achieved in the final year of this three-year plan.

*Through our regular magazine and other communications (see pages 16-17), osteopaths were informed about our work this year and encouraged to participate*



## Objective 1: Promoting public and patient safety through proportionate, targeted and effective regulatory activity

Our job as a regulator is to protect the public. We do this by ensuring that only appropriately qualified individuals can practise as osteopaths, and that they meet the standards expected of them throughout their careers.

### **Education, training and professionalism**

The majority of osteopaths working in the UK qualify from UK-based osteopathic educational institutions. An important part of our role as a regulator is to ensure that these institutions continue to provide high-quality education and training.

There were no renewal of recognition reviews in 2015-16, although one targeted review took place at the Surrey Institute of Osteopathic Medicine in relation to an accelerated learning pathway for its Master of Osteopathy programme.

We continued to monitor any conditions imposed following previous reviews, and reviewed the annual monitoring reports which the GOsC requires of all osteopathic educational institutions. This work also included undertaking regular monitoring relating to the closure of the programmes at Oxford Brookes University in 2016 and Leeds Beckett University in 2017.

In preparation for renewal of recognition reviews taking place in 2016-17, we approved review specifications and provided training to quality-assurance visitors, in conjunction with the Quality Assurance Agency for Higher Education (QAA).

A major piece of work that commenced in 2015-16 was the updating of guidance for students and osteopathic educational institutions on student fitness to practise and on disabilities and long-term health conditions. The current guidance was first produced in 2012, and we have taken the opportunity to expand the guidance and provide a range of case studies and other materials to support the use of the guidance. The new guidance will be published in 2016.

GOsC staff continued their programme of visits to osteopathic educational institutions, speaking to students (prior to their clinical training and before graduation) about their responsibilities as clinicians and as future regulated healthcare professionals. This year we met 254 final-year students at 10 different institutions.

### **Osteopathic educational institutions offering Recognised Qualifications**

British College of Osteopathic Medicine  
 British School of Osteopathy  
 College of Osteopaths (validated by Middlesex University), Hertfordshire  
 College of Osteopaths (validated by Staffordshire University), Staffordshire  
 European School of Osteopathy  
 Leeds Beckett University  
 London College of Osteopathic Medicine (for medical doctors only)  
 London School of Osteopathy  
 Oxford Brookes University  
 Surrey Institute of Osteopathic Medicine  
 Swansea University



### Protecting and promoting registration

Controlling entry to the Register of osteopaths is central to the GOsC's regulatory role. The Register is available online at: [www.osteopathy.org.uk/register-search](http://www.osteopathy.org.uk/register-search) and is updated daily.

As well as admitting new UK applicants to the Register, a significant part of our work in this area involves assessing applicants from overseas and those who are returning to practice after a period when they have not been registered.

The number of registered osteopaths in the UK continues to grow. In 2015-16, there were 326 registrants joining the Register: a net growth of 127 or 2.6 per cent. We expect this slight but steady growth to continue for the foreseeable future.

Place of training	Number joining the Register
British College of Osteopathic Medicine	41
British School of Osteopathy	104
College of Osteopaths	15
European School of Osteopathy	49
Leeds Beckett University	17
London College of Osteopathic Medicine	3
London School of Osteopathy	19
Oxford Brookes University	27
Surrey Institute of Osteopathic Medicine	24
Swansea University	16
Overseas applicants	11
<b>Total</b>	<b>326</b>

As at 31 March 2016, there were 5,102 osteopaths registered with the GOsC.

Gender	Number
Female	2,561
Male	2,541
<b>Total</b>	<b>5,102</b>

Geographical location of the profession	Number
England	4,356
Northern Ireland	23
Scotland	156
Wales	135
Rest of world	432
<b>Total</b>	<b>5,102</b>

Our team of trained registration assessors, all of whom are qualified osteopaths, undertook a total of 60 registration assessments in 2015-16.

Type of assessment	Number
Non-UK Qualification Assessment	25
Further Evidence of Practice Assessment	6
Assessment of Clinical Performance	6
Return to Practice Interview	23
<b>Total</b>	<b>60</b>

In Europe the mobility of osteopaths between countries is governed by the EU Directive on the recognition of professional qualifications. The Directive has recently been amended, and new requirements came into effect on 18 January 2016. In preparation for this change, we reviewed and implemented revised registration assessments for EU applicants and provided training for our registration assessors.

We continued to promote our Registration Marks, which were introduced in 2014. We have now issued over 1,500 marks, for use on websites and printed materials, to individual osteopaths and practices.

We are pleased that online registration renewals continue to increase, with over 70 per cent of osteopaths now renewing in this way. This is an increase from the 30 per cent who renewed online before our online registration system was upgraded last year.

An important part of maintaining the integrity of the Register of osteopaths is the identification of individuals who appear to be practising without registration. In 2015-16 we initiated one successful prosecution for breach of section 32 of the *Osteopaths Act 1993*.

### Ensuring high standards of practice

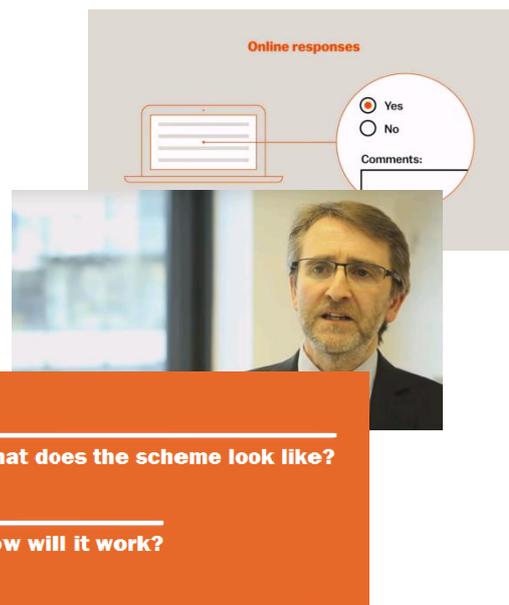
Once an osteopath is registered with the GOsC, it is important that they remain up to date and fit to practise. At present, osteopaths are required to undertake 30 hours of continuing professional development (CPD) each year, of which 15 hours must include 'learning with others'.

During the course of each year, we aim to scrutinise 20 per cent of all osteopaths' annual CPD summaries to ensure that they comply with our CPD guidelines, and we aim to undertake a more in-depth review of 2 per cent of osteopaths who are asked to present more detailed evidence in support of their CPD activities. In 2015-16 we improved our performance, meeting both of these targets and clearing a backlog of audits from 2014-15. In the course of the year, 28 osteopaths were removed from the Register for non-compliance with the CPD requirements.

We commenced an extensive consultation on our proposed new CPD scheme at the end of the previous financial year. This was one of the most extensive consultations ever undertaken by the GOsC.

During the course of the consultation, which concluded in 2015-16, we held 17 separate engagement events and, in conjunction with the Institute of Osteopathy, held an online 'webinar'. This enabled us to engage face-to-face with over 500 registrants, more than 10 per cent of the osteopathic profession. In addition our consultation website received more than 4,800 visitors, who downloaded over 1,500 documents and viewed our consultation video nearly 800 times.

In total we received nearly 380 responses to our online consultation or responses completed at events. All of this feedback was analysed independently and demonstrated a high level of support for the scheme, which was then endorsed by Council. We will be using the feedback we received to fine-tune the scheme as we roll it out over the next few years.



**What does the scheme look like?**

**How will it work?**

*The video accompanying the consultation on a new CPD scheme was viewed nearly 800 times*

### Dealing within concerns and complaints

It is our duty under the *Osteopaths Act* to investigate any concern raised with us about an osteopath. These concerns may be raised by a patient, a member of the public, or another osteopath or healthcare professional.

We will always discuss such concerns in confidence and help the individual decide whether or not they wish to make a formal complaint. In 2015-16, 52 formal complaints were made to us (an increase of 10 over the previous year).

During the course of the year, the GOsC's Investigating Committee (described on page 43) completed consideration of 35 new cases. Of these, 27 were referred to a full hearing; in the other eight cases, it was determined that there was no case to answer.

Over the course of the year, the Professional Conduct Committee (described on page 43) heard 18 new cases; in 11 of those cases, there was a finding against the osteopath.

In 2015-16, two cases were heard by the Health Committee (described on page 43).

Findings in cases considered by the Professional Conduct Committee 2015-16	Number of cases
Not proved	3
Admonished	4
Conditions of practice	1
Suspended	3
Removed	3
Ongoing	4
<b>Total</b>	<b>18</b>

The fitness to practise process continues to evolve over time in response to changes in the law and best practice across the regulators. This year we made a number of changes to policies and procedures, including implementing a new bank of conditions for use in Health Committee hearings, and introducing new practice notes on the use of character evidence and on acting in the public interest.

