



Minutes of the Public Session of the 84th meeting of General Osteopathic Council held on Wednesday 23 July 2014 at 176 Tower Bridge Road, London SE1 3LU

Confirmed

Chair: Alison White

Present: John Chaffey
Colin Coulson-Thomas
Mark Eames
Jorge Esteves
Nick Hounsfield
Kim Lavelly
Brian McKenna
Kenneth McLean
Joan Martin
Haidar Ramadan
Julie Stone

In attendance: Russell Bennett, Regulation Manager
Marcus Dye, Professional Standards Manager
David Gomez, Head of Regulation
Jane Hern, Chair, Audit Committee (Item 7 and Item 18)
Margot Pinder, Web Manager (Item 19)
Matthew Redford, Head of Registration and Resources
Marcia Scott, Council and Executive Support Officer
Brigid Tucker, Head of Policy and Communications
Tim Walker, Chief Executive and Registrar

Observers: Maurice Cheng, Chief Executive, Institute of Osteopathy
Chris Shapcott, external lay member, Audit Committee

Welcome and opening comments

1. The Chair welcomed all participants to the meeting. A special welcome was extended to Russell Bennett, who had recently joined the GOC as Regulation Manager.
2. The Chair welcomed observers Maurice Cheng, Chief Executive of the Institute of Osteopathy (iO), Chris Shapcott, external lay member of the Audit Committee and Jane Hern, Chair of the Audit Committee.

Item 1: Apologies

3. Apologies were received from Jonathan Hearsey, and Jenny White for the latter part of the meeting. Comments on the agenda items had been submitted to the Chair prior to the meeting by both Jonathan and Jenny and would be taken into account during discussions. Fiona Browne was unable to attend as she was on leave.

Item 2: Questions from observers

4. Maurice Cheng said he did not have any questions but welcomed the discussion to be held on Threshold Criteria for Unacceptable Professional Conduct (Item 9) as the current system was viewed as generating too many unwarranted investigations.

Item 3: Minutes and Matters Arising

Minutes

5. The minutes of the public session of the Council held on 1 May 2014, were approved as a correct record of the meeting subject to the following amendment:

Item 9: GOsC Whistleblowing Policy: page 13, paragraph 32c, second sentence, to read: 'It was believed that the technical content was correct and there would be a review on how the policy would be taken forward'.

Matters Arising

6. Item 14 Mentoring Project: Members asked about the ownership of Intellectual Property (IP) as it appeared that this lay with the Osteopathic Development Group (ODG). The Chief Executive responded that because the ODG was not a formal entity the contract for the project is between GOsC on behalf of the ODG and Health Academix. Therefore the IP in the contract sits with the GOsC and is protected.
7. Members asked about the position of academic researchers if they wanted to use IP for publications. The Head of Regulation explained that a clause in the contract allowed for grant of a licence for use of IP for publications.
8. The Chief Executive asked members to note that the item on procurement which was to have been presented at this meeting would be scheduled for the next meeting of Council in November 2014.

Item 4: Chair's Report and Appointments

9. The Chair gave an oral report to Council. The main points were:

- a. PSA Performance Review: the Chair congratulated and thanked the Chief Executive and his team for overseeing the delivery of another year of excellent performance, and where the PSA reported that all the standards of good regulation had again been met. She thought it important to mention this as the first item in her report, as it was a critical accolade of the effectiveness of the work of the GOsC.
- b. Annual reviews: the Chair had completed the process of annual reviews for all members of Council, and the non-executive members for whom she is accountable for appraising. She advised members that in the absence of a permanent chair she would complete the annual reviews for members of the Professional Conduct Committee during the summer. She commented that she had found the meetings valuable and was pleased that the process seemed to be working well. The commitment shown by members in carrying forward agreed areas of development, and identifying further areas which would enhance their contribution to Council, impressed her and she believed this would enhance the process further leading to a more effective Council. Members had commented that they appreciated the opportunities to contribute to policy development and decision-making in a range of ways, but especially through the introduction of seminar sessions and smaller group working.
- c. The Chair reported that she had had an excellent personal discussion facilitated by Kenneth McLean and Kim Lavelly, and they had taken the opportunity to review the past year. A number of development opportunities were also agreed which in summary were:
 - i. To continue to work with members and the Chief Executive on meeting effectiveness and the environment more generally, especially working with the Executive and increasing the effectiveness of scrutiny and challenge;
 - ii. To provide additional focus on ethics in respect of the behaviour of all non-executives and to continue to engage the skills and talents of members in contributing to the strategic agenda of Council.
- d. Healthcare regulatory chairs meeting: on 19 June, a meeting of the healthcare regulatory chairs was hosted and chaired by the GOsC. The Chair commended the staff who had handled the occasion with great professionalism. The chairs were joined at that meeting by Sir Keith Pearson, Chair of Health Education England (HEE), and it was agreed to increase engagement at operational level and also to provide input and influence to HEE on its strategic vision. Additionally, some chairs indicated their disquiet over the current PSA Performance Review process commenting that they felt it was time-consuming and over-complicated and that it required an independent review. There would be a meeting in the autumn attended by the Chair of the PSA at which these issues would be further discussed.

