

GENERAL OSTEOPATHIC COUNCIL

Minutes of the public session of 72nd meeting of the General Osteopathic Council
Thursday 14 July 2011

Unconfirmed

Chair: Professor Adrian Eddleston

Present:

Geraldine Campbell	Brian McKenna
John Chuter	Kenneth McLean
Paula Cook	Robin Shepherd
Jonathan Hearsey	Julie Stone
Nick Hounsfield	Fiona Walsh
Kim Lavelly	Jenny White

In attendance:

Tim Walker, Chief Executive and Registrar
 Fiona Browne, Head of Professional Standards
 Alan Currie, Head of Registration and MIS
 Matthew Redford, Head of Finance and Administration
 Velia Soames, Head of Regulation
 Brigid Tucker, Head of Policy and Communications
 Marcus Dye, Professional Standards Manager
 Jane Quinnell, Governance Manager

1. Observers, as follows, were welcomed to the meeting:

Catherine Goodyear, Chief Operating Officer, British Osteopathic Association (BOA)
 Liam Stapleton and Rob McCoy, external members of the GOSC Education Committee

Apologies

2. Apologies were received from Professor Ian Hughes.

Questions from observers

3. There were no questions.

Minutes and matters arising

4. The minutes of the public session of the Council meeting held on 12 April 2011 were **agreed** subject to slight rewording of the second sentence of Paragraph 10a for clarity.
5. It was confirmed that the Chief Executive had sent a letter at the end of April, exploring the GOSC's concerns about the CHRE's statutory levy proposals. This letter had been copied to Council members and would be re-circulated to those who indicated that they

had not received a copy.

Chair's Report

6. The Chair presented his report.
 - a. Appraisals Members were thanked for their input into their appraisals and for the advice to the Chair about the running of the Council.
 - b. Chair's recruitment campaign The campaign was now underway on the Appointments Commission's website and advertised in the Sunday Times. The Chair was pleased to report that the risks associated with taking on a new Chair were minimised due to running the campaign in plenty of time to allow for a good induction and handover period.
 - c. Remuneration Committee
Vivienne Murch, Head of Human Resources at the General Pharmaceutical Council, was recently interviewed by the Chair and he felt that she could bring good experience to fill the external member vacancy on the Committee. **Agreed** to appoint Vivienne Murch as external expert member to the Remuneration Committee for three years.
 - d. Kenneth McLean had applied to fill the osteopath vacancy on the Remuneration Committee, following Paula Cook's resignation from the Council as she was to take up a place at Bart's and The London Medical School to read Medicine. He had previous experience from the commercial and voluntary sectors. **Agreed** to appoint Kenneth McLean to the Remuneration Committee.
 - e. Education Committee Paula's resignation would also leave an osteopath vacancy on the Education Committee. Two strong applications were received from Jonathan Hearsey and Brian McKenna and both Council members had a good background of useful experiences for the Committee. **Agreed** to appoint Brian McKenna as an osteopath Council member of the Education Committee and **further agreed** the Education Committee's recommendation to co-opt Jonathan Hearsey to the Committee for a period of 3 years.

7. The report was **noted**.

Chief Executive's report

8. The Chief Executive presented his report and highlighted several items:
 - a. National Council for Osteopathic Research (NCOR) The British Osteopathic Association and the Osteopathic Education Foundation had agreed to become funders of NCOR. Revised governance arrangements were now being developed to strengthen accountability to stakeholders: there was to be a Director rather than a Chair (Professor Ann Moore is retiring as Chair in 2012) and a smaller, more focused management board reporting to the wider Council. A paper on the GOSc's contribution to NCOR would be brought to Council in October.
 - b. UK Border Agency (UKBA) The UKBA have accepted that the GOSc's quality assurance process in place for Osteopathic Educational Institutions (OEIs) was sufficient to ensure genuine educational oversight for Tier 4 licensing purposes. The independent OEIs who gained a Tier 4 Licence would not now need separate reviews.
 - c. Online registration renewals/email reminders A significant number of osteopaths were

using the new online services which meant efficiency savings.