We also implemented new threshold criteria which allow some cases to be closed at an early stage if they do not meet the criteria necessary to be considered unacceptable professional conduct. This is a useful tool to ensure that fitness to practise action is only taken in appropriate circumstances.

We improved the operation of our hearings and improved the security of sensitive information through the introduction of electronic case papers for all fitness to practise committees.

We aim to ensure that all of our investigations and hearings are concluded as quickly as possible. Our target for the initial investigation of complaints is 16 weeks, and for the conclusion of the entire process, 52 weeks: targets that are at the shorter end of those set by other healthcare regulators. In 2015-16, the median time for investigating a complaint was 14 weeks, and the median time for concluding a hearing by the Professional Conduct Committee was 43 weeks. When a case exceeds these targets, this is often the result of delays outside our control (for example, the involvement of the police in an investigation).

Throughout the year we have been subject to a sustained campaign by a pressure group submitting complaints to the GOsC about advertising by osteopaths. Advertising in the UK is subject to regulation by the Advertising Standards Authority (ASA), and we have sought to encourage the direction of these complaints to the ASA. Nevertheless, we believe it is important that osteopaths comply with the requirements established by the ASA's Committee of Advertising Practice (CAP); not to do so would be a potential breach of the *Osteopathic Practice Standards*. In managing these complaints we have sought to give osteopaths the opportunity to comply with the ASA requirements, and we have also worked closely with the ASA and the Institute of Osteopathy to improve compliance with advertising standards. While we have ensured that all of the complaints submitted to us have been dealt with appropriately, at all times we have prioritised matters relating to patient protection. The number of complaints received relating to advertising is not included in the figures above.



## Objective 2: Encouraging and facilitating continuous improvement in the quality of osteopathic healthcare

Last year we reported on the publication of important new research that we commissioned from Oxford, Nottingham and Warwick Universities, led by Professor Gerry McGivern: *Exploring and explaining the dynamics of osteopathic regulation, professionalism and compliance with standards in practice*. This research has done much to inform our ongoing thinking in relation to the way we regulate the osteopathic profession.

### Developing guidance and standards

In 2015-16 we commenced work on the review of the *Osteopathic Practice Standards* which were first published in 2011. As an initial part of the review and guided by our commissioned research, we have decided that an important focus for the review will be to identify those areas where we can produce more guidance for osteopaths to support their understanding about how the standards can best be used in practice.

To support the review we have sought evidence from osteopaths and others on the effectiveness of the current standards and the areas where they help (or hinder) good practice. This call for evidence involved the use of an interactive website allowing respondents to comment on individual standards and for others to contribute to debate on the points made.

We also continued our work with the Collaborating Centre for Values-based Practice, holding a further seminar in May 2015 on the relationships between osteopaths' and patients' values and their links to practice standards.

### Improving quality and patient care

Across the regulators, there is a growing interest in the analysis of data to support greater understanding of the demographic profile of those practitioners who might be more at risk of being subject to a complaint. In 2015-16 we commissioned a preliminary study of the data that we hold in relation to osteopaths who had a complaint considered by the Investigating Committee. While the volume of data is small, this has been a valuable exercise which we will use to guide further work in this area.

The data that we hold as a regulator has been supplemented through continued joint work with the Institute of Osteopathy and a number of providers of professional indemnity insurance, in producing an aggregate annual report on complaints, claims and concerns raised about osteopaths. This is also providing us with valuable insight into where problems arise in osteopathic practice and will be used to inform the review of the *Osteopathic Practice Standards* and the production of new guidance.

The screenshot shows the 'Osteopathic Practice Standards Review' website. At the top, there is a navigation bar with links: Home, About the review, The Standards, Review update, and Contact us. Below this is the General Osteopathic Council logo and the title 'Osteopathic Practice Standards Review'. A row of four images represents different standards: 'Communication and patient partnership', 'Knowledge, skills and performance', 'Safety and quality in practice', and 'Professionalism'. The 'The Standards' section is expanded to show 'Communication and patient partnership' with a list of standards (A1 to A6). A 'Next Standard >' link is visible. Below the standards list is a comment form with a text area, 'Name (Optional)', 'Email (Optional)', a dropdown for 'In what role are you commenting?', and a 'Post Comment' button.

*An interactive website collected comments on each of the Osteopathic Practice Standards as part of a comprehensive review*

### **Developing the osteopathic profession**

Our role encompasses the development as well as the regulation of UK osteopathy. We continue to work with leading osteopathic organisations on a shared agenda to further develop the profession. We contribute to this work where we can identify a tangible benefit to patient safety or the quality of patient care.

Along with the GOsC, the other members of the Osteopathic Development Group (ODG) are:

- the Council for Osteopathic Educational Institutions, representing all educational institutions offering osteopathic pre-registration courses
- the Institute of Osteopathy (formerly the British Osteopathic Association), the professional association for UK osteopathy
- the National Council for Osteopathic Research, the umbrella body responsible for fostering osteopathic research development
- the Osteopathic Alliance, representing most of the independent osteopathic postgraduate development and training providers.

The ODG is continuing to work on eight core projects. In 2015-16, significant progress has been made in the following areas:

- leadership development – a first cohort of 20 osteopaths completed a bespoke leadership programme which was designed and delivered in conjunction with the Open University
- international collaboration – a new website [www.osteointernational.uk](http://www.osteointernational.uk) has been introduced, bringing together a wide range of resources relating to osteopathy around the world
- patient reported outcomes measure (PROM) database development – a pilot study of a PROM tool was concluded and roll-out to the profession has commenced
- support for regional osteopathic groups – a new manual has been published to help nascent groups establish themselves and for existing groups to share best practice.



*The Osteopathic Leadership Programme was oversubscribed in its first year, and was successfully completed by all 20 participants*

The remaining four projects are at an earlier stage of development but will progress further in the coming year. These projects are:

- advanced clinical practice
- mentoring for recent graduates
- career development
- service standards.

Information about the ODG and its work can be found at: [www.osteodevelopment.org.uk](http://www.osteodevelopment.org.uk)

### **International activities**

Since its establishment, the GOsC has played a leading role in encouraging the development of regulation across the EU and more widely. Through its involvement in the Forum for Osteopathic Regulation in Europe (FORE), we helped initiate the development of new pan-European standards for osteopathy that were published in April 2015 following a three-year development process with the Comité Européen de Normalisation (CEN), see [www.cen.eu](http://www.cen.eu)

In 2015, Council took a decision that in the coming year we would reduce our commitment to international developments and would relinquish the secretariat of FORE. While we will continue to be active internationally, our principal focus will be on building links and joint working with competent authorities primarily in Europe and Australasia.

## Objective 3: Using our resources efficiently and effectively, while adapting and responding to change in the external environment

### Operational efficiency and effectiveness

In 2015-16 we have maintained the current level of fees paid by registrants and we continue to maintain a focus on seeking efficiency savings across all of our functions.

As part of this work, this year we brought together our CPD auditing and registration assessment functions with our finance and registration team. We now have a single integrated team that is able to deal with the whole range of registration and finance functions in a 'one-stop shop' for current registrants and applicants.

We have maintained our focus on ensuring high standards of information security. Unfortunately in 2015-16 we experienced one incident that we assessed to be serious enough to be reported to the Information Commissioner's Office (ICO). We were pleased that the ICO considered we had managed the incident appropriately and took no further action.



### Communicating and engaging with our stakeholders

Communication and engagement play an important role in our work, not only in explaining what we do but also in understanding public needs and ensuring that registrants are provided with appropriate support and information.

In 2015-16 we consulted publicly on:

- our proposed new continuing professional development scheme (see page 12)
- how we could improve the *Osteopathic Practice Standards* and associated guidance (see page 14)
- a bank of conditions for the use of the Health Committee
- interim suspension orders
- drafting of determinations by fitness to practise committees
- guidance for students and osteopathic educational institutions on student fitness to practise, and health and disability (see page 10).

In all of our consultations we seek to involve not just registrants but a full range of stakeholders and to make use of our Patient Partnership Group and our developing links with local Healthwatch groups.

We have also sought to use new and innovative approaches to consultation, including producing short videos explaining our policies as well as using 'webinar' technology for face-to-face interaction with people who are unable to attend consultation events.

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*The Osteopathic Practice Standards review and the proposed new CPD scheme were among the topics discussed at the March 2016 Regional Communications Network meeting*

We continue to publish our registrant magazine, *the osteopath*, six times each year, along with monthly update e-bulletins for registrants. Social media – Facebook and Twitter – are playing an increasingly important part in our communication work, with each service reaching over 1,500 and 1,700 users respectively in 2015-16.