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

Members asked if the proposed PSA Levy for healthcare regulators was still on the agenda. The Chief Executive responded that the levy was still expected to be implemented and the Department of Health is aiming for this to take place during 2015. It was expected that the fee would be per registrant and costing for this would be factored into the budget paper for the meeting of Council in November 2014.

The Chair's report was noted.

11. Appointments: the Chair introduced the item advising that following discussions with members of Council at their review meetings, changes to committee membership would take place with immediate effect as follows:
- a. Audit Committee – Brian McKenna will replace Kenneth McLean.
 - b. Education and Registration Standards – John Chaffey will replace Brian McKenna. In addition Joan Martin has taken Geraldine Campbell's place on the Committee.
 - c. Osteopathic Practice Committee – Kenneth McLean will replace Haidar Ramadan.
 - d. Remuneration and Appointments Committee – Haidar Ramadan will replace John Chaffey.
12. The Chair also asked members to approve the appointment of Jonathan Hearsey as Chair of the Osteopathic Practice Committee (OPC) replacing Julie Stone who as the former Chair of the Fitness to Practise Policy Committee helped to manage its transition to the current Osteopathic Practice Committee. She hoped that the appointment of Jonathan would be welcomed by the profession as he would be the first registrant Chair of a committee since 2008-2009.
13. On behalf of Council the Chair paid tribute to Julie for her leadership and contribution as a member and Chair of both the Fitness to Practise Policy and Osteopathic Practice Committees.
14. The Chair also reported that Judith Worthington had been appointed as Acting Chair of the Professional Conduct Committee (PCC) and would remain in the role until a permanent Chair was appointed. Members were advised that the recruitment process was underway and the Chair hoped to report on an appointment at the next meeting of Council in November.

Council noted the changes to the GOsC committees' membership.

Council agreed the appointment of Jonathan Hearsey as Chair of the Osteopathic Practice Committee.

Item 5: Chief Executive's Report

15. The Chief Executive introduced his report which gave an account of activities undertaken since the last Council meeting and not reported elsewhere on the agenda.
16. Members were asked to note a correction in the Law Commission update at paragraph 3 of the report where the first sentence should read:

'The Bill will not now be considered in any form until after the General Election'.
17. The Chief Executive also highlighted the following:
 - a. Effectiveness of regulation research: the survey had very recently gone live and there had been an encouraging response with 60 submissions recorded to date.
 - b. Marcus Dye – Professional Standards Manager: members were asked to note and thank Marcus Dye for the contribution he has made to the GOsc in his 13 years with the organisation which he would be leaving at the beginning of August.
 - c. Swansea University Graduation Ceremony: the Chief Executive and Brian McKenna attended the graduation ceremony for the first cohort of graduates completing their courses at Swansea University. The Chief Executive informed members that the event had been very successful and it been especially rewarding not only to attend this first graduation but also to present awards to graduates.
 - d. Business Plan: there had been some slippage under a number of the work-streams due, in part, to the recent turnover in staff. The Chief Executive also advised members that areas of the plan which had not yet commenced, and were without status indicators, would have them in future.
 - e. Financial Report: members were advised that there might be a potential deficit due to the high volume of fitness to practise cases. It had been highlighted as an area subject to fluctuations, but it was not clear at this point if the increased volumes were a trend or not. To meet the increased costs, there would need to be a robust review of budgets for 2015-2016.
 - f. Key Data: the Audit Committee had reviewed the Key Data document at its meeting of 1 July and in light of its observations, it was agreed the presentation of data should be reviewed. Further feedback and comment from members on the presentation of Key Data would be welcomed by the Executive.

