



General
Osteopathic
Council

Annual Report and Accounts 2018-19



General Osteopathic Council
Annual Report and Accounts 2018-19

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

© General Osteopathic Council 2019

The text of this document may be reproduced free of charge in any format or medium providing it is reproduced accurately and not in a misleading context. The material must be acknowledged as General Osteopathic Council copyright and the document title specified.

Any enquiries about this publication should be sent to us at the General Osteopathic Council, Osteopathy House, 176 Tower Bridge Road, London SE1 3LU.

This publication is available from our website at: www.osteopathy.org.uk/annualreport.

Contents

1. About the General Osteopathic Council	7
2. Chair's statement	8
3. Chief Executive and Registrar's introduction	9
4. Our work in 2018-19	10
5. Financial report for the year 2018-19	20
6. Key activities for 2018-19	38
7. How we are run	40

1. About the General Osteopathic Council

The General Osteopathic Council (GOsC) has a statutory duty under the Osteopaths Act 1993 to develop and regulate the osteopathy profession in the UK in order to ensure public protection.

Our role involves the pursuit of the following objectives:

- protecting, promoting and maintaining the health, safety and wellbeing of the public
- promoting and maintaining public confidence in the profession of osteopathy
- promoting and maintaining proper professional standards and conduct for members of the profession.

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 2019 there were 5,334 osteopaths registered with the GOsC.

2. Chair's statement

This has been an important year for the GOsC. We have appointed a new Chief Executive and Registrar and come to the end of our three-year Corporate Strategy. We are beginning to implement our new continuing professional development scheme and our updated Osteopathic Practice Standards and are helping to make a difference to patient care and the reduction of risk.



In March 2019, we concluded the final year of our strategic plan of which the highlight was undoubtedly the approval and launch of our new continuing professional development (CPD) scheme, into which so much effort has been invested during the past three years.

The scheme was highly influenced by our research into values-based practice which has been so influential as a critical component of 'upstream' healthcare regulation. The new scheme incorporates mandatory elements chosen in response to areas of practice where regular complaints have been received and, for the first time, requires osteopaths to undertake an objective feedback activity and to reflect on their practice with a peer.

This scheme could not have been developed without the support and partnerships that have been built, and I believe that the effort which has been invested will underpin the future success and development of the profession.

Running alongside this important programme has been the review and refresh of the Osteopathic Practice Standards, following an extensive period of stakeholder consultation. Supporting registrants in understanding the changes and being able to engage with them so that CPD can be carried out across all four themes of the Standards has been a very important task during the past year, and Council has been highly engaged with how success can be evaluated once the updated Standards come into force.

Even though the number of complaints that Council receives remain relatively low, it is important that the processes that are used to investigate (and also to learn from) them are conducted with efficiency and effectiveness. In the absence of long-awaited changes to our legislation, we are limited in the progress we can make, but Council has overseen a number of changes to policy and practice that

have continued to improve our processes and help us achieve both our performance targets and the quality of our outcomes.

Towards the end of this financial year we said goodbye to Tim Walker, who had served with distinction for the past eight years as our Chief Executive. Tim was replaced by Leonie Milliner, whom many of our stakeholders met as part of our recruitment process and now leads the organisation into our next strategic planning period.

I would like to thank Tim, Leonie, my non-executive colleagues and the team at the GOsC, for their commitment, expertise, and their professionalism, in enabling our small organisation to consistently deliver our plans and objectives.

A handwritten signature in grey ink, appearing to read 'Alison J White'.

Alison J White
Chair
17 July 2019

3. Chief Executive and Registrar's introduction

Working in partnership and supporting the profession so that it continues to provide safe and high-quality care for patients.



It is a huge privilege to write the introduction to this year's Annual Report and to have the opportunity to describe the outstanding performance of the team here at Osteopathy House over the past 12 months, ably led by my predecessor, Tim Walker. We have been working hard to engage the profession and our wider stakeholder community, explaining what we do and helping to embed our Standards, understanding public needs and ensuring registrants are provided with the support and information they require.

Tim demonstrated the importance of the collaborative, facilitative, and supportive role that we as a regulator can play, while also maintaining our central role in protecting patients. It is my intention to continue this approach; working in partnership and supporting the profession so that it can continue to provide safe and high-quality care for patients.

Our role as a regulator is to ensure osteopaths across the UK have appropriate clinical and professional skills, values and behaviours, so they can maintain high standards of osteopathic practice and patient care.

It is a time of enormous challenge and change in healthcare, with an increasingly ageing

population, the impact of lifestyle choice upon health outcomes and the prospect of an updated legislative framework for the GOsC. At the same time, opportunities are arising for the profession, through the greater emphasis on multi-and interdisciplinary collaboration within healthcare delivery; structural change in the funding and organisation of higher education in England, and in research; together with the opportunities presented by the designation, in England, of osteopathy as an allied health profession.

We have been collaborating in our policy development and research with other osteopathic organisations, with regulators, patients, stakeholders, and with the academic community. You can read more about some of our ground-breaking work in this report, for it is precisely this type of long-range, innovative thinking that ensures the effective contribution of regulation to safe, high quality patient care.

A handwritten signature in dark ink that reads "Leonie Milliner".

Leonie Milliner
Chief Executive and
Registrar

17 July 2019

4. Our work in 2018-19

This Annual Report reflects the work of the General Osteopathic Council in the year to 31 March 2019.

In February 2016, Council approved a new three-year Corporate Plan which set out what the organisation aimed to achieve in the period 2016-19.

Within this plan we describe our 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 is underpinned by three high-level strategic objectives which set the course of the three-year planning cycle from 2016 to 2019:

- To promote public and patient safety through patient-centred, 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.

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

Our job as a regulator is to protect the public. One of the ways in which we do this is 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

Nearly all osteopaths registering in the UK obtain their qualifications from UK-based osteopathic educational providers. One of our most important roles as a regulator is to ensure that these providers continue to provide high-quality education and training for osteopathic students.

In order to quality assure these courses we work in partnership with the Quality Assurance Agency for Higher Education (QAA), which undertakes a programme of visits to providers with a cohort of trained QAA visitors, commissioned by the GOsC. The QAA also carries out other activities for us, such as annual report analysis.

In 2018-19, visits were undertaken by GOsC-appointed visitors for the renewal of recognition of osteopathic degree courses at the European School of Osteopathy, the London College of Osteopathic Medicine, the London School of Osteopathy and Swansea University.

Each osteopathic educational provider submits an annual report to the GOsC (including external sources of assurance), which we review in conjunction with the QAA. We also continue to monitor any conditions imposed following previous reviews and any matters requiring monitoring identified during the course of the year.

This year, two education thematic reviews began, one on the external examiner role, considering the level of assurance this role provides in relation to delivery of the Osteopathic Practice Standards, and another on public and patient involvement in education to explore and share good practice. We have

also facilitated the sharing of good practice in how the recording of consent is taught by osteopathic educational providers.