We worked closely with regional groups of osteopaths throughout the year. This year, again, we held our Regional Communications Network meeting in conjunction with the Osteopathic Development Group. Over the course of the year, we attended 17 regional group meetings across the UK to give presentations on the GOsC's work and engage with registrants at a local level.

### **Promoting equality and diversity**

We are committed to equality and diversity. In our work with the profession, patients and the public, our objectives are to:

- ensure our regulatory framework is fair and free from discrimination
- promote professional values that protect a diverse public
- promote equality of opportunity and access to the osteopathic profession
- ensure a system of governance for the GOsC that supports equality and diversity
- ensure high standards in the recruitment and employment of our staff.

Our Equality and Diversity Policy is available on our website at: [www.osteopathy.org.uk/about-us/our-work/equality-and-diversity](http://www.osteopathy.org.uk/about-us/our-work/equality-and-diversity)

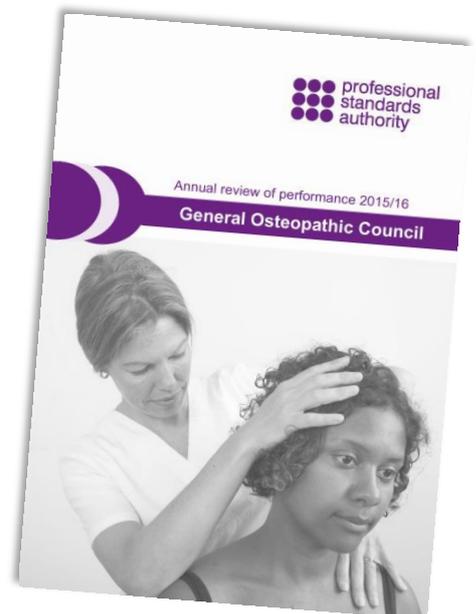
We are required under the *Welsh Language Act 1993* to publish a Welsh Language Scheme and to report annually to the Welsh Language Commissioner. Our scheme, which provides that in the conduct of public business in Wales we will treat the English and Welsh languages equally, was approved by the Welsh Language Board in 2011; we report annually to the Board on its implementation.

### **Improving governance and performance**

In 2015, at the request of the GOsC, the Department of Health (England) consulted on a reduction in the size of the GOsC Council from 14 to 10 members. As a result of this reconstitution of Council, a major recruitment exercise was undertaken to reappoint the Chair of Council and to appoint by open competition a further nine Council members. The appointments were made by the Privy Council in February 2016 and the new Council took office on 1 April 2016.

In anticipation of the appointment of the new Council and the appointment of a number of new fitness to practise committee members, we held an open day for potential registrant applicants to support their ability to demonstrate the competencies required for applying for non-executive positions at the GOsC and elsewhere.

We were pleased that the Professional Standards Authority for Health and Social Care (PSA), which reviews annually the work of all the healthcare professional regulators, was able to report that once again the GOsC met all the PSA's standards of good regulation. The GOsC is the only regulator to have done so in each of the last six years.



In early 2016 Council also took the decision that as soon as practicable the GOsC would apply for registration as a charity. Charitable status will help to clarify some of our governance arrangements as well as our role as the protector of the public interest in the regulation of the osteopathic profession.

# 5. Financial report for the year 2015-16

## Financial commentary

### Income and expenditure

The GOsC ended the financial year with a small deficit, arising from the transition to FRS 102, and which was incurred after spending money designated from its reserves.

Registration fee income for the year was £2,650,326 and represented approximately 97 per cent of total income which remained buoyant at £2,722,245. The remaining income derived from advertising sales for *the osteopath* magazine, bank interest and payment of costs in respect of successful prosecution activity.

Expenditure for the year was £2,729,722, resulting in a deficit of £2,538. This occurred as a result of accounting changes with the move to FRS 102, specifically that investment income that was anticipated would appear in the statement of income was instead reported on the balance sheet.

We anticipate the slight but steady growth in registrant numbers and income to continue in future years. However, identified cost pressures may limit the opportunity for further fee reductions.

### Regulation and development costs

The costs of the GOsC's regulatory activities fall into four main areas:

#### **Education and professional standards**

The quality assurance of osteopathic educational institutions is the largest element of expenditure in this area of our work. Expenditure this year was £47,002, a decrease of £15,338 on 2014-15, reflecting the cyclical nature of reviews of osteopathic courses. The bulk of other expenditure in this area was on policy activity relating to the development and consultation on the proposed new continuing professional development scheme (£12,955), and on the development of standards and guidance documents for osteopaths, students and educational institutions (£19,215).

## Breakdown of expenditure across functional areas

	£	%
Education and professional standards	296,199	10.9
Registration	197,247	7.2
Fitness to practise, including legal	799,985	29.3
Communications, research and development	553,434	20.3
Governance	272,484	10.0
IT infrastructure	95,981	3.5
Administration and establishment	514,392	18.8

### Registration

Registration costs rose slightly; the majority of non-staffing costs were incurred for registration assessments (£29,100), reflecting a small increase in overseas applicants. There was no registration appeal activity in 2015-16.

### Fitness to practise and legal

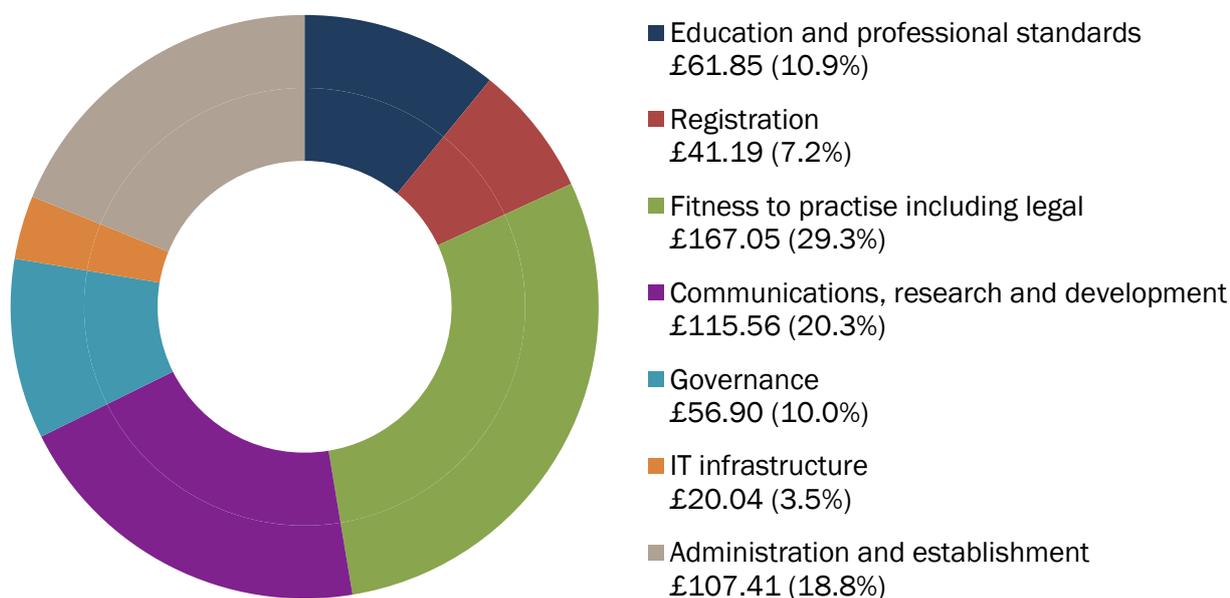
The cost of conducting investigations and holding hearings remains the single largest non-staffing element of GOsC expenditure. In 2015-16 total expenditure in this area fell to £799,985 from £992,157 in the previous year. The costs of the Investigating Committee decreased from £104,414 to £76,435 and the costs of the Professional Conduct and Health Committees decreased from £524,550 to £369,917 and from £63,099 to £53,861 respectively. These decreases were in part as a result of slightly lower volumes of cases (excluding those relating to advertising, which have had an impact mainly on staffing expenditure) but also due to efficiency savings within the Regulation Department.

### Communications, research and development

Costs of communications and engagement activities were slightly lower in 2015-16 at £553,434, against £564,351 in the previous year. However, after the cost of research concluded in 2014-15 is excluded, the amount spent on communications and engagement in 2015-16 rose by approximately 12 per cent, reflecting the importance placed on these activities by the GOsC.

## What does the registration fee fund?

The headline registration fee of £570 is broken down below to show the amount spent on each GOsC function during 2015-16.