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

Chief Executive's Report

- a. Members asked when it would be possible to see the literature reviews from the Effectiveness of Regulation Research. The Chief Executive responded that members would be advised as soon as the reviews were available and that the publications would appear on the members' site in due course.
- b. Members enquired about how the decisions on the size and requirements of Council had been agreed. The Chair responded that the basis for the requirements had been set out in the Government's [Enabling Excellence](#) report in 2011. The GOsC's decision to reduce the size of Council had followed a review of the GOsC's governance in 2012. The Chief Executive advised interested members he would circulate the relevant papers.
- c. The Chief Executive was asked what he thought was driving the Private Member's Bill being promoted by Jeremy Lefroy MP. The Chief Executive explained the current situation relating to the proposed Bill and that it was unlikely there would be anything published until later in the year. There was a high probability of the Bill being passed but the approach being taken was not without problems and there would be continued discussions with the Department of Health. It was uncertain whether, if the Bill was passed, it would reduce the likelihood of the Law Commission's Bill being considered.
- d. Members asked why the GOsC's Section 60 order request had been declined. The Chair responded that it was because, fundamentally, the GOsC was one of the smaller regulators and therefore the requests did not receive the same priority as others.
- e. Members asked whether if, at the Health Regulators Chairs' meeting, opinions had been expressed and if there been discussion about the Law Commission's Bill. The Chair responded that there had been discussion and there were diverse views. She added that there had also been discussion on the Professional Standards Authority (PSA) and its potentially expanded remit (in the context of the Bill).

Business Plan

- f. A correction was noted under Section 2 – 2.1 Continuing FtP (CPD): The comment for the third activity – Conduct continuing professional development evaluation – should read:

'This is now likely to take place in spring/summer 2015 following a revised timetable considered by the OPC in June 2014'.

- g. Members expressed some concern about the expectations placed on the Professional Standards team and delivering against the targets set in the Business Plan. The Chief Executive responded that following the recruitment process to replace staff, although there would be some slippage, he was confident that the team would deliver.

Financial Report

- h. The Chair reassured members that the GOsC operated with robust, well managed financial controls, but suggested there should be a fuller, more detailed analysis of fitness to practise forecasting and a review of one-off costs.
- i. It was confirmed that the introduction of Threshold Criteria for Unprofessional Conduct was not driven by cost considerations.
- j. Members asked if more consideration should be given on how savings in fitness to practise cases could be made without losing the quality of the work. The Chair responded that efficiencies were dependent on the ability to make rule changes but it was a valid point. The Chief Executive advised members that a number of cost saving strategies had already been put in place or considered, for example:
- Not transcribing hearings
 - Reviewing the length of hearings
 - Introduction of Rule 8
 - Reviewing internal efficiencies
 - Legal costs – procurement of legal services.
- k. Members asked if pre-empting common factors leading to fitness to practise cases/hearings could save on cost. It was explained that this was difficult to do as it was not clear if the rise in cases was a trend which could be defined.
- l. Members asked what contingencies were in place for managing the costs where decisions are made subject to possible judicial reviews. The Chief Executive responded that judicial reviews were rare but part of the purpose of reserves was to meet these costs if required.

Key data

- m. Members were advised that there would be changes to the presentation of GOsC's key data and were invited to submit any further comments to the Chief Executive by 1 August.

Council noted the Chief Executive's Report.

Item 6: Quarterly Fitness to Practise Report

19. The Head of Regulation first introduced Russell Bennett, who had recently joined the GOsC as Regulation Manager. The Head of Regulation then introduced the item giving the quarterly update on the work of the Regulation Department and the GOsC's fitness to practise committees in which the following were highlighted:
 - a. Training and development – IC Training Day: the focus of the day was on decision making and provision of reasons. Members also considered the potential for the development of threshold criteria. Feedback for the day had been positive.
 - b. Legal Tender: following exercises to review and evaluate legal firms providing services to the GOsC, it was the view of the Executive that GOsC would not be best served by appointing a single provider of legal services and that a range of providers would be retained and used as appropriate.