During 2018-19, the GOsC made decisions on major changes to its quality assurance processes following earlier consultation. These decisions included the removal of expiry dates on 'recognised qualifications' enabling visits to be targeted within a broader time frame than currently available. This allows visits to coincide with validation events, changes to curricula or other relevant matters. At the same time, we agreed to publish conditions and action plans ensuring that the progress of each of the osteopathic educational providers is transparent and accountable. We consulted on a Management of Concerns policy; mechanisms for sustaining good practice; and an updated GOsC/QAA course providers and visitors handbook which included a code of conduct for visitors and the management of sensitive and confidential information among other matters. Implementation of these changes will take place across the next year, subject to the approval of the Privy Council.

This year we continued our policy work examining issues around professional boundaries. In conjunction with the General Chiropractic Council we published a report: 'How is touch communicated in the context of manual therapy? A literature review,' by Dr Michael Concannon of the University of Huddersfield and osteopath Mr Sam Lidgely. We held multidisciplinary workshops with practitioners and patients to disseminate the findings; and to explore their response and the implications for our respective sectors.

GOsC staff continued their programme of visits to osteopathic educational providers, speaking to students at different stages of training about their responsibilities as clinicians and as future regulated healthcare professionals. This year we presented at seven different providers to more than 300 students.

**Osteopathic educational
providers offering
Recognised Qualifications**

British College of Osteopathic Medicine

College of Osteopaths

European School of Osteopathy

London College of Osteopathic
Medicine (for medical doctors only)

London School of Osteopathy

North East Surrey College of
Technology

Swansea University

University College of Osteopathy

University of St Mark and St John
(Plymouth Marjon)



Protecting and promoting registration

Maintaining the integrity of the Register of osteopaths is central to the GOSc's regulatory role ensuring that only those meeting our standards are entered onto the Register. The Register is available online at: 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 2018-19, there were 262 new or returning registrants joining the Register. 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	25
College of Osteopaths	25
European School of Osteopathy	37
London School of Osteopathy	19
Oxford Brookes University	5
North East Surrey College of Technology	32
Swansea University	11
University College of Osteopathy (formerly British School of Osteopathy)	102
Overseas applicants	6
Total	262

As at 31 March 2019, there were 5,334 osteopaths registered with the GOSc.

Gender	Number
Female	2,705
Male	2,629
Total	5,334

Geographical location of the profession	Number
England	4,560
Northern Ireland	28
Scotland	152
Wales	141
Rest of world	453
Total	5,334

Our team of trained registration assessors, all of whom are qualified osteopaths, undertook a total of 42 registration assessments in 2018-19.

Type of assessment	Number
Non-UK Qualification Assessment	16
Further Evidence of Practice Assessment	3
Assessment of Clinical Performance	3
Return to Practice Interview	20
Total	42

In the 2017-18 Annual Report we reported that we had been conscious for some time that existing registrants were contributing to the cost of assessing international applicants. In 2017-18 we consulted on changes to the fees paid by international applicants and a new charging scheme based on near full-cost recovery was introduced in 2018-19.

We continue to seek to improve our registration processes for osteopaths and to raise awareness of the importance of the Register.

One of the activities that we undertake in order to protect the integrity of the Register is taking action against individuals who appear to be practising without registration. We review the websites of all those who have left the Register and, where necessary, remind them that they must remove references to osteopathic practice. In addition, we respond

to concerns raised with us about potential illegal practice. Not all concerns raised with us require action, but in 2018-19 we sent out 45 'cease and desist' letters. We resolved 49 cases. No prosecutions in protection of title cases took place in 2018-19.

We are pleased that as a result of our continuing promotion, over 2,150 osteopaths and osteopathic practices are now using our 'I'm registered' and 'We're registered' Registration Marks, introduced in 2014. Raising awareness of registration helps ensure that patients are protected.

Continuing professional development

Once an osteopath is registered with the GOsC, it is important that they remain up-to-date and fit to practise. In October 2018, amended Rules implementing the new CPD scheme came into effect. Osteopaths have been entering the scheme when their current CPD year comes to an end on a rolling basis since 1 October 2018.

The Peer Discussion Review is the central component of the CPD scheme as it brings together features of the new scheme and consolidates impact on the osteopath's practice through a discussion or dialogue with a peer (either an osteopath or other health professional). This provides assurance of practice, allowing the osteopath to complete one CPD cycle and to move on to the next. The scheme is patient-focused, requiring specific CPD in the area of communication and consent, an area which features regularly in patient concerns.

The new scheme comprises 90 hours of CPD undertaken over a period of three years, a minimum of 45 hours[†] of this must be learning with others. The scheme includes the following components:

- Undertaking an objective feedback activity to support CPD and practice (for example case-based discussion, patient feedback, clinical audit or peer observation).
- Undertaking CPD in relation to communication and consent.
- Maintaining a record of CPD reflections.
- Discussion of these components at the Peer Discussion Review.

During 2018-19 we published our core guidance on the CPD scheme – the CPD Guidance and the Peer Discussion Review Guidance. To help support osteopaths in engaging with the CPD scheme we have worked to translate this guidance into a range of accessible resources including a short 'how to' guide and a range of practical workbooks on the key aspects of the scheme. These include: Planning your CPD, Keeping CPD records, Case-based discussion, Patient feedback and Peer observation. We have also produced a wide range of other resources including visuals, templates, case studies, animations and infographics.

An extensive programme of evaluation has been developed to measure the impact of our CPD scheme, to ensure that any risks around its introduction are mitigated, and the intended benefits of the scheme are realised. This year we considered the results of our second longitudinal CPD evaluation survey and we responded to the findings that showed awareness of the new scheme and engagement with its key activities continues to increase. The survey also enabled us to target our communications to support osteopaths where they needed it, including: a refresh of our CPD website to help registrants find the information they need and make the requirements clearer. We also published guidance for CPD providers to help them connect their provision to the CPD scheme.

Additional data sources to support the evaluation include registrant data analysis, our third CPD evaluation survey, concerns and complaints data and patient feedback.

During the financial year, we scrutinised 20% of all osteopaths' annual CPD summaries to ensure they complied with the CPD guidelines,

- CPD relevant to the full range of osteopathic practice. This means covering the four themes of the Osteopathic Practice Standards and the breadth of the registrant's osteopathic practice (for example, clinical, teaching, research or management/leadership).

[†] Osteopaths registering for the first time on or after 1 October 2018, in their first CPD cycle, will undertake the CPD requirements within 2 years and 10 months by completing a total of 85 hours of CPD including 42.5 hours of learning with others. These CPD cycles are defined in the CPD rules as 'CPD periods'.

and we undertook a more in-depth review of 2% of CPD records, where osteopaths were asked to present more detailed evidence in support of their CPD activities.

Fitness to practise

It is our duty under the Osteopaths Act 1993 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 seek to discuss such concerns in confidence and help the individual decide whether or not they wish to make a formal complaint. In 2018-19, we received 68 concerns. Of these, 53 were made formal.

During the course of the year, the GOsC's Investigating Committee reached a final decision in 50 cases. Of these, 33 were referred to a full hearing of the Professional Conduct Committee and one case was referred to a full hearing of the Health Committee; in the other cases, it was determined that there was no case to answer. Over the course of the year, the Professional Conduct Committee concluded 30 cases; in 19 of those cases, a sanction was imposed against the osteopath.