## Administration and overhead costs

Other GOsC cost areas are those relating to operating the infrastructure of the organisation, including building and IT costs, and administering the GOsC Council and committees essential for the discharge of our statutory duties.

### Governance

Governance costs relate to Council members' allowances, committee expenses and the recruitment of new members. In 2015-16 (excluding associated staffing costs), overall governance costs for Council and committees, including reappointments, rose from £251,710 to £272,484. This increase was largely attributable to the costs of the appointments process resulting from the reconstitution of Council and the introduction of the levy on all healthcare professional regulators for the operating costs of the Professional Standards Authority (PSA).

### IT infrastructure

Expenditure on IT infrastructure reflects the cost of the GOsC Register, the customer relationship management system, and other office services.

### Administration and establishment

Expenditure in this area reflects the costs of premises, general office administration and travel. It also includes audit fees, bank and interest charges, and depreciation.

## Staffing costs

Staffing is the biggest single component of the GOsC's expenditure. In 2015-16 staffing costs, including recruitment and staff development, totalled £1,249,056. This represented approximately 46 per cent of overall expenditure. A small increase in expenditure on wages, salaries and associated costs was offset by a fall in recruitment costs as a result of a smaller turnover of staff in the year.

## Reserves and investments

### Reserves policy

The GOsC plans to keep its cash reserves (i.e. those funds not designated for specific purposes) at a level no lower than three months' average annual expenditure (approximately £700,000), reflecting good business practice.

### Reserves position

The Balance Sheet shows total funds of £2,560,708.

General Reserves total £2,435,708, a decrease of £27,538 over the previous year. In June 2013, Council agreed that it would consider providing funding from reserves for projects proposed by the Osteopathic Development Group (see page 15). A total of £17,335 was incurred during the year. Council also took the decision to re-designate £100,000 for the implementation of the new CPD scheme. The funds had been put aside in previous years for dealing with governance changes and were no longer required for this purpose. In addition Council agreed that £25,000 would be designated from the General Reserve for the anticipated accreditation of a recognised qualification at a new osteopathic educational institution in 2016-17.

### Investment strategy

The GOsC has an investment of £500,000 in a medium-risk, diversified portfolio, with the intention of ensuring that the value is not eroded by inflation. The investment is held with Newton Investment Management (part of Standard Life). The GOsC committed to the investment for five years and, while it can be liquidated in one week if required, it is treated as a long-term investment. Interest earned on the investment is reinvested back into the investment and will not be realised by the GOsC until the end of the five-year period.

A further £500,000 cash deposit is held with Secure Trust Bank in a 120-day notice account.

## Statement of Council's responsibilities

Council is responsible for preparing the Annual Report and the financial statements in accordance with applicable law and regulations.

The *Osteopaths Act 1993* requires Council to prepare financial statements for every financial year. Under that law, Council has elected to prepare the financial statements in accordance with UK Generally Accepted Accounting Practice (UK Accounting Standards and applicable laws). Council will not approve the financial statements unless it is satisfied that these give a true and fair view of the state of affairs and profit or loss of the GOsC for that period. In preparing these financial statements, Council is required to:

- select suitable accounting policies and then apply them consistently
- make judgements and accounting estimates that are reasonable and prudent
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the GOsC will continue in business.

Council is responsible for keeping adequate accounting records that are sufficient to show and explain the GOsC's transactions and disclose with reasonable accuracy at any time the financial position of the GOsC, and that enable Council to ensure that the financial statements comply with the *Osteopaths Act 1993*.

Council is also responsible for safeguarding the assets of the GOsC and takes reasonable steps to assess and manage risk, undertake non-financial audit activities of the GOsC's work, and ensure the prevention and detection of fraud and other irregularities. Council has appointed an independently chaired Audit Committee to support it in this work.

Council confirms that:

- in so far as each of the Council members is aware, there is no relevant audit information of which the GOsC's auditors are unaware; and
- the Council members have taken all steps that they ought to, to make themselves aware of any relevant audit information and to establish that the auditors are aware of that information.

Approved by Council on 12 July 2016 and signed on their behalf by:



Alison J White  
Chair

## Independent auditor's report to the members of the General Osteopathic Council

We have audited the financial statements of the General Osteopathic Council (GOsC) for the year ended 31 March 2016 which comprise the income and expenditure account, the Balance Sheet, the cash flow statement, the principal accounting policies and the related notes. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards including FRS 102, *The Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland* (United Kingdom Generally Accepted Accounting Practice).

This report is made solely to the GOsC's members, as a body, in accordance with the terms of our engagement letter. Our audit work has been undertaken so that we might state to the GOsC's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the GOsC and the GOsC's members as a body, for our audit work, for this report, or for the opinions we have formed.

### **Respective responsibilities of Council and auditor**

As explained more fully in the Statement of Council's responsibilities set out on page 21, Council is responsible for the preparation of the financial statements which give a true and fair view. Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors.

### **Scope of the audit of the financial statements**

A description of the scope of an audit of financial statements is provided on the Financial Reporting Council's website at: [www.frc.org.uk/auditscopeukprivate](http://www.frc.org.uk/auditscopeukprivate)

### **Opinion on financial statements**

In our opinion the financial statements:

- give a true and fair view of the state of the General Osteopathic Council's affairs as at 31 March 2016 and of its deficit for the year then ended
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice.

*Grant Thornton UK LLP*

Grant Thornton UK LLP  
Statutory Auditor, Chartered Accountants  
London

12 July 2016

## Statement of income and retained earnings

### Year to 31 March 2016

	Notes	2016 £	2015 £
Income	1	<b>2,709,358</b>	2,757,950
Expenditure, including designated spending	2	<b>(2,729,722)</b>	(2,851,195)
<b>Operating deficit</b>		<b>(20,364)</b>	(93,245)
Interest receivable and similar income	5	<b>12,887</b>	32,223
<b>Deficit on ordinary activities before taxation</b>		<b>(7,477)</b>	(61,022)
Taxation	6	<b>2,577</b>	2,794
<b>Deficit after taxation</b>		<b>(10,054)</b>	(63,816)
Other comprehensive income			
• investment: movement in fair value		<b>7,516</b>	13,100
<b>Total comprehensive income for the year</b>		<b>(2,538)</b>	(50,716)
<b>Reconciliation of funds</b>			
<b>Total funds brought forward</b>		<b>2,563,246</b>	2,613,962
<b>Accumulated funds as at 31 March</b>		<b>2,547,002</b>	2,563,246

The deficit for the year arises from the GOsC's continuing operations.

There is no difference between the deficit before taxation and the retained deficit for the period stated above, and their historical cost equivalents.

A Statement of Changes in Equity is not required as the only changes to the GOsC's equity during the period have arisen from the deficit in year and prior year adjustments.

## Statement of financial position

As at 31 March 2016

	Notes	2016 £	2016 £	2015 £	2015 £
<b>Non-Current Assets</b>					
Fixed Assets	7		<b>1,819,397</b>		1,863,167
Intangible Assets	7		<b>27,201</b>		54,498
<b>Current Assets</b>					
Debtors	8	<b>327,858</b>		421,183	
Cash at bank and in hand		<b>219,119</b>		193,667	
Investment (portfolio)		<b>568,524</b>		568,883	
Investment (120-day bond)		<b>559,840</b>		500,000	
		<b>1,675,341</b>		<b>1,683,733</b>	
<b>Creditors</b>					
Amounts falling due within one year	9	<b>(974,937)</b>		<b>(1,038,152)</b>	
<b>Net Current Assets</b>			<b>700,404</b>		<b>645,581</b>
<b>Total assets less total liabilities</b>			<b>2,547,002</b>		<b>2,563,246</b>
<b>Reserves</b>					
General Reserve	11		<b>2,422,002</b>		2,463,246
Designated Funds:	11				
• New CPD implementation			<b>100,000</b>		100,000
• Recognised Qualification accreditation			<b>25,000</b>		-
<b>Total Reserves</b>			<b>2,547,002</b>		<b>2,563,246</b>

Approved by the members of Council on and signed on their behalf by:



.....  
Alison J White  
Chair

Dated  
12 July 2016

The notes to the accounts on pages 28-36 form part of these financial statements.