20. In discussion the following points were made and responded to:
 - a. Feedback loops: members asked if there had been improvements in sharing information and learning from hearings. The Chief Executive responded that there were some issues in sharing and getting the information to those in practice. If there were upward trends, then action would need to be taken in conjunction with the professional association. The Head of Regulation added that the team were reviewing the use of 'profiling' to obtain information about registrants who appeared at hearings.
 - b. Members suggested getting back to basics in the training of students, helping them to better understand procedures and their responsibilities as osteopaths. The Head of Regulation responded that approaches to training were being considered under the professionalism project and by reviewing current student presentations.
 - c. Peer Review: members sought clarity on the peer review process. The Head of Regulation explained that the term 'peer review' referred to the GOsC's internal quality assurance process. As part of that process case files were reviewed for compliance with customer service standards and key performance indicators.
 - d. Dashboard: members asked if the data given in the dashboard could be reflected as narrative in the body of the Regulation report in order to give added substance to the statistics. The Head of Regulation agreed this would be done.

- e. Mediation: members asked whether having a discussion with the GDC to review fitness to practise cost through mediation services such as the Dental Complaints Service would be useful. The Chair advised that the model was not a viable option to reduce costs and was very expensive, and being independent of the regulator would not necessarily reduce fitness to practise cases.
- f. Members suggested the issuing of warnings to registrants. The Head of Regulation advised members that the GOsC had no powers to do this. The Chief Executive added that if there were low level complaints against an osteopath, the onus was on registrants to take action. Members advised that as most registrants were self-employed and/or sole practitioners, mediation might be worth exploring. It was suggested that the Chief Executive should discuss this issue further with the Institute of Osteopathy to explore what could be done.
- g. Moulton Hall Report: members asked to what extent the Moulton Hall Report was informing the improvement programme. The Head of Regulation responded that he felt that it had been a useful initiative to start thinking about procedures but had reached the limit of its usefulness. New data was now required to further improve procedures. The Chief Executive added that most of what could be implemented had been done as a result of the report. The report would be taken to the Osteopathic Practice Committee for further discussion.

Council noted the Quarterly Fitness to Practise Report

Item 7: Annual Report and Accounts

- 21. The Head of Registration and Resources introduced the item which sought approval for the publication of the GOsC's Annual Report and Accounts for the financial year 2013-14 and asked that the Audit Findings Report (AFR) from Grant Thornton LLP (the auditors) and the Letter of Representation to be signed by the Chair be noted. The Head of Registration and Resources also thanked the Chair, Kenneth McLean and Jenny White for their comments and feedback on the Annual Report.
- 22. The Chair commended the Head of Registration and Resources on the work completed for the Annual Report and the audit and informed members that she was satisfied with the robustness of the audit and the approach taken for its completion.
- 23. In discussion the following points were made and responded to:
 - a. Members requested confirmation that there had been a private discussion with the auditors about the AFR. The Chair of the Audit Committee confirmed although there had been no discussion which had excluded the GOsC staff, a private discussion on the AFR had taken place between the auditors and herself prior to the meeting of the Audit Committee on 1 July

2014. She assured members that where there were issues which may require private discussion by Audit Committee during meetings the option to exclude GOsC staff was considered by committee members.

- b. Members asked if insurance mechanisms and policies were included for review by the Audit Committee. The Chief Executive advised that advice relating to insurance policies was included in the Governance Handbook at Annex 3, page 53, paragraph 7.11, but agreed that it was a helpful suggestion that a review should be conducted by the Audit Committee.

Council noted the Audit Finding Report (AFR) and the Letter of Representation.

Council approved the Annual Report and Accounts for the financial year 2013-14.