The majority of cases arise from complaints made by patients or other members of the public. We are required to report annually on the number of cases that arise as a result of protected disclosures made by 'whistle blowers' and this information can be found at: www.osteopathy.org.uk/whistleblowingconcerns. We aim to ensure that all our investigations and hearings are concluded as quickly as possible. Our target for the initial investigation of complaints is 20 weeks, and it is 52 weeks for the conclusion of the entire process.

From April 2018, the Professional Standards Authority has required that we report from the point when a concern is received by the GOsC, rather than from when a concern is opened as formal. Notwithstanding these changes, in 2018-19, the median time for investigating a complaint was 20 weeks, and the median time for concluding a hearing by the Professional Conduct Committee was 59 weeks. This represents an improvement on performance against the targets we set ourselves.

Sanctions imposed in cases considered by the Professional Conduct Committee 2018-19	Number of cases
Admonished	7
Conditions of practice	1
Suspended	6
Removed	5
Total	19

Over 2018-19 we have continued with our reform programme to identify and implement improvements in our fitness to practise processes, including exploring options and implementing reforms which we consider could improve our processes and improve patient protection, but which do not require a change to our primary legislation, the Osteopaths Act 1993. Part of our reform programme over the past four years has included the introduction of the Threshold Criteria and Initial Closure Procedure. Both these changes have brought step changes in our processes. The implementation of these new processes, together with the new Professional Standards Authority reporting requirements, has meant that we are currently undertaking a review of existing performance indicators and targets to better reflect and report on our performance.

While the time taken to consider fitness to practise cases is important, so too is the quality of the investigation and of the hearing process. To supplement the quality assurance processes we already have in place, we have continued to hold meetings of the Determination Review Group, which includes external representation from other healthcare bodies to consider the quality of decision-making and inform policy development.

We have also continued our policy development work with the introduction of improved guidance relating to investigating committee decision-making, which was introduced after public consultation.

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

Updating and embedding the Osteopathic Practice Standards

During 2018-19 we have undertaken an extensive programme of activity to raise awareness of and to implement the updated Osteopathic Practice Standards (OPS), which inform osteopathic education, training and practice. The updated OPS were approved by Council in May 2018 and, as required by the Osteopaths Act 1993, will come into effect in September 2019, one year after their publication. This five-year update of the Standards followed extensive consultation last year with a range of stakeholders including: a patient focus group; osteopathic educational providers; regional groups; and GOsC registration assessors as well as other health professionals and regulators.

Central to implementation is helping the sector to embed the updated Standards. We continue to carry out extensive face-to-face and online engagement with stakeholders including osteopathic educational providers, students, educators, regional groups and CPD providers. In addition, we have developed a dedicated website, sent a printed copy of the updated Standards to every osteopath, written regular articles about areas in the updated Standards that were strengthened as a result of consultation, including: boundaries; safeguarding and candour. Training has been provided for our registration assessors, educational visitors and fitness to practise panellists.

To support the implementation of our CPD scheme, which includes a requirement to undertake CPD across the four themes of the OPS, we have developed a range of resources using the feedback we have received. This feedback has also informed articles, for example sharing positive stories about the use of the OPS to inform osteopathic practice.

We are encouraging all osteopaths to publicise to patients their registration and the standards they practise, to support raised awareness of the OPS with patients.

Our Policy Advisory Committee has considered a detailed implementation strategy and an approach to evaluating the impact of the updated Standards, using a range of data sources. We consider that implementation of the Standards should be ongoing, ensuring that osteopaths have the right knowledge, skills, environment and motivation to embed the OPS in practice.

During 2018-19, we worked alongside the Collaborating Centre for Values Based Practice in Health and Social Care, the General Dental Council and the University College of Osteopathy on prototype resources to support patients and practitioners identify what is important to the patient in a consultation. This work will continue and will support the implementation of the Standards.

We work closely with the National Council for Osteopathic Research (NCOR) to support osteopathic research development and to promote awareness of relevant research among osteopaths, for example, NCOR is a regular contributor to The Osteopath magazine. As part of this work, we continue to provide access to a package of research journals, including the International Journal of Osteopathic Medicine, to all registrants, as well as to students in the final two years of their studies.

NCOR has continued to assist the GOsC, the Institute of Osteopathy and the main providers of professional indemnity insurance to osteopaths in compiling aggregate annual data on complaints, claims and concerns raised about osteopaths. This unique collaboration provides valuable insight to inform our work on education, standards and continuing professional development. Data published this year (from 2017) shows that the overall level of concerns has reduced. However, we cannot be complacent, and we will continue to work in partnership with patients and practitioners to reduce concerns.

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 and its capacity to develop. 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, 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 continued to work on eight projects. In 2018-19, progress was made in the following areas:

- Evidence - the Patient Reported Outcome Measures (PROMs) app now has added functionality so that paediatric data can be collected. A pilot study has seen the PROMs app translated into French, German and Flemish, supported by the European Federation and Forum for Osteopathy.
- Service Standards – a Patient Charter owned by the profession, which complements the newly published Osteopathic Practice Standards, was launched by the Institute of Osteopathy after extensive consultation.
- Clinical practice – following consultation feedback, a supportive draft framework has been developed to facilitate planning, learning and development in important areas such as safeguarding. This development will be further considered during 2019.

- Communities of practice – to support the development of local communities, the ODG previously published Communities of Practice – a guide to setting and sustaining a vibrant peer group. Implementation of this is ongoing.
- Mentoring – provides new osteopathic practitioners with the opportunity to access high quality mentoring to develop and sustain practice and reduce professional isolation. A mentoring tool kit was produced and disseminated in 2017-18. Further plans to promote and disseminate the tool kit are planned for 2019.
- Leadership – osteopaths completing the Leadership Programme have gone on to undertake leadership or development roles in professional organisations, education and in the regulator. Specialist groups have also been set up including interprofessional working. The fourth annual programme is underway and will conclude in 2019.
- International collaboration – the ODG's website, www.osteointernational.uk, brings together a wide range of resources relating to osteopathy around the world, and is being well used in the UK and abroad.

Information about the ODG and its work can be found at: www.osteodevelopment.org.uk.

International activities

The GOsC continues to contribute its knowledge and experience of regulation into the work of the Osteopathic International Alliance, and continues to work closely with established regulatory bodies around the world, particularly the Australasian Osteopathic Accreditation Council, the Osteopathy Board of Australia, and the Osteopathic Council of New Zealand.

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

Communicating and engaging with our stakeholders

Communication and engagement play an important role in our work, in explaining what we do and embedding our standards, and also in understanding public needs and ensuring that registrants are provided with appropriate support and information. This is particularly important as we implement the new CPD scheme.

In 2018-19 we consulted publicly on:

- Continuing Professional Development and Peer Discussion Review Guidance
- Investigating Committee Decision-Making Guidance
- Changes to the quality assurance of osteopathic education
- Standard Case Directions
- Cancellation of hearing under Rule 19

In all our consultations we seek to involve not just registrants but a full range of stakeholders, including our Patient Partnership Group, using a range of approaches including written consultation, focus groups and one-to-one meetings.