# Statement of cash flows

Year to 31 March 2016

	2016 £	2015 £
<b>Cash flows from operating activities</b>		
Loss for the financial year	(7,477)	(61,022)
Adjustments for:		
• Amortisation of intangible assets	27,297	34,935
• Depreciation of tangible assets	45,637	(60,313)
• Investment loss / (gain)	7,875	(18,252)
• Interest received	(12,887)	(32,223)
• Taxation	(2,577)	(2,794)
• Decrease/(increase) in trade and other debtors	33,484	(79,210)
• Increase/(decrease) in trade and other creditors	(76,920)	54,451
<b>Net cash generated from operating activities</b>	<b>14,432</b>	<b>(164,428)</b>
<b>Cash flows from investing activities</b>		
Purchase of tangible fixed assets	(1,867)	(34,352)
Interest received	12,887	32,223
<b>Net cash from investing activities</b>	<b>11,020</b>	<b>(2,129)</b>
<b>Net increase/(decrease) in cash and cash equivalents</b>	<b>25,452</b>	<b>(166,557)</b>
<b>Net cash funds as at 1 April</b>	<b>193,667</b>	<b>360,224</b>
<b>Cash and cash equivalents at end of year</b>	<b>219,119</b>	<b>193,667</b>

## Principal accounting policies

### Year to 31 March 2016

#### **Basis of accounting**

The General Osteopathic Council (GOsC) was established under the *Osteopaths Act 1993* and is domiciled in the United Kingdom. The GOsC is required to maintain adequate financial records and it does so through preparing accounts which are laid before each House of Parliament.

These financial statements have been prepared on a going concern basis in accordance with applicable United Kingdom accounting standards, including Financial Reporting Standard 102 – *The Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland* (FRS 102).

The financial statements have been prepared on an historic cost basis.

The financial statements are presented in sterling (£).

This is the first year in which the financial statements have been prepared under FRS 102. Please refer to note 15 for an explanation of the transition which took effect from 1 April 2014.

#### **Critical accounting estimates and judgements**

To be able to prepare the financial statements in accordance with FRS 102, the GOsC has reviewed its accounting policies and the amounts recorded in the annual accounts to ensure any estimates and judgements which have the most risk of causing a material adjustment to the accounts are disclosed.

The GOsC has split the cost of land and buildings based on an estimate derived from a valuation of Osteopathy House which was obtained in the reporting year.

#### **Intangible assets**

In accordance with FRS 102, the cost of cloud based servers and software (costing more than £750) are treated as intangible assets and will be subject to amortisation. Amortisation is provided on intangible assets, on a straight-line basis, as follows:

Computer software	5 years
-------------------	---------

#### **Tangible fixed assets**

All assets with a useful economic life of more than one year, and costing more than £1,000 (or more than £750 for computer equipment), are capitalised. Depreciation is provided on fixed assets, on a straight-line basis, as follows:

Freehold building	50 years
Office furniture	5 years
Office equipment	3 years
Computer hardware	3 years

#### **Income**

Fee income and bank interest income are accounted for on a receivable basis.

Grants for specific purposes are included in income to the extent that expenditure is incurred during the financial year (together with any related contributions towards overhead costs). Deferred credits, which are attributable to subsequent financial years, are included in creditors under the classification of Accruals and Deferred income.

Although no grant income was received in the financial year, it would have been disclosed under income in the notes to the accounts (see note 1).

**Investment**

The GOsC has invested £500,000 in a medium-risk, diversified portfolio. The investment is held with Standard Life Wealth and can be liquidated within one week if required. Interest earned on the investment is reinvested back into the investment. The fair value and the market value of the investment has been considered when accounting for the investment in the financial statements.

The GOsC has a further £500,000 invested in a 120-day bond with Secure Trust Bank.

**Expenditure**

Expenditure is accounted for on a payable basis.

**Pension contributions**

The GOsC operates a defined contribution pension scheme for qualifying employees. The assets of the scheme are held separately from those of the GOsC in an independent fund. The employer's contribution for the year is charged to salaries in the income and expenditure account.

**Fund accounting**

The General Reserve consists of unrestricted funds that are available for use at the Council members' discretion in furtherance of the objectives of the GOsC. Designated funds are unrestricted funds set aside at the discretion of the Council members for specific purposes.

**Short-term deposits**

Short-term deposits comprise cash sums held on deposit with recognised banks.

**Going concern**

In the financial year ended 31 March 2016, a small deficit was incurred after designated spending from reserves. Reserves have been accumulated over previous financial periods in order to withstand any unforeseen circumstances, and the members of Council continue to adopt the going concern basis of accounting in preparing the financial statements.

**Financial instruments**

The GOsC only enters into basic financial instrument transactions that result in the recognition of financial assets and liabilities like trade and other accounts receivable and payable, loans from banks and other third parties and loans to related parties.

# Notes to the accounts

Year to 31 March 2016

## 1 Income

The GOsC's income and deficit before taxation were all derived from its principal activity; registration fees are the primary source of income. Income was received from the following sources:

	2016 £	2015 £
Registration fees	2,650,326	2,651,519
Magazine and leaflets	29,368	35,080
Recoverable costs	620	22,942
Grant funding	-	28,905
FORE secretariat	25,735	15,657
Performance assessments	2,507	1,977
Miscellaneous	802	1,870
<b>Total</b>	<b>2,709,358</b>	<b>2,757,950</b>

## 2 Expenditure

Expenditure for each function in the year was as follows:

	2016 £	2015 £
<b>Education and professional standards</b>		
Employment costs	216,915	206,519
Working groups (OEI)	44	512
Quality assurance	47,002	62,340
Continuing fitness to practise framework	12,955	28,947
<i>Osteopathic Practice Standards</i>	9,445	72
Student fitness to practise	7,783	4,213
Osteopathic pre-registration education	1,987	225
Publications and subscriptions	68	2,987
<b>Total</b>	<b>296,199</b>	<b>305,815</b>
<b>Registration</b>		
Employment costs	163,356	148,846
Registration documentation	4,791	2,840
Appeals	-	15,991
Registration assessments	29,100	19,152
<b>Total</b>	<b>197,247</b>	<b>186,829</b>

	2016 £	2015 £
<b>Fitness to practise, including legal</b>		
Employment costs	<b>272,485</b>	264,041
Statutory committee costs:		
• Investigating Committee	<b>76,435</b>	104,414
• Professional Conduct Committee	<b>369,917</b>	524,550
• Health Committee	<b>53,861</b>	63,099
• Section 32 cases	<b>969</b>	3,909
• Law library subscription	<b>4,418</b>	5,416
Other legal costs	<b>21,900</b>	26,728
<b>Total</b>	<b>799,985</b>	992,157
<b>Communications, research and development</b>		
Employment costs	<b>291,638</b>	270,687
Publication production	<b>78,117</b>	72,639
Engagement activities	<b>63,425</b>	47,950
Website	<b>29,197</b>	10,375
Development projects (funded from reserves)	<b>17,335</b>	25,242
Promoting registration	<b>282</b>	-
Publications and subscriptions	<b>1,439</b>	458
Research		
• National Council of Osteopathic Research (net)	<b>33,219</b>	26,353
• <i>International Journal of Osteopathic Medicine</i>	<b>38,782</b>	38,869
• Effectiveness of regulation research (funded from reserves)	-	71,778
<b>Total</b>	<b>553,434</b>	564,351
<b>Governance</b>		
Employment costs	<b>80,406</b>	77,255
Honorariums/responsibility allowances	<b>114,750</b>	115,590
Tax liability on Council expenses	<b>9,562</b>	7,713
Council costs including reappointments	<b>35,719</b>	24,730
Other committee costs	<b>22,681</b>	19,951
PSA levy	<b>9,124</b>	-
Internal operations, including training	<b>242</b>	6,471
<b>Total</b>	<b>272,484</b>	251,710
<b>IT infrastructure</b>		
Employment costs	<b>30,521</b>	29,940
IT infrastructure provision	<b>39,789</b>	54,970
CRM support	<b>25,278</b>	20,487
Disaster recovery	-	2,783
IT sundries	<b>393</b>	6,197
<b>Total</b>	<b>95,981</b>	114,377

	2016 £	2015 £
<b>Administration and establishment</b>		
Employment costs	<b>140,645</b>	160,855
Non-attributable employment costs	<b>53,090</b>	83,243
Premises	<b>125,030</b>	112,725
Office administration	<b>71,151</b>	65,224
Audit (external)	<b>23,765</b>	20,160
Financing	<b>26,639</b>	17,790
Depreciation	<b>72,934</b>	88,548
Prior year adjustment (land and buildings split)	-	(113,926)
Publications and subscriptions	<b>1,138</b>	1,337
<b>Total</b>	<b>514,392</b>	435,956
<b>TOTAL EXPENDITURE</b>	<b>2,729,722</b>	2,851,195

### 3 Employees and staff costs

Staff costs during the year were as follows:

	2016 £	2015 £
Wages and salaries	<b>1,005,087</b>	973,976
Social security costs	<b>105,868</b>	101,693
Other pension costs (see note 4)	<b>85,011</b>	82,473
	<b>1,195,966</b>	1,158,142
Recruitment	<b>26,320</b>	54,720
Training and development	<b>16,458</b>	19,305
Other	<b>10,313</b>	9,218
<b>Total</b>	<b>1,249,056</b>	1,241,385

The average number of employees, on a full-time equivalent basis and by department, of the Council during the year ended 31 March 2016 was:

	2016 number	2015 number
Education and professional standards	<b>4.20</b>	4.00
Communications, research and development	<b>5.00</b>	5.00
Registration and resources	<b>5.40</b>	6.40
IT infrastructure	<b>0.60</b>	0.60
Fitness to practise, including legal	<b>6.40</b>	5.20
Governance	<b>2.00</b>	2.00
<b>Total</b>	<b>23.60</b>	23.20

**Executive remuneration**

The key management team comprises the Chief Executive and Registrar, Head of Policy and Communications, Head of Professional Standards, Head of Registration and Resources, and Head of Regulation.