- d. The Law Commission Work on investigating the development of a single regulatory Act was now underway. The Head of Regulation had been nominated for the working group because of her legal background and experience. A wider stakeholder's group was to be established and the Chief Executive and the Head of Regulation would be nominated to join this group. Additionally, two Council members would be nominated to join the group and members interested in being involved were invited to self-nominate to the Chair.
- e. Business plan monitoring (annex A) and financial reports (annex B) For the first quarter, broadly speaking, everything was on track with the business plan and budget.
- f. Key data (annex C) This information was now produced in a more graphic format.

9. Members then raised questions or made observations.

- a. Business Plan monitoring report - 1.5 Review of Code of Practice Julie Stone's offer of help to develop supplementary online guidance on specific topics to support the Code of practice element of the Osteopathic Practice Standards was noted.
- b. NCOR The proposed new governance arrangements for NCOR were noted as much more helpful. NCOR would continue as a Joint Arrangement that is Not an Entity (JANE) with the GOsC accounts. The new Director, to be recruited, would want to input into NCOR's business plan and budget so it might be that the stakeholders, including the GOsC, would have to agree to a funding contribution in principle before the business plan and budget were finalised.
- c. Sickness absence (Annex C) As a small organisation, one employee's significant period of absence could cause a spike but it was noted that the average amount of sickness absence per full time equivalent was below the public sector average. Additionally, Human Resources is carrying out some work on a formal absence management process.
- d. Leavers Q1 (Annex C) Members wondered whether a breakdown was required of why osteopaths were resigning from the Register as this could affect revenue. The Audit Committee had looked at trends in leavers because the risk had been added to the high level risk register. The data showed that over the last few years, the numbers leaving the register were actually reducing. It was acknowledged that the GOsC needed to know the reasons for leaving the Register and the Head of Registration was currently discussing with other regulators how they surveyed leavers. Reasons for osteopaths choosing to become non-practising will also be analysed in case there are any trends in that area.
- e. CHRE complaint The complaint arose over someone who provided information about an osteopath but where witnesses would not provide information. Eventually the police were involved and they were able to investigate further. It was a complex case that following a criminal trial, resulted in the removal of the osteopath from the register. The GOsC was now working with the other regulators about when matters should be referred to the police and how to relate to informants who are not themselves witnesses.
- f. Enabling Excellence command paper Reference to the Command Paper would be added to the Business plan.
- g. Financial Report (annex B) The accruals accounting process accounted for why the debtors and creditors figures changed so drastically from the last quarter to the first quarter of the new financial year – it would balance out over the year.

10. The report was **noted**.

Fitness to practise report

11. The Head of Regulation presented the report and highlighted several areas. CHRE's initial stages audit reported robust initial stages resulting in good decisions and following a review of its auditing procedures, the next audit would now take place in 2012-13 as the GOsC was deemed to be lower risk. No conclusions were currently being made on the summary of annual figures which showed complaints were down by about a third from the previous year.
12. Recruitment for the Chair of the Investigating Committee was about to commence with an advert going into appropriate media at the end of July, shortlisting and interviewing in September with commencement of the appointment by the beginning of October so that the appointee could attend the October Council meeting.
13. A small scale consultation of interested parties, including the Fitness to Practise Policy Committee, was to take place at the instigation of the PCC to consider witnesses of fact and how they present their evidence.
14. Members then raised questions or made observations.
- a. The Head of Regulation would consider whether the witness' consultation could be combined with the forthcoming audit of the procedures of the Professional Conduct Committee.
 - b. No conditions had been attached to CHRE's decision to carry out less frequent initial stages audits on those deemed 'lower risk' so there was currently no obligation on the GOsC to report any changes it might make to Fitness to Practise procedures that might be covered under the audit.
 - c. Annual Reports for the Fitness to Practise Committees would be presented at the October meeting.
15. The report was **noted**.

Stakeholder engagement report

16. The Head of Policy and Communications presented the stakeholder engagement report which summarised GOsC stakeholder engagement activity in the period April 2011 to June 2011. Hard copies of the Osteopathic Practice Standards (OPS) had now been sent to all osteopaths and stakeholders. The Annex to the report confirmed the communications and engagement strategy from now to 1 September 2012 for introduction of the new Osteopathic Practice Standards.
17. Members then raised questions or made observations.
- a. It was confirmed that the introduction programme would highlight changes from the current Standard of Proficiency and the Code of Practice and the new OPS. Live

examples from Professional Conduct Committee feedback and case studies would be used. The Executive would look at the previously run workshops 'Critical Cs' to consider whether the approach could be adapted to help with the introduction of the OPS.