This year, we have undertaken a significant amount of engagement with our stakeholders, including both in local face-to-face meetings across the country and through online webinars, to help embed and support practice in accordance with our standards.

We refreshed the look and feel of our registrant magazine, *The Osteopath*, to make it more engaging for readers in response to feedback to our reader survey. We continue to publish it six times each year, along with monthly ebulletins for registrants. Social media – particularly Facebook and Twitter – continue to play an important part in our communication work, with each channel having over 2,400 and 2,500 followers respectively in 2018-19.

We meet regularly with a wide range of stakeholders, with the most significant

meetings reported to Council in the Chief Executive's Report. These meetings include those with local and regional groups, educational providers and special interest groups, regulators, researchers and others, as well as presentations at a range of national and international conferences.

Promoting equality and diversity

Our Equality and Diversity Policy was updated in 2018 to reflect the requirements on us as a designated body under the Equality Act. In our work with the profession, patients and the public, our objectives are to:

- ensure our regulatory activities are fair and free from unlawful discrimination
- ensure that promoting equality and valuing diversity are reflected in the standards we set for the osteopathy profession
- promote equality of opportunity and access to the osteopathy profession
- communicate and engage with a diverse range of stakeholders in an accessible manner
- ensure high standards in the recruitment, development and ongoing work of staff and non-executives.

Our Equality and Diversity Policy is available on our website at: www.osteopathy.org.uk/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. Along with other regulators, we continue to be engaged in dialogue with the Welsh Language Commission and Welsh Government on proposed new Welsh Language Standards.

Governance, performance and risk

The GOsC Council consists of 10 members – five lay and five registrants. Council is supported in its governance work by nearly 40 other lay and registrant members of our statutory and non-statutory committees, as well as registration assessors, legal assessors, medical advisers and others.

The Remuneration and Appointments Committee scrutinises recruitment arrangements for all of these roles and also monitors the diversity of candidates who apply and are selected for them. The majority of our non-executives receive an annual performance assessment as part of their role.

The GOsC has been registered as a charity with the Charity Commission for England and Wales since April 2017 (registration number 1172749).

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 in 2018-19 the GOsC met all its standards of good regulation.

The GOsC Council works with its Audit Committee to oversee the GOsC risk

management framework. Council reviews the high-level risk register twice a year and the Audit Committee does so at each of its meetings. The Audit Committee also makes an annual statement of assurance to Council that it considers that risk is being managed appropriately within the organisation.

Operational efficiency and effectiveness

In 2018-19 we have once again maintained the current level of fees paid by registrants and we continue to maintain a focus on seeking efficiency savings across all our functions.

In 2018-19, the IT function continued its implementation of the audit findings, as well as assisting with the implementation of the General Data Protection Regulation (GDPR) audit findings. During this period the IT infrastructure was also overhauled and improved, providing a new, more secure working environment whilst giving staff members the continued flexibility to work remotely. In 2019-20, the IT function will continue to improve and strengthen the IT capacity by improving its IT Security Plan, by obtaining Cyber Security Essentials Plus in partnership with the National Cyber Security Centre.

The principal risks identified by the organisation in 2018-19 (along with key mitigating actions) arose in the following areas:

Risk area	Mitigating actions
Implementation of the new CPD scheme	Comprehensive communication and engagement programme, including development of support materials
Volume and complexity of fitness to practise cases	Increase in temporary and permanent staff resource, improvements to case management processes
IT infrastructure and data security	External audits of IT security and data protection compliance with follow-up action plans
Uncertainty arising from 'Brexit'	Liaison with Department of Health and Social Care officials and other regulators, as well as internal review and contingency planning

5. Financial report for the year 2018-19

The financial report for the year 2018-19 is the second since the GOsC became a registered charity.

Income and expenditure

The accounts, which are set out in more detail over the following pages, are now presented in accordance with the Charity SORP (Financial Reporting Standard 102).

The GOsC ended the financial year with a surplus of £93,653, arising after accounting for spending from designated funds.

At the year-end total income was £3,067,187. Registration fee income accounted for £2,843,667 and represented approximately 93% of total income. The remaining income came from a back-dated business rate refund and other areas such as advertising sales for The Osteopath magazine and bank and investment interest.

Expenditure for the year was £2,989,271 after designated spending, which included expenditure of £38k on the implementation of the new continuing professional development scheme and £6k on Osteopathic Development Group projects.

The Register continues to have a small steady growth in numbers and we anticipate this will continue in future years. As a result, registration fees have once again been maintained at their current level.

Regulation and development costs

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

- **Education and professional standards**

Quality assuring osteopathic educational providers continues to be a fundamental element of the work undertaken in this area alongside the development and implementation of the new continuing professional development scheme and we incurred costs of £118k in the year.

This year also saw the completion of the review of the Osteopathic Practice Standards with Council approving updated Standards which will take effect in September 2019. In the year, we incurred expenditure of £20k.

- **Registration**

Registration costs remained broadly consistent with the expenditure from the prior year. Total non-staffing costs were £18k and included registration assessment costs and associated expenditure for the training and appraisal of registration assessors.

- **Fitness to practise and legal**

The cost of conducting investigations and holding hearings remains the single largest non-staffing element of GOsC expenditure. In 2018-19 total expenditure in this area increased to £965,327 from £931,764 in the previous year. This included costs of the Investigating Committee, which were £57,835, with the Professional Conduct Committee incurring expenditure of £481,876.

- **Communications, research and development**

Costs of communications and engagement activities were lower this year at £454,750 compared to £489,037 in the previous year.

This reduction in spend reflects cost savings and efficiencies rather than a reduction in the GOsC commitment to engagement with the profession and key stakeholders.

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, which are essential functions for the discharge of our statutory duties.

Governance

Governance costs relate to Council members' allowances, committee expenses, appraisals and the recruitment of new members. In 2018-19, governance costs were slightly lower than the previous year, £262,918 compared with £274,537. Within governance costs was the levy on all healthcare professional regulators for the costs of the Professional Standards Authority; the GOsC paid a levy of £13,825.

IT infrastructure

The commitment to a new IT staffing resource was incurred this year which saw a focus on ensuring the GOsC IT infrastructure was

secure and fit for purpose. Expenditure on IT (£85k) reflects the cost of the GOsC Register, the customer relationship management system and other office services.