Item 8: Development projects funding and update

- 24. Before the introduction of the item the Chair asked if there were any members with conflicts of interest relating to Health Academix. Julie Stone and Brian McKenna declared conflicts of interests and would leave the meeting for the duration of the discussion on the additional grant for the Advanced Clinical Practice Project.
- 25. The Chief Executive introduced the item which asked Council for an additional sum of £8,700 to be added to the grant made for the Advanced Clinical Practice Project following the conclusion of the tender exercise.
- 26. The Chief Executive also gave an update on the status of other GOsC-funded projects highlighting the following:
 - a. National Council for Osteopathic Research (NCOR): NCOR's adverse events websites had been completed and were now live. There would be a formal launch later in the year.
 - b. Mentoring Project: there had been a good response to the tender and interviews were being conducted. An appointment would be made in due course.
 - c. Advanced Clinical Practice: an appointment was due to be made with the preferred candidate Health Academix, but they have identified areas which will require additional work. The Executive agree that the work identified is important to the project and would be value for money.
- 27. In discussion the following points were made and responded to:
 - a. Members agreed the updates were very helpful and but questioned whether the projects were proceeding quickly enough. The Chief

Executive responded that there were external capacity constraints, and that progress was uneven but more advanced than had been expected.

- b. In relation to the Mentoring Project, members asked if the GOsC would be in the same position as the Advanced Clinical Practice Project. The Chief Executive responded that he did not think so as the initial budget had been more robust.
- c. Members expressed concern over the amount which GOsC contributed to the projects. The Chief Executive responded that the GOsC, as the second largest organisation within UK osteopathy, had the most resources available and a duty to invest. The Chief Executive also reminded members that the requirement for contributions from others had been agreed at a previous meeting.
- d. Members expressed concern about the fees shown in the costing for the project management team and wondered whether it could be considered value for money. It was agreed that the project was important but it was suggested that if Council was supportive of the project there might be scope for negotiation on costs.

Council noted the successful completion of the grant funded element of the evidence development project.

Council agreed to award an additional grant of £8,700 for the advanced clinical practice project, whilst seeking scope for reduction if possible through commercial negotiation.

Council noted the update on the mentoring project.

Item 9: Consultation on Guidance on the Threshold Criteria for Unacceptable Professional Conduct

28. The Head of Regulation introduced the item which set out proposals for the development of new guidance on threshold criteria for fitness to practise cases. The guidance would assist Screeners and the Investigating Committee (IC) when making decisions on whether complaints and allegations should be investigated or referred for a hearing. The Head of Regulation added that the Guidance was about fairness to all parties and that it was similar to the guidance published by the Healthcare Professions Council (HCPC) and was in line with regulatory development.
29. The Chair commented that there had been extensive discussion on the guidance at the meeting of the OPC and thanked the members for their comments.
30. In discussion the following points were made and responded to:

- a. It was confirmed that the consultation would commence in August. Members expressed concern that publishing during August might mean a low return in response to the consultation.
- b. Members also asked what mechanisms were in place for patient feedback. The Head of Policy and Communications responded that feedback was obtained in different ways depending on the type and purpose of the consultation.
- c. It was agreed the language contained in the guidance was complex but necessary in order to establish the legal framework. It was confirmed there would be explanatory information linked to the guidance and consultation and it agreed the wording would be circulated to members prior to publication.
- d. There was some concern that the guidance might be viewed as a list of legal technicalities or 'let outs'. The Head of Regulation assured members that this would not be the case. He also added that as the document was for consultation, the guidance could be amended making the language less legalistic and more accessible.

Council approved the draft Guidance on Threshold Criteria for Unacceptable Professional Conduct for consultation.

Item 10: Consultation on draft Professional Indemnity Insurance Rules

31. The Head of Registration and Resources introduced the item explaining that the GOsC is required to make changes to its Professional Indemnity Insurance (PII) 1998 rules following the implementation of EU Directive 2011/24/EU.
32. Members were informed that a three-month consultation was held on the principles to underpin new rules and the analysis of the responses was presented to the Osteopathic Practice Committee at its meeting in June 2014. Members were also advised that there may be some amendments after a Department of Health review of the draft rules. In addition there had been positive feedback from insurance brokers following a meeting held with them on 13 July.
33. Council was asked to approve the publication of the consultation on the proposed new PII rules.
34. In discussion the following points were made and responded to:
 - a. Members enquired about the number of registrants who insure with the iO block scheme and whether other insurers provide information to the GOsC in the same way as the iO. The Head of Registration and Resources responded that approximately 60% are insured under the scheme and confirmed that the notification process is available to other insurers.