- b. Members considered that the revalidation training workshops would be another situation where the new OPS could be embedded.
- c. It was confirmed that there would be another strategy, running alongside the strategy at the Annex, to let patients and the public know that there was a new document presenting all the standards of conduct and competence required of osteopaths.

18. The report was **noted**.

Annual Report and Accounts 2010-11

- 19. The Chief Executive presented this paper which confirmed that the audit of the GOsC's accounts took place in May 2011, that the draft accounts were scrutinised by the Finance and General Purposes Committee and that the Audit Report and Key Issues Memorandum had been presented to the Audit Committee. A draft Annual Report was also presented for approval. Expenses claimed by Fitness to Practise committee members and other members of committees who were not Council members were now shown as a total figure for each committee.
- 20. It was proposed that members' attendance at Council and Committee meetings be added to the Annual Report as this would promote transparency, along with the enhanced listing of the breakdown of all expenses received by Council members. A footnote would be added to page 44 to explain that Council members also attended working groups meetings, tender boards, appraisals and other ad-hoc meetings during the year. The Executive would consider how it could amplify details of meetings attended by Council members for next year's Annual Report.
- 21. **Agreed** to the disclosure of members' attendance to Council and Committee meetings with the addition of a footnote to explain that members attended other meetings during the year.
- 22. With regard to the draft Annual Report:
 - a. It was considered that the graph on page 20 showing total expenditure required further explanation. **Agreed** to remove the graph and sentence above it for this year as a detailed explanation of the increase in expenditure over the ten years would require substantial additional information. The Executive would consider ways of putting the fuller information and the historic background back into next year's Annual Report.
 - b. As engaging with patients, the public and professions was a very important aspect of the GOsC's work, it was suggested that the report at page 14 be brought forward in the Annual Report.

- c. Some consistency of approach in reported expenditure was required on page 20 and 21 so that all department areas showed the previous year's figures to give the reader a better understanding.
 - d. Under Key Projects for 2011-12, on page 17, the text under Governance required the addition of 'and members of Council and Committees'
 - e. More information was requested for the employment costs on page 20 to explain the rise in expenditure.
 - f. Some minor typographical errors would be reported directly to the Communications Department by individual Council members.
23. **Agreed** the Annual Report and Accounts for 2010-11 subject to making changes as detailed above.

GOsC Committees' Annual Reports 2010-11

24. **Noted** the Annual Reports of the Audit, Education, Finance and General Purposes and Remuneration Committees, and that the Fitness to Practise Committees and the Fitness to Practise Policy Committee's reports would be tabled at the October 2011 Council meeting.

Enabling Excellence – next steps

25. The Chief Executive presented the paper which updated the Council on the work undertaken in response to the recent government policy statement on healthcare professional regulation *Enabling Excellence*. He confirmed that the CHRE had produced a provisional timetable for its work on a review of the costs of regulation across all healthcare professional regulators. Additionally, the General Chiropractic Council had previously been in discussion with the Executive about the sharing of some services but this work was currently on hold as the GCC Council had decided that it wished to explore options for internal savings. The paper included the Executive's initial thoughts on options for costs savings but these had not been assessed in any way with regard to the impact on osteopaths, patients and the public, and finances. The Executive's work in this area had led on to discussions about the broader context in which we regulate. The Chief Executive then made a short presentation which looked at challenges for osteopathy and the GOsC, and the future development of the profession. The Chief Executive suggested that the issues around development of the profession should make up the agenda for the forthcoming Council development day at the beginning of October with a view to developing proposals for informal and formal consultation with the profession.
26. Members then raised questions or made observations.
- a. The Chair suggested that the short-life working group to support the Executive to investigate areas for possible cost savings be comprised of five members of the Council, chaired by an osteopath. He asked members to self-nominate by email to him with a short description of why they would be interested in joining the group. This working group would explore all options fully and help the Executive understand the impact of options for savings and then bring the results of its research back to the

Council for full discussion.