Administration and establishment

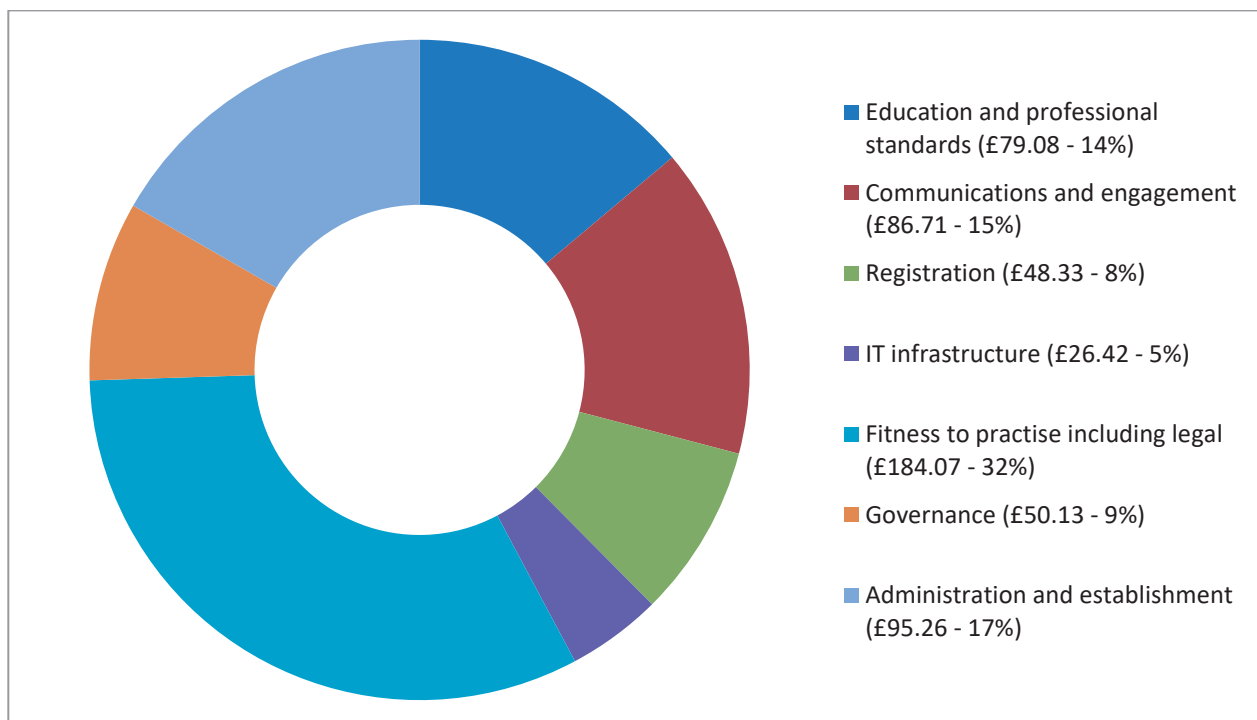
Expenditure in this area reflects the costs of premises, general office administration and travel. It also includes audit fees, bank interest and investment charges and depreciation.

Staffing costs

Staffing is the biggest single component of the GOsC's expenditure. In 2018-19 staffing costs, including recruitment and development, totalled £1,435,297 compared to £1,386,653 in the previous year. The increased costs reflect the recruitment of a new Chief Executive and Registrar. The in-year spend represented 49% of overall expenditure.

What does the registration fee fund?

The headline registration fee of £570 is broken down below to show the amount of spend on each GOsC function in 2018-19



Reserves and investments

• Reserves policy

The GOsC holds reserves as part of good business practice to ensure that it has funds available should unforeseen events materialise, such as an increase in expenditure or a reduction in income. Council reviews the reserves position on an annual basis. The reserves position for 2018-19 is set out as follows.

The Balance Sheet shows total funds of £2,607,841. All of the GOsC funds are unrestricted.

General Reserves total £2,575,343 which represents an increase of £131,997 over the previous year. Council designated funds for the implementation of the new CPD scheme and £32k remains to be spent over the coming year.

The Council has considered the areas in which it feels it has the greatest financial risk and these are:

- increased volume of complaints
- judicial reviews or legal appeals
- uninsurable losses, e.g. data protection fines
- unforeseen increase in quality assurance activity.

Having considered these risks and the possible financial impact should they materialise, Council has concluded that it would be prudent to hold reserves within a target range of £350k-£700k.

At the end of the financial year 2018-19, the Council is holding reserves equal to £766,375, which has been calculated as follows:

	£
Funds held	2,607,841
Restricted funds	-
Designated funds	(32,498)
Operational fixed assets	(1,808,968)
Funds remaining	766,375

Reserves are currently above the target range and this will be kept under review in the forthcoming year.

• Investment strategy

Investments are valued at market value as at the date of the Statement of Financial Position (Balance Sheet). Realised and unrealised gains and losses arising on the revaluation of investments are credited or charged to the Statement of Financial Activities. Investments include cash deposits where monies are not required for short term working capital.

The GOsC has an investment of £571,845 in a medium-risk, diversified portfolio. The fund is managed by Brewin Dolphin and is classified on the Balance Sheet as a non-current asset. The GOsC has a further £584,819 cash deposit 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
- observe the methods and principles in the applicable Charities SORP
- 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 and the Charities Act 2011.

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.

The trustees confirm they have had due regard to the Charity Commission's guidance on public benefit.

Approved by Council on 17 July 2019 and signed on their behalf by:



Alison J White
Chair

Independent auditor's report to the trustees of the General Osteopathic Council

Opinion

We have audited the financial statements of General Osteopathic Council for the year ended 31 March 2019 which comprise the Statement of Financial Activities, Statement of Financial Position, Statement of Cash Flows and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 the Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

This report is made solely to the charity's trustees, as a body, in accordance with Part 4 of the Charities (Accounts and Reports) Regulations 2008. Our audit work has been undertaken so that we might state to the charity's trustees 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 charity and the charity's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

In our opinion the financial statements:

- give a true and fair view of the state of the charity's affairs as at 31 March 2019 and of its incoming resources and application of resources, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Charities Act 2011.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the charity in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

We have nothing to report in respect of the following matters in relation to which the ISAs (UK) require us to report to you where:

- the trustees' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- the trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the charity's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

Other information

The trustees are responsible for the other information. The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters in relation to which the Charities (Accounts and Reports) Regulations 2008 require us to report to you if, in our opinion:

- the information given in the financial statements is inconsistent in any material respect with the trustees' report; or
- sufficient accounting records have not been kept; or
- the financial statements are not in agreement with the accounting records and returns; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement, the trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the charity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charity or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

We have been appointed as auditor under section 144 of the Charities Act 2011 and report in accordance with the Act and relevant regulations made or having effect thereunder.

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: www.frc.org.uk/auditorsresponsibilities.

This description forms part of our auditor's report.

Crowe U.K. LLP

Crowe U.K. LLP
Statutory Auditor
London

23 July 2019

Statement of Financial Activities

Year to 31 March 2019	Notes	2019 £	2018 £
Income from			
Charitable activities	2	3,047,849	2,858,228
Investments	3	19,338	14,863
Total		3,067,187	2,873,091
Expenditure on			
Charitable activities	4	2,989,271	2,857,735
Total expenditure		2,989,271	2,857,735
Net income before gains/(losses) on investments		77,916	15,356
Net gains/(losses) on investments		15,737	(29,339)
Net income/(expenditure)		93,653	(13,983)
Reconciliation of funds			
Total funds brought forward		2,514,188	2,528,171
Total funds carried forward	13	2,607,841	2,514,188

The surplus/deficit for the year arises from the GOSC's continuing operations.