- b. Members enquired if there was claims history available and what the numbers were. The Head of Policy and Communications advised members that some emerging data would be available in due course but indications were that the numbers were not large.
- c. It was agreed that the changes to insurance levels need to be proportionate and also that claims do not exceed cover.

Council approved the publication of the new PII Rules for consultation.

Council agreed the adoption of a new mechanism for registrants to demonstrate they hold professional indemnity insurance.

Item 11: London College of Osteopathic Medicine (LCOM) – Renewal of Recognition

- 35. Before introducing the item the Chair asked if there were any members with conflicts of interest relating to the London College of Osteopathic Medicine (LCOM). There were none.
- 36. The Professional Standards Manager introduced the item advising members that LCOM was seeking renewal of recognition for its qualification Member of the London College of Osteopathic Medicine (MLCOM).
- 37. The Quality Assurance Agency for Higher Education (QAA) conducted a review which began in November 2013 and ended in a visit to LCOM between 14 and 16 March 2014. The QAA Report was considered by the Education and Registration Standards Committee (ERSC) at its meeting on 25 June 2014, where it recommended the renewal of the recognition from 1 January 2015 to 31 December 2019 without any specific conditions other than those which apply to all osteopathic educational institutions.
- 38. The Chair of the ERSC noted that LCOM is a specialist institution for training those already qualified as medical doctors. The Council agreed to recognise the course for a period of five years in line with the maximum recognition period for other educational institutions. This would mean recognition to 31 December 2019.

Council agreed the recommendation of the Education and Registration Standards Committee to renew the recognition of the qualification Member of the London College of Osteopathic Medicine awarded by the London College of Osteopathic Medicine from 1 January 2015 until 31 December 2019 subject to the conditions outlined in paragraph 7 of the paper.

Item 12: Oxford Brookes University (OBU) – Extension of Recognition

39. Before the introduction of the item the Chair asked if there were any members with conflicts of interest relating to Oxford Brookes University. Haidar Ramadan declared an interest and left the meeting for the duration of the discussion.
40. The Professional Standards Manager introduced the item advising members that the Oxford Brookes University (OBU) review was scheduled by the Education and Registration Standards Committee (ERSC) due to the closure of the courses. The ERSC wanted to ensure that standards were being maintained and to consider an extension of the recognition to allow students who take longer to complete the course to graduate.
41. The Quality Assurance Agency for Higher Education (QAA) conducted a review which began in September 2013 and ended in a visit to OBU between 6 and 8 March 2014. The QAA report was considered by the ERSC at its meeting of 25 June 2014, where it recommended a further recognition period from 1 January 2017 until 31 December 2017, subject to the general conditions which apply to all osteopathic educational institutions. The ERSC also agreed to make specific recommendations to OBU as a result of the review and will work with the institution to ensure these are completed within reasonable timescales.
42. In discussion the following comments were made and responded to:
 - a. Members were advised that standards would be regularly monitored and the situation relating to the closure of the course kept under review.
 - b. Members were informed there had been detailed discussion about the OBU course closure at the meeting of the ERSC and the steps that would be required to ensure students were able to complete their courses.
 - c. Members commented that details about the closure of the OBU programme and the contingencies that were in place to maintain standards and ensure course completion by students were very helpful and allayed some of their concerns.
 - d. Members were advised that OBU would be in a better position in 2015 to assess whether any students are likely to require more time to complete the course as the University regulations allow a maximum of eight years. It was also reported that OBU was considering contingency plan if students are unable to complete within reasonable timescales.

Council agreed the recommendation of the Education and Registration Standards Committee to renew the recognition of the qualifications Master of Osteopathy and Bachelor of Osteopathy awarded by Oxford Brooks University from 1 January 2017 until 31 December 2017 subject to the conditions outlined in paragraph 10 of the paper.