- b. Mr Shepherd would make a short presentation at the October development day on what a Royal College/Society could bring to the profession and provide in this area of regulatory cost savings.
 - c. It was appreciated that different stakeholders had different philosophies and that all needed to be brought together in this most important, pivotal work for the profession. Buy in by the profession, from the beginning of this work, which was driven by *Enabling Excellence*, was extremely important so that the GOsC continued to protect patients and the public.
 - d. It was not clear yet how the Law Commission work around researching a single Act was going to interact with *Enabling Excellence*.
 - e. Concern was raised about the timing of all this work as some Council members' terms of office were coming to an end in March 2012.
 - f. Caution was raised about highlighting the drivers behind this work and the work that the Council did when talking to the profession because some osteopaths would still make comparisons the Health Professions Council and their costs.
 - g. The working group would also be asked to consider what the Council did well with regard to income generation and not just cost savings, as this could be considered value for money.
 - h. Papers would be prepared for the development day, with Council members' input.
27. **Agreed** to consider the issues around development of the profession at the Council development day with a view to developing proposals for informal and formal consultation with the profession.
28. **Noted** the areas identified as options for possible costs savings at Annex B of the paper and **agreed** to further investigate these and to form a short-life working group to support the SMT in doing so.
29. **Agreed** to use the working group to examine any emerging options for joint working with other regulators.

Council for Healthcare Regulatory Excellence (CHRE) Performance Review 2010-11

30. The Chief Executive presented the Executive Summary and the GOsC's section of CHRE's annual Performance Review *Changing regulation in changing times 2010-11*. It was a positive review and the CHRE was happy with the work of the GOsC. CHRE highlighted a number of areas of this year's work that it would like to follow up in next year's Performance Review. One of these items – consideration of requiring only a self-declaration in relation to an individual's health, rather than a certified health declaration – would be considered, alongside the reporting of civil convictions, by the Fitness to Practise Policy Committee but it was noted that any change would require new legislation

31. The CHRE had made a number of recommendations to all regulators including asking them to adopt the practice of requiring registrants convicted or cautioned for drink or drug related offences to undergo a routine medical examination to establish whether or not their fitness to practise was impaired as a result of an underlying drink or drug dependency. A number of the other regulators currently carry out this practice but the GOsC had very low number of health cases and therefore it would be talking to the other regulators seeking advice before it considered introducing anything in this very sensitive area. Another recommendation covered reviewing a regulator's processes for handling complaints about themselves. The GOsC had recently reviewed its complaints process and had issued a revised process to deal with corporate complaints and all corporate complaints were reviewed by the Audit Committee.
32. Members then raised questions or made observations.
- a. Executive summary, 2.14 – the requirement to have indemnity insurance in place as a condition of registration was covered in the GOsC's procedures as a renewal of registration requirement. The GOsC was in touch with the osteopathic insurers with a view to getting proof of valid insurance as an electronic online process to make renewing annual registration easier.
 - b. GOsC report, 13.13 – the GOsC was keeping support for witnesses under constant review and was looking at other regulators' practice. The small number of cases, with only one taking place at a time, meant that the GOsC was able to support all witnesses with a high level of assistance, where required.
33. The 2010-11 CHRE Performance Review Report was **noted**.

Equality and Diversity Policy – work in progress

34. The Chief Executive presented the paper which set out the work being carried out in this area following the passing of the Equality Act 2010. The GOsC's current Equality Scheme and Action Plan had now expired because the Equality Act 2010 set out a new equality duty for public sector bodies and it extended the list of 'protected characteristics'. As the Government has not yet finalised the specific duties of public sector bodies, it was not appropriate to finalise a new GOsC Equality and Diversity Policy.
35. Members then raised questions or made observations.
- a. Members suggested some re-wording of the high level objectives proposed:
 - a. to ensure our regulatory framework is ~~evidence-based~~, fair and free from discrimination;
 - b. to promote professional values that protect a diverse public;
 - c. to promote equality of opportunity and access to the osteopathy*ic* profession;
 - d. to ensure a system of governance for the GOsC that supports equality and diversity;
 - e. to ensure high standards in the *recruitment and* employment of our staff
 - b. 'Recruitment and' should be added to the Employment title on the Action plan.

36. **Noted** the current uncertainty around guidance on meeting the public sector equality duties under the Equality Act 2010 and the subsequent impact on the GOsC.
37. **Agreed** the GOsC's key objectives in respect of equality and diversity, subject to amendments as above.
38. **Agreed** the list of functions and policies for equality impact assessment and draft action plan for 2011-12, subject to the addition of 'Recruitment and' to the Employment title.
39. **Noted** that a further report will be brought to Council to approve a final Equality and Diversity Policy later in 2011-12

Revalidation

40. The Head of Professional Standards gave a presentation on Revalidation and the current position to put the following items into context.