All income and expenditure is unrestricted.

Balance Sheet

As at 31 March 2019	Notes	2019 £	2018 £
Fixed assets			
Intangible fixed assets	8	25,433	13,161
Tangible fixed assets	8	1,783,535	1,783,618
Investments	9	571,845	551,021
Total Fixed assets		2,380,813	2,347,800
Current Assets			
Debtors	10	550,733	382,420
Investment (120-day bond)		584,819	577,624
Cash in bank and at hand		183,059	169,332
Total current assets		1,318,611	1,129,376
Current liabilities			
Creditors: amounts falling due within 1 year	11	(1,091,583)	(962,988)
Net current assets		227,028	166,388
Net assets		2,607,841	2,514,188
Represented by:			
Unrestricted funds			
Designated Funds:		32,498	70,842
General funds		2,575,343	2,443,346
Total funds		2,607,841	2,514,188

Approved and authorised for issue by the members of Council on 17 July 2019 and signed on their behalf by:



Alison J White
Chair

Cash Flow Statement

Year to 31 March 2019	Notes	2019 £	2018 £
Reconciliation of net (expenditure) to net cash flow from operating activities:			
Net (expenditure) for the reporting period (as per the statement of financial activities)		93,653	(13,983)
Depreciation		63,111	51,128
(Gains)/losses on investment		(40,822)	22,180
Dividends, interest and rents from investments		(7,780)	(7,597)
(Increase)/decrease in debtors	10	(175,508)	7,667
Increase/(decrease) in creditors	11	128,595	(56,535)
Net cash provided by/(used in) operating activities		61,249	2,860
Cash flows from investing activities			
Dividends, interest and rents from investments		7,780	7,597
Purchase of tangible fixed assets	8	(55,302)	(51,117)
Proceeds from sale of investments		-	-
Purchase of investments		-	-
Net cash (used in) investing activities		(47,522)	(43,520)
Change in cash and cash equivalents in the reporting period		13,727	(40,660)
Cash and cash equivalents at the beginning of the reporting period		169,332	209,992
Cash and cash equivalents at the end of the reporting period		183,059	169,332
Cash and cash equivalents at the end of the reporting period			
Cash at bank and in hand		183,059	169,332

Notes to the financial statement – Year to 31 March 2019

1. Principal accounting policies

Basis of accounting

The General Osteopathic Council (GOsC) was established under the Osteopaths Act 1993 and is domiciled in the United Kingdom, and the principal office address is Osteopathy House, 176 Tower Bridge Road, London SE1 3LU.

These financial statements have been prepared in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with “The Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland” Charities SORP (FRS 102) and the Charities Act 2011.

The financial statements have been prepared on an historic cost basis as modified by the revaluation of investments.

The financial statements are presented in sterling (£). The GOsC meets the definition of a ‘public benefit entity’ under FRS 102.

Critical accounting estimates and judgements

To be able to prepare the financial statements, 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. In the view of the Council there are no significant estimates or judgements involved in the preparation of the financial statements.

Intangible assets

In accordance with Charities SORP (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

Land is not depreciated.

Income

Registration and other fee income is recognised over the period that a service is provided and so the GOsC earns entitlement to the income. For registration fee income this is over the period of one year from the date the individual was first entered onto the register. Investment income including bank interest income is accounted for as earned.

Investments

Investments are valued at market value as at the balance sheet date. Realised and unrealised gains and losses arising on the revaluation of investments are credited or charged to the Statement of Financial Activities. Investments include cash deposits where monies are not required for short term working capital and the intention is for that cash to be held to generate a return for in excess of 12 months.

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

Expenditure

All expenditure is accounted for on an accruals basis. A liability is recognised when the GOsC enters into a legal or constructive obligation to make a payment to a third party. Expenditure directly related to a single activity is allocated to that activity in the notes to the financial statements. Costs attributable to more than one cost category of expenditure are apportioned on the basis of the estimated amount of staff time attributable to that activity in the year.

Pension contributions

The GOsC operates a defined contribution pension scheme for qualifying employees. The employer's contribution for the year is charged to salaries in the Statement of Financial Activities in the period it is earned by the employee.

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 2019, 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 has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at amortised cost using the effective interest method. Financial assets held at amortised cost comprise cash at bank and in hand, together with trade and other debtors. Financial liabilities held at amortised cost comprise accruals, trade and other creditors.

2. Income from charitable activities

The GOsC's income was derived from its principal activity. Registration fees are the primary source of income:

	2019 £	2018 £
Registration fees	2,843,667	2,800,696
Total	2,843,667	2,800,696

Other income is received from the following sources:

Other income	2019 £	2018 £
Magazine and leaflets	22,350	29,192
Performance assessments	5,280	1,090
FORE secretariat	-	18,375
Recoverable costs	1,187	185
Miscellaneous	576	8,690
Business Rate refund	174,790	-
Total	204,183	57,532

3. Income from investments

	2019 £	2018 £
Interest from investments	19,338	14,863
Total	19,338	14,863

4. Expenditure arising from charitable activities

Expenditure for each function in the year was as follows:

	Direct costs £	Support costs £	2019 £	2018 £
Charitable activities				
Education and professional standards	414,746	162,176	576,922	468,746
Registration	253,468	288,314	541,782	534,741
Fitness to practise	965,327	243,265	1,208,592	1,165,825
Communications and research	454,750	207,225	661,975	688,423
Total	2,088,291	900,980	2,989,271	2,857,735

5. Support costs

	Management £	Governance £	Administration £	IT £	Total 2019 £	2018 £
Support costs						
Education and professional standards	52,365	26,248	68,301	15,263	162,177	156,040
Registration	93,093	46,663	121,423	27,134	288,313	277,406
Fitness to practise	78,548	39,372	102,451	22,894	243,265	234,062
Communications and research	66,911	33,539	87,273	19,502	207,225	199,386
Total	290,917	145,822	379,448	84,793	900,980	866,894

Support costs (IT, Governance and Administration and Establishment) have been recharged across the other areas of business on the basis of staff numbers in those departments.

6. Governance

	2019 £	2018 £
Governance costs		
Members' fees (including National Insurance)	97,789	97,862
Other governance costs including expenses	65,983	65,778
Total	163,772	163,640

Payments to non-executive members

Council members

In the reporting year, the total value of honorariums paid to Council members (10 in total) was £95,250 including responsibility allowances. In addition, expenses paid directly to Council members and to suppliers for travel and accommodation totalled £15,338 (2018 - £13,320)

Name	Position	Location	Honorarium £	National Insurance £	Expenses £
Alison J White	Chair	Hertfordshire	25,500	2,356	765
Sarah Botterill	Member	Wales	7,500	-	2,467
John Chaffey	Member	Hertfordshire	7,500	-	396
Elizabeth Elander	Member	Cheshire	7,500	-	2,930
Dr Bill Gunnyeon	Member	Scotland	9,750 ¹	183	3,410
Simeon London	Member	Scotland	7,500	-	2,515
Dr Joan Martin	Member	Northern Ireland	7,500	-	2,746
Haidar Ramadan	Member	London	7,500	-	-
Dr Denis Shaughnessy	Member	Hampshire	7,500	-	-
Deborah Smith	Member	Bedfordshire	7,500	-	109
Total			95,250	2,539	15,338

¹Includes a responsibility allowance of £2,250 paid as Chair of the Policy Advisory 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.