Item 13: Swansea University – Renewal of Recognition

43. Before the introduction of the item the Chair asked if there were any members with conflicts of interest relating to Swansea University. Brian McKenna declared an interest and left the meeting for the duration of the discussion.
44. The Professional Standards Manager introduced the item advising members that Swansea University was seeking renewal of recognition for its Master of Osteopathy qualification. The Quality Assurance Agency for Higher Education (QAA) conducted a review which began in mid-September 2013 and ended in a visit to the university between 19 and 21 February 2014. The QAA report was considered by the Education and Registration Standards Committee at its meeting of 25 June 2014, where it recommended the renewal of recognition from 15 December 2014 until 14 December 2019 subject to one specific condition to develop a strategy for staff development and training. The recognition would also be subject to the general conditions that apply to all osteopathic educational institutions.
45. In discussion the following comment was made and responded to:
- Members asked if there was a clear financial strategy in place for Swansea University and whether anyone had asked if it is likely to close the course like the other universities in the sector had. The Professional Standards Manager responded that all osteopathic education institutions (OEIs) are monitored and financial reporting is included in their Annual Reports. The Chief Executive responded that the matter of sufficient finances was a separate issue and that the closure of courses involved more complex issues such as whether the course fitted into the university strategy. He added that although there are some difficulties concerning OEIs in the current financial climate he is very optimistic about the future of the Swansea University course.

Council agreed the recommendation of the Education and Registration Standards Committee to renew the recognition of the qualification Master of Osteopathy awarded by Swansea University from 15 December 2014 until 14 December 2019 subject to the conditions outlined in paragraph 8 of the paper.

46. This meeting would be the last with the General Osteopathic Council for Marcus Dye in his role as Professional Standards Manager. The Chair on behalf of Council commended Marcus for his work and dedication during his 13 years of service and wished him success for the future.

Item 14: Quality Assurance Procurement

47. The Chief Executive introduced the item which asked for Council's consideration of a revised approach and timetable for the education quality assurance contract procurement.

48. The Chief Executive added that external assistance had been acquired to advise on the EU procurement process and this had led to the revised timetable. As this did not accord with Council's meeting timetable, it would be helpful to have the Education and Registration Standards Committee's involvement to maintain oversight.

49. In discussion the following points were made and responded to.

Members enquired if an in-house cost analysis had been completed for the project. The Chief Executive responded that a paper exploring the proposals had been completed during 2012 and a greater level of credibility was provided by using external quality assurance.

Council agreed the delegation of the oversight of the quality assurance contract procurement to the Education and Registration Standards Committee.

Item 15: Equality and Diversity Annual Report 2013-14 and Action Plan 2014-15

50. The Chief Executive introduced the item which reported on the work done by the GOsC in connection with its equality and diversity policy in the year 2013-14 and the proposals for the action plan 2014-15. The Chief Executive added that the GOsC was in its third year of the policy and was aware that it now required a review and some revision.

51. Jenny White declared a possible conflict of interest in relation to Agnes Fletcher, the independent Equality and Diversity consultant commissioned by the GOsC, who she is acquainted with.

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

- a. Members welcomed the assurance given by the Chief Executive that the policy would be reviewed and revised. It was suggested that areas for particular focus should be those relating to appointments and vulnerable witnesses.
- b. Members raised the issue of disability and the requirement to make osteopathic clinic premises accessible. The Chief Executive responded that it was an issue for registrants' to ensure compliance with the Equality Act and not an area of responsibility for the GOsC. It was also not a direct requirement of the *Osteopathic Practice Standards*. It was observed that many registrants will offer home visits to those individuals who might otherwise experience difficulties visiting a clinic for any number of reasons.
- c. In reviewing the statistics relating to non-executive appointments members reflected on those relating to the BME and disability

declarations, and also the recruitment of younger non-executives suggesting that there should be a more rigorous breakdown of the analysis. The Chief Executive responded that in a further breakdown there were no applicants under 35 and this might be due to time commitment issues. The difficulties in recruiting BME applicants were harder to define but it was suggested that the issues were wider than remuneration.

- d. Members requested if a comparison against the population for the statistics could be included in future analyses.
- e. The Chair advised that suggestions/comments on the draft Equality and Diversity action plan should be submitted to the Chief Executive. The Chair also asked that the revised plan should be presented to Council in spring 2015.

Council noted the Equality and Diversity Annual Report 2013-14.

Council agreed the draft Action Plan for 2014-15.