The total emoluments for these individuals were £499,819 (2015 – £507,072).

The employment costs of the Chief Executive and Registrar at 31 March 2016 were:

	<b>£</b>
Salary	<b>124,334</b>
Employer National Insurance contributions paid in the year	<b>15,329</b>
Employer pension contributions paid in year	<b>12,788</b>

Detailed below is a schedule showing the number of GOsC staff who are earning above £60,000:

	<b>2016 number</b>	2015 number
£60,000 - £70,000	<b>0</b>	1
£70,000 - £80,000	<b>4</b>	3

The aggregated employment costs for those staff who are earning above £60,000 were:

	<b>£</b>
Salary	<b>290,039</b>
Employer National Insurance contributions paid in the year	<b>33,718</b>
Employer pension contributions paid in year	<b>23,611</b>

Expenses claimed by members of the Senior Management Team were:

	<b>2016 £</b>	2015 £
Tim Walker, Chief Executive and Registrar	<b>854</b>	723
Fiona Browne, Head of Professional Standards	<b>39</b>	439
Matthew Redford, Head of Registration and Resources	<b>16</b>	66
Brigid Tucker, Head of Policy and Communications	<b>185</b>	491
Sheleen McCormack, Head of Regulation	-	-
David Gomez, Head of Regulation (left 30 April 2015)	<b>37</b>	105

#### 4 Pension costs

The contributions paid in the year in respect of the Council's pension scheme were £85,011 (2015 – £82,473).

#### 5 Interest receivable and similar income

The interest receivable and similar income in the year was as follows:

	<b>2016</b> £	2015 £
Interest receivable	<b>12,887</b>	13,971
Investment gain	-	18,252
<b>Total</b>	<b>12,887</b>	32,223

#### 6 Taxation

The tax charge was as follows:

	<b>2016</b> £	2015 £
Current tax:		
Corporation tax at 20%	<b>2,577</b>	2,794
<b>Tax on investment income</b>	<b>2,577</b>	2,794

The Council is liable to corporation tax on its investment income but is not liable for corporation tax in respect of any surplus or deficit arising on statutory activities.

## 7 Intangible and fixed assets

### Fixed assets

	Office equipment £	Office furniture £	Computer hardware £	Freehold building £	Total £
<b>Cost</b>					
At 1 April 2015	35,734	171,658	36,039	2,244,172	<b>2,487,603</b>
Additions	-	-	1,867	-	<b>1,867</b>
Disposals	(18,310)	(126,127)	(34,100)	-	<b>(178,537)</b>
At 31 March 2016	<u>17,424</u>	<u>45,531</u>	<u>3,806</u>	<u>2,244,172</u>	<b><u>2,310,933</u></b>
<b>Depreciation</b>					
At 1 April 2015	27,085	168,546	35,147	393,658	<b>738,362</b>
Charge for the year	5,645	1,154	652	38,186	<b>45,637</b>
Disposals	(18,310)	(126,127)	(34,100)	-	<b>(178,537)</b>
At 31 March 2016	<u>14,420</u>	<u>43,573</u>	<u>1,699</u>	<u>431,844</u>	<b><u>491,536</u></b>
<b>Net book value</b>					
At 31 March 2016	<u>3,004</u>	<u>1,958</u>	<u>2,107</u>	<u>1,812,328</u>	<b><u>1,819,397</u></b>
At 31 March 2015	<u>8,649</u>	<u>3,112</u>	<u>892</u>	<u>1,850,514</u>	<b><u>1,863,167</u></b>

### Intangible assets

	Computer software £	Total £
<b>Cost</b>		
At 1 April 2015	274,875	<b>274,875</b>
Additions	-	-
Disposals	(15,019)	<b>(15,019)</b>
At 31 March 2016	<u>259,856</u>	<b><u>259,856</u></b>
<b>Depreciation</b>		
At 1 April 2015	220,377	<b>220,377</b>
Charge for the year	27,297	<b>27,297</b>
Disposals	(15,019)	<b>(15,019)</b>
At 31 March 2016	<u>232,655</u>	<b><u>232,655</u></b>
<b>Net book value</b>		
At 31 March 2016	<u>27,201</u>	<b><u>27,201</u></b>
At 31 March 2015	<u>54,498</u>	<b><u>54,498</u></b>

## 8 Debtors

	2016 £	2015 £
Fee debtors	<b>189,310</b>	235,821
Prepayments and accrued income	<b>117,792</b>	177,376
Other debtors	<b>20,756</b>	7,986
<b>Total</b>	<b>327,858</b>	421,183

## 9 Creditors: amounts falling due within one year

	2016 £	2015 £
Deferred income	<b>726,672</b>	726,114
Trade creditors	<b>96,950</b>	217,713
Accruals	<b>89,019</b>	46,471
Department of Health – grant funding	<b>9,952</b>	9,952
Other creditors	<b>3,915</b>	3,306
Income tax and social security	<b>32,518</b>	32,352
Corporation tax creditor	<b>15,911</b>	2,244
<b>Total</b>	<b>974,937</b>	1,038,152

## 10 Payments to non-executive members

### **Council members**

In the reporting year, the total value of honorariums paid to Council members was £113,854 including responsibility allowances. In addition, expenses paid directly to Council members and to suppliers for travel and accommodation totalled £18,869.

### **Investigating Committee and Professional Conduct Committee members**

In the reporting year, a daily attendance fee of £306 was paid to members of the Investigating Committee and the Professional Conduct Committee when attending GOsC meetings and hearings. Members of the Investigating Committee also receive a reading allowance of £75 per day. Members of these committees claimed daily attendance fees which totalled £138,672, with expenses paid directly to the committee members and to suppliers for travel and accommodation totalling £63,955.

### **External members of other committees**

In the reporting year, a daily attendance fee of £306 was paid to external members of the Education and Registration Standards, Osteopathic Practice, Audit and Remuneration and Appointments Committees when attending GOsC meetings. Co-opted members of these committees claimed daily attendance fees of £9,342, with expenses paid directly to the committee members and to suppliers for travel and accommodation totalling £4,092.

## 11 Reserves

	At 1 April 2015 £	Deficit for the year £	Gross transfers between funds £	At 31 March 2016 £
General Reserve	2,463,246	(2,538)	(25,000)	<b>2,435,708</b>
Designated funds:				
• New CPD implementation	100,000	-	-	<b>100,000</b>
• Recognised Qualification accreditation	-	-	25,000	<b>25,000</b>
<b>Total</b>	<b>2,563,246</b>	<b>(2,538)</b>	-	<b>2,560,708</b>

The designated fund of £100,000 is to support the implementation of the new CPD scheme which builds upon the existing CPD model. The fund will be used for engagement activities and for developing online resources.

The designated fund of £25,000 is for the anticipated accreditation of a recognised qualification at a new osteopathic educational institution in 2016-17.

## 12 Capital commitments and contingent liabilities

Capital commitments that are contracted but not provided for at 31 March 2016 amount to £nil (2015 – £nil). There were no contingent liabilities at 31 March 2016 or 31 March 2015.

## 13 Related party transactions

Tim Walker, the GOsC Chief Executive and Registrar, is Chair of the Board of Trustees of the National Council of Osteopathic Research (NCOR). This post is unremunerated.

## 14 Controlling parties

In respect of the GOsC, the Council are considered to be the ultimate controlling party.

## 15 Transition to FRS 102

The GOsC has adopted FRS 102 for the year ended 31 March 2016 and has restated the comparative year amounts.

### **Explanations – Changes for FRS 102 adoption**

#### **Annual leave pay provision**

Under FRS 102, the GOsC is required to accrue for all short-term compensated absences, such as holiday entitlement earned but not taken, at 31 March 2016. The impact of the annual leave pay provision in the statement of comprehensive income is £12,657 as at 31 March 2016 (£7,279 as at 31 March 2015).