The Osteopaths Act 1993 allows for the remuneration of Council members.

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 and a screening fee of £12.50 per case screened. Members of these committees claimed daily attendance fees which totalled £119,172 with expenses paid directly to the committee members and to suppliers for travel and accommodation totalling £70,024.

External members of other committees

In the reporting year, a daily attendance fee of £306 was paid to external members of the Policy Advisory Committee, Audit and Remuneration and Appointments Committees when attending GOsC meetings. Co-opted members of these committees claimed daily attendance fees of £9,426 with expenses paid directly to the committee members and to suppliers for travel and accommodation totalling £2,251.

Net income for the year stated after charging

	2019 £	2018 £
Fees paid to Crowe U.K. (net of VAT)		
- External audit	14,750	14,250
- Business rate refund	7,000	-
Depreciation of assets	63,110	51,218

7. Employees and staff costs

Staff costs during the year were as follows:

	2019 £	2018 £
Staff costs		
Salaries	1,118,747	1,097,742
National Insurance	118,314	118,523
Pensions	99,424	96,088
Total	1,336,485	1,312,353

	2019 £	2018 £
Average staff numbers		
Chief Executive and Registrar's office	3	3
Education and professional standards	4	4
Registration and resources	7	7
IT	1	1
Fitness to practise	6	6
Communications	5	5
Total	26	26

Key management personnel remuneration

The key management personnel comprise the Chief Executive and Registrar, Director of Professional Standards, Director of Registration and Resources and Director of Regulation.

The total emoluments for the key management personnel were £443,140 (2018 – £433,833).

The total number of staff whose taxable emoluments fell into higher salary bands was:

	2019 £	2018 £
£70,000 - £80,000	2	2
£80,000 - £90,000	1	1
£120,000 - £130,000	1	1

Pension costs

The employer contributions paid in the year, in respect of individual staff pensions, was £99,424 (2018 – £96,088).

8. Intangible and Tangible Fixed Assets

Intangible assets

	Computer software £	Total £
Cost		
At 1 April 2018	259,856	259,856
Additions	20,000	20,000
Disposals	-	-
At 31 March 2019	279,856	279,856
Depreciation		
At 1 April 2018	246,695	246,695
Charge for the year	7,728	7,728
Disposals	-	-
At 31 March 2019	254,423	254,423
Net book value		
At 31 March 2018	13,161	13,161
At 31 March 2019	25,433	25,433

Fixed assets

	Office equipment £	Office furniture £	Computer hardware £	Freehold building £	Total £
Cost					
At 1 April 2018	17,424	74,039	26,401	2,244,172	2,362,036
Additions	784	30,968	23,550	-	55,302
Disposals	-	-	-	-	-
At 31 March 2019	18,208	105,007	49,951	2,244,172	2,417,338
Depreciation					
At 1 April 2018	17,422	46,750	6,033	508,216	578,421
Charge for the year	129	6,771	10,296	38,186	55,382
Disposals	-	-	-	-	-
At 31 March 2019	17,551	53,521	16,329	546,402	633,803
Net book value					
At 31 March 2018	2	27,289	20,368	1,735,956	1,783,615
At 31 March 2019	657	51,486	33,622	1,697,770	1,783,535

9. Investments

	2019 £	2018 £
At the start of the year	551,021	573,094
Income reinvested	11,538	13,136
Fees taken	(6,451)	(5,870)
Gain/(loss)	15,737	(29,339)
Total portfolio	571,845	551,021

Investments are managed by Brewin Dolphin and are held in a medium risk diversified portfolio incorporating a mix of equities (£444,320), bonds (£123,123) and other assets (£4,402).

10. Debtors

	2019 £	2018 £
Trade debtors	234,874	226,590
Prepayments and accrued income	303,381	140,078
Other debtors	12,478	15,752
Total debtors	550,733	382,420

11. Creditors

	2019	2018
	£	£
Trade creditors	128,140	90,975
Deferred income	813,762	793,727
Accruals	100,471	43,568
Other creditors	16,061	423
Income tax and social security	33,149	34,295
Total creditors	1,091,583	962,988

12. Deferred income

	2019	2018
	£	£
As at 1 April	793,727	764,608
Amount deferred during the year	813,762	793,727
Amount released to the financial statements	(793,727)	(764,608)
Total deferred income	813,762	793,727

Income from annual registration fees is deferred and released to the statement of financial activities on a straight-line basis over the period to which the income relates. All deferred income brought forward from the previous year is released to the statement of financial activities in the following year.

13. Reserves

	At 1 April 2018	Income	Expenditure	At 31 March 2019
	£	£	£	£
Reserves				
General fund	2,443,346	3,082,924	(2,950,927)	2,575,343
Designated fund	70,842	-	(38,344)	32,498
Total funds	2,514,188	3,082,924	(2,989,271)	2,607,841

The designated fund relates to the implementation of the new continuing professional development (CPD) scheme. It is anticipated that the designated fund will be spent in full in financial year 2019-20.

Prior year comparative

	At 1 April 2017 £	Income £	Expenditure £	At 31 March 2018 £
Reserves				
General fund	2,428,171	2,873,091	(2,857,916)	2,443,346
Designated fund	100,000	-	(29,158)	70,842
Total funds	2,528,171	2,873,091	(2,887,074)	2,514,188

14. Related party transactions

Tim Walker, until his retirement from the position of the GOsC Chief Executive and Registrar on 28 February 2019, was the Chair of the Board of Trustees of the National Council of Osteopathic Research (NCOR). This post was unremunerated.

Expenditure in the year was £26,860 (2018 – £27,600) and related to the GOsC contribution towards NCOR infrastructure costs.

6. Key activities for 2019-20

Our Business Plan for 2019-20 anticipates the following activities:

Continuing professional development (CPD)

- Ongoing analysis, reporting and responding to implementation and evaluation of the CPD scheme using a variety of data sources.
- Ongoing programme of communications and engagement including development and publication of resources.
- Finalising and implementing verification and assurance strategy.
- Encouraging the use of patient feedback.

Osteopathic Practice Standards (OPS)

- Ongoing implementation and evaluation strategy for the OPS.
- Developing and raising awareness of resources to support the embedding of standards in practice.
- Working with patients, other health professions and regulators to identify, review and translate examples of working together for the benefit of patients.

Osteopathic education

- Reviewing, monitoring and enhancing the quality of osteopathic education ensuring that only graduates meeting the OPS are awarded a 'recognised qualification'.
- Concluding appointment of our quality assurance partner from 2020 to 2025.
- Implementing removal of expiry dates, and publishing conditions and action plans for osteopathic education providers.
- Commencing review of Guidance for Osteopathic Pre-registration Education including consideration of standards for training.
- Continuing work with the Council of Osteopathic Educational Institutions and others to support the development of educators in osteopathy.