Revalidation Standards, Assessment and Guidance

41. **Agreed** the *Guidelines for Osteopaths Seeking Revalidation (Revalidation Pilot)* for the purposes of the 2011/12 Revalidation Pilot.
42. **Noted** the progress of the development of the training materials for Revalidation Pilot Participants and Revalidation Pilot Assessors.

Evaluation and Impact Assessment

43. **Agreed** to amend the Revalidation Pilot Specification to include 'To explore the impact of the Pilot, in terms of equality and diversity, on particular groups of osteopaths' as an explicit aim.
44. **Agreed** to publish Report D *Information specification for the evaluation and impact assessment of the GOsC Revalidation Pilot*.

Revalidation Pilot

45. The Head of Professional Standards confirmed that Professor Ian Hughes and Kenneth McLean had self-nominated themselves to join the Revalidation Pilot Assessor Selection Panel alongside Marina Urquhart-Pullen – nominated by the British Osteopathic Association and Manoj Mehta – nominated by the Council of Osteopathic Educational Institutions. Their nominations has been accepted by Council members via email.
46. All work streams to the extent necessary to launch the pilot had been completed and it was therefore **agreed** to launch the Revalidation Pilot.

Review of Continuing Professional Development (CPD)

47. The Head of Professional Standards presented the paper which set out the background to a review of the CPD Scheme. The proposed discussion document was to sit alongside

the Revalidation Pilot to generate debate about what was wrong with the CPD scheme, what worked well and how the CPD scheme might be improved to better meet the objectives of both CPD and the CPD scheme. The Executive would look at any other work carried out by the other healthcare regulators on CPD.

48. **Agreed** to publish the CPD Document for discussion until 30 September 2012.
49. The Chair, on behalf of the Council, thanked the members of the Revalidation Standards and Assessment Group, the Head of Professional Standards and her team and Caitrian Guthrie and the other members of the Assessment Expert Team for all their hard work on Revalidation.

Recognised Qualifications – streamlining the process

50. The Professional Standards Manager presented the paper which updated the Council on the present position with regard to streamline the Recognised Qualifications' process
51. **Noted** the outcomes of the meeting with the Department of Health and the Privy Council.
52. **Agreed:**
- a. to the inclusion of a latitude clause within Council and Committee papers to allow the GOsC Executive to negotiate minor RQ drafting changes with the Privy Council – 'This is agreed subject to minor drafting amendments which may arise as a result of negotiations with the Department of Health and Privy Council'.
 - b. that substantial changes to RQs which have been proposed by the Privy Council and agreed by the GOsC executive should be delegated to the Education Committee for consideration and final agreement. **Further agreed** that a report would come back to the Council at each meeting to show where this delegate power has been used.
53. **Noted** that further changes to the RQ process would be considered as part of the Law Commission consultation and the GOsC major review of QA processes due to take place in 2012.

Quality Assurance consultation

54. The Professional Standards Manager presented the paper which confirmed that the GOsC had conducted a review of the quality assurance of education and training to ensure that the procedures were fit for purpose. Consultation took place on a revised GOsC Review Method Handbook and an Annual Report template.
55. **Agreed:**
- a. to publish the consultation report analysis
 - b. to publish the revised GOsC Review Method Handbook and Annual Report template.

Welsh Language Scheme

56. The Head of Policy and Communications confirmed that the GOsC had developed and

consulted on a Welsh Language Scheme. The Scheme had been submitted to the Welsh Language Board and was now approved.

57. **Noted** the current position and **approved** the introduction of the GOsC Welsh Language Scheme.

Minutes of the Audit Committee meeting of 5 July 2011

58. The minutes were **noted**.

Minutes of the Education Committee meeting of 14 June 2011

56. The minutes were **noted**.

Minutes of the Finance and General Purposes Committee meeting of 22 June 2011

59. The minutes were **noted**.

Any other business

60. It was confirmed that Council members should speak to the chairs of the Council's committees if they wished to observe a committee meeting as part of their development.

Date of next meeting

61. Council meeting – Tuesday 11 October 2011.
Council Development Day – Monday 3 October 2011