#### **Land and buildings split**

Under FRS 102, the GOsC has split the value of land and buildings as land should not be depreciated. The financial statements have been amended through a prior year adjustment for the depreciation charge on land.

#### **Investments**

Under FRS 102, the GOsC has accounted for the movement in the fair value of its investment as well as any investment gain or loss in the period.

### **Restated Statement of Financial Position as at 31 March 2015**

	2015 £
Original total reserves	2,387,716
Annual leave pay provision	(7,279)
Land and buildings split	113,926
Investment asset growth	68,883
Restated funds employed	<u>2,563,246</u>

### **Restated Statement of Income and Retained Earnings for the year ended 31 March 2015**

	2015 £
Original deficit on ordinary activities	(188,715)
Annual leave pay provision increase	(7,279)
Land and buildings split	113,926
Investment interest	18,252
Investment fair value movement	13,100
Restated deficit on ordinary activities	<u>(50,716)</u>

# 6. Key activities for 2016-17

The 2016-17 year will be the first year of a new three-year Corporate Strategy for 2016-19. Our Business Plan for 2016-17, the first year of the new Strategy, anticipates the following activities:

## Continuing professional development (CPD)

- Working with a range of individual osteopaths and stakeholders on the 'early adoption' of the new CPD scheme.
- Continuing our preparations for the profession-wide implementation of the new CPD scheme.

## Osteopathic Practice Standards

- Reviewing the *Osteopathic Practice Standards* and undertaking a public consultation on the revised standards.
- Commencing work on a range of practical guidance materials for osteopaths to support the use of the revised *Osteopathic Practice Standards*.

## Osteopathic education

- Seeking to improve our engagement with faculty across osteopathic educational institutions to support the development of osteopathic education.
- Working with the Quality Assurance Agency on the quality assurance of existing and proposed new recognised qualifications.

## Registration

- Implementing changes to registration processes to ensure compliance with EU Directives on the recognition of professional qualifications.
- Investigating and where necessary prosecuting individuals who incorrectly describe themselves as osteopaths.
- Continuing to promote online registration renewal by osteopaths.

## Development of the profession

- Working with the Council of Osteopathic Educational Institutions, the Institute of Osteopathy, the Osteopathic Alliance and the National Council for Osteopathic Research to further develop osteopathic practice.

## Fitness to practise

- Improving the support given to witnesses in GOsC hearings.
- Reviewing the Indicative Sanctions Guidance and Hearings Guidance.
- Seeking to improve the efficiency of the hearing process through case management directions, as well as improved use of information technology.

## **Research**

- Exploring the potential for research into how specific interventions in practice can support compliance with standards.
- Analysing data about osteopaths subject to complaints and the nature of complaints to support more effective communication of standards.
- Continuing to support the National Council for Osteopathic Research to develop research capacity within the osteopathic profession.

## **Communications and engagement**

- Continuing to work with our Patient and Public Partnership Group and other patients groups to provide effective input to our work.
- Supporting the communication, consultation and engagement work of our partners in the Osteopathic Development Group.
- Establishing a new annual stakeholder survey to evaluate our engagement with key partners.

## **Finance and governance**

- Ensuring the effective operation of the newly reconstituted Council which has reduced in size from 14 to 10 members.
- Establishing a new Policy Advisory Committee to support the work of Council.
- Applying for charitable status for the GOsC and implementing a transition plan.

# 7. How we are run

## Council

The 2015-16 GOsC Council consisted of 14 members – seven osteopaths and seven lay – responsible for ensuring that the GOsC is meeting its statutory duties under the *Osteopaths Act 1993* and other legislation.

The role of Council includes setting the corporate strategy and objectives, determining key policies for the organisation, and making rules as provided for under the *Osteopaths Act*.

Council approves the annual Budget and Business Plan and holds the Chief Executive to account for the delivery of the Corporate Plan, the Business Plan, the Budget, risk mitigation, organisational performance and staff leadership, and for external perceptions.

Members of Council are appointed by the Privy Council. Appointments require the GOsC to follow a recruitment procedure that is scrutinised by the Professional Standards Authority for Health and Social Care (PSA). Each year, every Council member (and other non-executives) takes part in a performance appraisal with the Chair of Council or relevant committee chair.

### Members of Council in 2015-16

<b>Chair (lay)</b>
Alison J White *
<b>Lay members</b>
Professor Colin Coulson-Thomas
Mark Eames
Kim Lavelly
Dr Joan Martin *
Julie Stone
Jenny White
<b>Osteopath members</b>
John Chaffey *
Dr Jorge Esteves *
Jonathan Hearsey
Nick Hounsfield
Brian McKenna
Kenneth McLean *
Haidar Ramadan *

Council members shown with an asterisk above were reappointed to Council from 1 April 2016. New Council members appointed from 1 April 2016 were:

Sarah Botterill (lay)
Dr Bill Gunnyeon (lay)
Dr Denis Shaughnessy (lay)
Deborah Smith (osteopath)

Brief biographies of all current Council members are available on the GOsC website at: [www.osteopathy.org.uk/about-us/the-organisation/council](http://www.osteopathy.org.uk/about-us/the-organisation/council)

## Committees of Council

Council is supported in the delivery of its objectives by a number of statutory and non-statutory committees. There are four committees of Council: the Audit Committee; the Education and Registration Standards Committee; the Osteopathic Practice Committee; and the Remuneration and Appointments Committee.

Each Committee includes members of Council and appointed external members. External members are appointed by Council under the guidance of the Remuneration and Appointments Committee.

The work of each Committee is set out below.

### Audit Committee

The role of the Audit Committee is to provide oversight that the necessary internal and external systems and processes are in place for identifying, managing and mitigating the risks relating to the discharge of the GOsC's statutory duties, and make recommendations for any actions to Council and the Executive as appropriate. The Committee also considers any matters relating to fraud and loss, or information security breaches.

#### Members of the Audit Committee 2015-16

Mark Eames	<i>lay</i>
Brian McKenna	<i>osteopath</i>
<b>External members</b>	
Martin Owen	<i>lay</i>
Chris Shapcott (Chair)	<i>lay</i>

### Education and Registration Standards Committee

The Education and Registration Standards Committee fulfils the statutory role of the Education Committee under section 1 of the *Osteopaths Act 1993*.

The role of the Committee is to contribute to the development of standards of osteopathic practice and ensure that only those appropriately qualified are able to register with the GOsC. This includes:

- advising Council on all matters relating to pre-registration education and training of osteopaths, including the standards of osteopathic practice required for registration
- advising Council on the recognition of qualifications in accordance with section 14(6) of the Act (or the withdrawal of recognition)
- appointing and managing the performance of visitors to conduct the evaluation of courses under section 12 of the Act
- advising Council on the standards required for initial registration, and appropriate means for assessing those standards.

#### Members of the Education and Registration Standards Committee 2015-16

John Chaffey	<i>osteopath</i>
Professor Colin Coulson-Thomas (Chair)	<i>lay</i>
Dr Jorge Esteves	<i>osteopath</i>
Dr Joan Martin	<i>lay</i>
Alison J White	<i>lay</i>
<b>External members</b>	
Jane Fox	<i>lay</i>
Bernardette Griffin	<i>lay</i>
Robert McCoy	<i>osteopath</i>
Liam Stapleton	<i>lay</i>

## Osteopathic Practice Committee

The role of the Osteopathic Practice Committee is to contribute to the development of standards of osteopathic practice; policies aimed at ensuring that registrants remain fit to practise; and policies relating to fitness to practise procedures. This includes:

- advising Council on all matters relating to standards of osteopathic practice including, where appropriate, post-registration education and training, the requirements for continuing professional development under section 17 of the Act, and any other matters relating to the continuing fitness to practise of registrants
- advising Council on appropriate means for ensuring that osteopaths remain fit to practise, including the requirements for annual re-registration, assessment of applications before returning to practice, and continuing fitness to practise
- advising Council on any questions of policy relating to the management, investigation and adjudication of concerns about the fitness to practise of registrants.

### **Members of the Osteopathic Practice Committee 2015-16**

Jonathan Hearsey (Chair)	<i>osteopath</i>
Kenneth McLean	<i>osteopath</i>
Julie Stone	<i>lay</i>
Alison J White	<i>lay</i>
Jenny White	<i>lay</i>
<b>External members</b>	
Jane Fox	<i>lay</i>
Manoj Mehta	<i>osteopath</i>

## Remuneration and Appointments Committee

The Remuneration and Appointments Committee oversees appointment, performance and remuneration policy in relation to Council and other non-executives and staff of the GOsC, and makes recommendations to Council. Non-executives include all members of Council and statutory and non-statutory committees.