Registration

- Concluding a review of the assessment processes to support the implementation of the updated OPS.
- Investigating and where necessary prosecuting individuals who incorrectly describe themselves as osteopaths.
- Monitoring and responding to the potential impact of 'Brexit' on our international registration processes.
- Implementing changes to our IT systems to support new registration and CPD processes.

Development of the profession

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

Fitness to practise

- Developing new guidance on cases relating to professional indemnity insurance.
- Supporting the expansion of the pool of expert witnesses available for fitness to practise hearings.
- Continuing the work of our Decision Review Group, working with colleagues from other regulators, to share best-practice and improve fitness to practise processes.

Research

- Reviewing our commissioned literature review on How is touch communicated in the context of manual therapy? (published jointly with the General Chiropractic Council) and working with stakeholders to consider the implications for osteopathic education and practice.
- Continuing our work on developing, piloting and evaluating tools for improving decision-making.
- Working with Warwick Business School to update our research and identifying further learning to inform the implementation of the updated Osteopathic Practice Standards and the new CPD scheme.
- Continuing to support the National Council for Osteopathic Research to develop research capacity within the osteopathic profession.
- Continuing to work with our Patient and Public Partnership Group and other patient groups to provide effective input to our work.
- Supporting the effective communication of our key activities including consultations.
- Increasing levels of engagement with stakeholders to help support our work.
- Supporting the communication, consultation and engagement work of our partners in the Osteopathic Development Group.

Finance and governance

Communications and engagement

- Supporting the implementation of the updated Osteopathic Practice Standards and the new CPD scheme.

- Evaluating our performance against the 2016-19 Corporate Strategy and developing and agreeing a new Strategic Plan for 2019-22.
- Implementing improvements to our IT infrastructure to provide effective, responsive and cost-effective services.

7. How we are run

Council

The 2018-19 GOsC Council consisted of 10 members, five osteopaths and five lay. They are the charity Trustees, 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 1993.

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 2018-19

Chair (lay)
Alison J White
Lay members
Sarah Botterill
Dr Bill Gunnyeon
Dr Joan Martin
Dr Denis Shaughnessy
Osteopath members
John Chaffey
Elizabeth Elander
Simeon London
Haidar Ramadan
Deborah Smith

Brief biographies of all current Council members are available on the GOsC website at: www.osteopathy.org.uk/council.

Committees of Council

Council is supported in the delivery of its objectives by a number of statutory and non-statutory committees. There are three committees of Council: the Policy Advisory Committee; the Audit 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.

Policy Advisory Committee

The Policy Advisory Committee fulfils the statutory role of the Education Committee under section 1 of the Osteopaths Act 1993.

The role of the Policy Advisory Committee is to contribute to the development of Council policy. This includes:

- The standards required for initial registration and appropriate means for assessing those standards.
- All matters relating to pre-registration education and training of osteopaths, including the standards of osteopathic practice required for registration.
- Post-registration education and training, including the requirements for ensuring osteopaths remain fit to practise.
- The management, investigation and adjudication of concerns about the fitness to practise of registrants.
- Matters relating to the exercise of powers under section 32 of the Act (protection of title).
- The development of the osteopathic profession.
- Measures to encourage research and research dissemination within the osteopathic profession.
- Any research needs to support the GOsC's work.

Its statutory role as Education Committee includes:

- 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.

Members of the Policy Advisory Committee 2018-19

Council members	
John Chaffey	osteopath
Elizabeth Elander	osteopath
Dr Bill Gunnyeon (Chair)	lay
Dr Joan Martin	lay
Alison J White	lay
External members	
Dr Marvelle Brown	lay
Bob Davies	osteopath
Professor Raymond Playford	lay
Nick Woodhead	osteopath

In addition, four organisations are invited to send observers to the meeting: the Council of Osteopathic Educational Institutions; the Institute of Osteopathy; the National Council for Osteopathic Research; and the Osteopathic Alliance. The observers may participate in all parts of the meeting except for that business reserved to the statutory Education Committee.

Audit Committee

The role of the Audit Committee is to provide advice 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 2018-19

Council members	
Haidar Ramadan	osteopath
Dr Denis Shaughnessy	lay
External members	
Martin Owen (until 31 March 2019)	lay
Chris Shapcott (Chair)	lay

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 2018-19

Council members	
Sarah Botterill	lay
Simeon London	osteopath
Deborah Smith	osteopath
Alison J White (Chair)	lay
External member	
Ian Muir	lay

Council members' attendance at Council and committee meetings

Name	Council	Audit	Policy Advisory	Remuneration and Appointments
Alison J White	4/4		3/3	3/3
Sarah Botterill	4/4			3/3
John Chaffey	4/4		2/3	
Elizabeth Elander	4/4		3/3	
Dr Bill Gunnyeon	4/4		3/3	
Simeon London	3/4			3/3
Dr Joan Martin	3/4		0/3	
Haidar Ramadan	4/4	3/3		
Dr Denis Shaughnessy	4/4	3/3		
Deborah Smith	4/4			3/3

Individual members also attend working groups, ad hoc meetings and appraisals throughout 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 2018-19

Helen Bullen (resigned January 2019)	osteopath
Adam Fiske	osteopath
Sue Gallone	lay
Caroline Guy	osteopath
Catherine Hamilton-Plant	osteopath
Eleanor Harding	lay
Laura Heskins	lay
Jim Hurden	osteopath
James Kellock (Chair of Investigating Committee)	lay
Yvonne McNiven	osteopath
Jacqueline Telfer	lay
Debbie Watt	osteopath
Tamsyn Webb	osteopath

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

Members of the Health and Professional Conduct Committees 2018-19

Tom Bedford	osteopath
Alastair Cannon	lay
Colin Childs	lay
Claire Cheetham	osteopath
Richard Davies (Chair of Professional Conduct Committee)	lay
Tracy Davies (resigned September 2018)	osteopath
Philip Geering (Chair of Health Committee)	lay
Helen Greenwood	osteopath
Barry Kleinberg	osteopath
Morag Mackellar	lay
Kenneth McLean	osteopath
Nora Nanayakkara	lay
Colette Neville	lay
Mark Osborne	lay
David Propert	osteopath
Lakshmi Ramakrishnan	lay
Andrew Skelton	lay

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 staff in 2018-19 was 26.

The Chief Executive and Registrar in 2018-19 was Tim Walker until 3 March 2019. Leonie Milliner was appointed Chief Executive and Registrar and took office from 4 March 2019. The Senior Management Team in the year were:

- Fiona Browne, Director of Education, Standards and Development
- Sheleen McCormack, Director of Fitness to Practise
- Matthew Redford, Director of Registration and Resources

GOsC advisers

Auditors

Crowe U.K.
St Bride's House
10 Salisbury House
London EC4Y 8EH

Bankers

Royal Bank of Scotland
62-63 Threadneedle Street
London EC2R 8LA



General
Osteopathic
Council

General Osteopathic Council
Osteopathy House
176 Tower Bridge Road
London SE1 3LU

020 7357 6655

www.osteopathy.org.uk

The GOsC is a charity registered in England and Wales (1172749)