### **Members of the Remuneration and Appointments Committee 2015-16**

Nick Hounsfield	<i>osteopath</i>
Kim Lavelly	<i>lay</i>
Haidar Ramadan	<i>osteopath</i>
Alison J White (Chair)	<i>lay</i>
<b>External member</b>	
Ian Muir	<i>lay</i>

### Council members' attendance at Council and committee meetings

Name	Council	Audit	Education and Registration Standards	Osteopathic Practice	Remuneration and Appointments
Alison J White	4/4		2/3	3/3	3/3
John Chaffey	3/4		3/3		
Professor Colin Coulson-Thomas	4/4		3/3		
Mark Eames	2/4	2/3			
Dr Jorge Esteves	4/4		3/3		
Jonathan Hearsey	3/4			3/3	
Nick Hounsfield	3/4				3/3
Kim Lavelly	3/4				2/3
Dr Joan Martin	4/4		3/3		
Brian McKenna	4/4	2/3			
Kenneth McLean	4/4			3/3	
Haidar Ramadan	4/4				3/3
Julie Stone	3/4			3/3	
Jenny White	4/4			3/3	

Individual members also attend working groups, ad-hoc meetings and appraisals through the year.

## Independent fitness to practise committees

There are three committees that support the GOSc's fitness to practise functions: the Investigating Committee, the Health Committee and the Professional Conduct Committee. The GOSc is responsible and accountable for the operation of these committees, but their decision-making is independent of the GOSc Council.

The committees operate as panels of typically three or five members to consider complaints and referred cases.

The committee members are appointed by Council under the guidance of the Remuneration and Appointments Committee.

### Investigating Committee

The role of the Investigating Committee is to carry out the initial investigation of a complaint against an osteopath, which may allege unacceptable professional conduct, professional incompetence or matters relating to the osteopath's physical or mental ill health.

#### **Members of the Investigating Committee 2015-16**

Helen Bullen	<i>osteopath</i>
Miles Crook	<i>osteopath</i>
Charles Dunning	<i>osteopath</i>
Caroline Guy	<i>osteopath</i>
Gillian Hawken	<i>lay</i>
Anne Johnstone	<i>lay</i>
James Kellock (Chair)	<i>lay</i>
Yvonne McNiven	<i>osteopath</i>
Abigail Miller	<i>osteopath</i>
James Olorenshaw	<i>osteopath</i>
Sarah Payne	<i>lay</i>
Jacqueline Pratt	<i>lay</i>
Dr Michael Yates	<i>lay</i>

### Health Committee and Professional Conduct Committee

The role of the Professional Conduct Committee is to hear cases concerning serious unacceptable conduct, incompetence or convictions and, where the Committee finds any such case proved, to impose an appropriate sanction on the osteopath concerned.

The role of the Health Committee is to consider cases in which an osteopath is alleged to be in poor physical or mental health and, if the allegation is upheld, to take appropriate action in the interests of the public and the osteopath.

#### **Members of the Health and Professional Conduct Committees 2015-16**

Members are appointed to serve on both the Health and Professional Conduct Committees, although each committee has its own Chair.

Richard Davies (Chair of Health Committee)	<i>lay</i>
Philip Geering	<i>lay</i>
Professor Brian Gomes da Costa	<i>lay</i>
Jean Johns	<i>lay</i>
Anthony Kanutin	<i>osteopath</i>
Andrew Kerr	<i>osteopath</i>
Corinna Kershaw	<i>lay</i>
Colette Neville	<i>lay</i>
Jacqueline Salter	<i>osteopath</i>
Andrew Skelton	<i>lay</i>
Nicholas Woodhead	<i>osteopath</i>
Judith Worthington (Chair of Professional Conduct Committee)	<i>lay</i>

## Non-executive remuneration and expenses

### Council members' remuneration and expenses

Name	Position held	Location	Honorarium £	Responsibility allowance £	Expenses £
Alison J White	Chair	Hertfordshire	22,440	Nil	819
John Chaffey	Member	Hertfordshire	6,630	Nil	982
Professor Colin Coulson-Thomas	Member	Cambridgeshire	6,630	3,224 <sup>1</sup>	804
Mark Eames	Member	Buckinghamshire	6,630	Nil	201
Dr Jorge Esteves	Member	Oxfordshire	6,630	Nil	Nil
Jonathan Hearsey	Member	Sussex	6,630	2,000 <sup>2</sup>	966
Nick Hounsfeld	Member	Bristol	6,630	Nil	2,964
Kim Lavelly	Member	London	6,630	Nil	Nil
Dr Joan Martin	Member	Northern Ireland	6,630	Nil	5,657
Brian McKenna	Member	Wales	6,630	Nil	1,572
Kenneth McLean	Member	Scotland	6,630	Nil	2,574
Haidar Ramadan	Member	London	6,630	Nil	Nil
Julie Stone	Member	Cornwall	6,630	Nil	2,330
Jenny White	Member	London	6,630	Nil	Nil
<b>Total</b>			<b>108,630</b>	<b>5,224</b>	<b>18,869</b>

<sup>1</sup> Chair of the Education and Registration Standards Committee (includes allowance for attendance at meetings with osteopathic educational institutions)

<sup>2</sup> Chair of the Osteopathic Practice Committee

Expenses shown in the table above include those paid directly to Council members and those paid to suppliers to cover travel and accommodation costs.

## Other non-executive remuneration and expenses

Name	Committee	Location	Fees £	Expenses £
Martin Owen	Audit Committee	London	1,224	Nil
Chris Shapcott	Audit Committee	London	2,304	18
Bernardette Griffin	Education and Registration Standards Committee (ERSC)	Worcestershire	612	389
Robert McCoy	ERSC	Kent	918	62
Liam Stapleton	ERSC	Leicestershire	612	212
Jane Fox	ERSC, Osteopathic Practice Committee (OPC)	Derbyshire	1,530	202
Manoj Mehta	OPC	Middlesex	918	17
Ian Muir	Remuneration and Appointments Committee	Berkshire	1,244	67
Helen Bullen	Investigating Committee (IC)	Surrey	3,054	214
Miles Crook	IC	Hampshire	2,367	30
Charles Dunning	IC	Derbyshire	3,051	1,048
Caroline Guy	IC	Republic of Ireland	4,191	4,035
Gillian Hawken	IC	Surrey	4,734	440
Anne Johnstone	IC	Scotland	918	863
James Kellock	IC	London	5,805	72
Yvonne McNiven	IC	Scotland	3,357	1,858
Abigail Miller	IC	Northamptonshire	1,143	93
James Olorenshaw	IC	East Sussex	3,054	446
Sarah Payne	IC	Belgium	612	262
Jacqueline Pratt	IC	Lancashire	2,598	1,410
Dr Michael Yates	IC	West Yorkshire	5,868	1,290
Richard Davies	Health Committee/Professional Conduct Committee (HC/PCC)	Wales	6,732	1,154
Philip Geering	HC/PCC	London	4,590	75
Professor Brian Gomes da Costa	HC/PCC	London	11,016	50
Jean Johns	HC/PCC	Northern Ireland	8,874	937
Anthony Kanutin	HC/PCC	Essex	5,814	398
Andrew Kerr	HC/PCC	Cheshire	7,038	2,068
Corinna Kershaw	HC/PCC	Wales	9,486	1,101
Colette Neville	HC/PCC	West Sussex	7,650	560
Jacqueline Salter	HC/PCC	West Midlands	14,076	2,329
Andrew Skelton	HC/PCC	Nottinghamshire	7,650	3,951
Nicholas Woodhead	HC/PCC	Nottinghamshire	3,978	1,078
Judith Worthington	HC/PCC	Leicestershire	11,016	5,100
<b>Total</b>			<b>148,014</b>	<b>31,829</b>

Expenses shown in the table above were paid directly to committee members. Those expenses paid to suppliers to cover travel and accommodation costs total £36,218.

## The GOsC Executive team

GOsC operations are managed day to day by its Chief Executive and Registrar, Senior Management Team and other staff.

The average number of full-time equivalent staff in 2015-16 was 23.60.

The Chief Executive and Registrar in 2015-16 was Tim Walker and he was supported through the year by the Senior Management Team:

- Fiona Browne, Head of Professional Standards
- David Gomez, Head of Regulation (until May 2015)
- Sheleen McCormack, Head of Regulation (from May 2015)
- Matthew Redford, Head of Registration and Resources
- Brigid Tucker, Head of Policy and Communications

Details of Executive remuneration and expenses can be found in Note 3 to the Accounts on pages 30-31.





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