Item 16: PSA Performance Review 2014

- 53. The Chief Executive introduced the item which notes the findings of the Professional Standards Authority for Health and Social Care (PSA) 2014 Performance Review, summarises the best practice identified in the report and how the GOsC might approach any new issues identified from the review.
- 54. The Chief Executive added that the report for the GOsC was positive and that all standards set by the PSA had been met.
- 55. In discussion the following points were made and responded to:
 - a. Members asked whether there was anything gained from the PSA review; did it provide or work as a source of learning from other regulators? The Chief Executive responded there was no formal mechanism for learning from the review but there were already a number of regulatory groups and forums for learning and sharing best practice, along with a number of bi-lateral contacts.
 - b. The Chief Executive commented that it was disappointing that the PSA was not focusing more of its efforts on best practice despite this being a fundamental part of its remit.

The Chair thanked the Chief Executive and his team for their work on a successful review. The Chief Executive added that it was the work of team in putting together the evidence that lead to the favourable outcome for the year's review.

Council noted the content of the PSA Performance Review Report.

Item 17: Continuing Fitness to Practise

56. The Chief Executive introduced the item which gave an update to Council on the progress of the draft continuing fitness to practise framework and next steps.
57. Council was invited to note the report and also take the opportunity to shape further development ahead of consultation. The Chief Executive advised members that the completed draft for consultation would be presented at the next meeting in November 2014. He also highlighted the following:
 - a. The success of the pathfinder groups and the very useful and insightful information coming from their meetings as the participants were practitioners.
 - b. The annexes at A: Continuing Professional Development Guidelines, and B: Peer Discussion Review Guidelines, were works in progress but they gave an indication on the progress of the project. Members were advised that any comments on the drafts should be sent to Fiona Browne, Head of Professional Standards.
 - c. Other organisations such as the PSA were also looking with interest at the work being undertaken by the GOsC.

The Chair on behalf of Council commended the Chief Executive and his team with the work to date on the Continuing Fitness to Practise Guidelines.

58. In discussion the following points were made and responded to.
 - a. Members commented that the pathfinder model was very good and both it was encouraging and helpful to have osteopaths leading the process. Members also welcomed the use of plain English in writing the drafts.
 - b. Members suggested that to avoid confusion with the variations of the 'continuing fitness to practise' title one name should be agreed. Members also requested clarification on the 3-year cycle at paragraph 7. It was pointed out that if there was to be a 3-year review cycle it could not all take place at the same time and would need to be staggered. The Chief Executive agreed that a solution was required but the GOsC were not yet at a stage where operational issues were being addressed.
 - c. Members expressed concerns over the proposal of payment for a peer review as described in Annex B – Peer Review Discussion Form Guidance. Members believed this could lead to difficulties. The Chief Executive advised that the payment issue had been flagged in the pathfinder discussions but he was against ruling it out prior to consultation.

- d. Members asked if the GOsC was doing enough to capture those registrants who had been out of practice. The Chief Executive advised that exceptions were already made for registrants who were not in practice in relation to CPD and the process would need to be extended in any new approach.

The Chief Executive advised members a report on Continuing Fitness to Practise would be brought to the next meeting in November.

Council noted the development of the draft continuing fitness to practise model.

Item 18: Committee Annual Reports 2013-14

59. The Chief Executive introduced the item which combined the Annual Reports of the Audit, Education and Registration Standards, Osteopathic Practice, and Remuneration and Appointments Committees.

Audit Committee (AC)

60. The Chair of the Audit Committee thanked the Chair and the Chief Executive for the invitation to comment on the AC Annual Report and highlighted the following:
 - a. Reappointment and evaluation of the auditors, Grant Thornton LLP: members were advised there had been discussion with the auditors on their reappointment and ensuring that they bring added value to their support of the GOsC.
 - b. Risk Register: the AC Chair was pleased to see there had been constructive discussion and comment by Council on the revised Risk Register and hoped the process of engagement would continue. She added that oversight and management of risk was not just an issue for the Audit Committee.

The Chair thanked the AC Chair and members for their work to date. It was noted that this meeting of Council would be the last at which Jane Hern would be in attendance. On behalf of Council the Chair thanked Jane for her work and contribution to Audit Committee and the GOsC.

Education and Registration Standards Committee (ERSC)

61. In his comments the Chair of the ERSC cited one of the main issues for the Committee and osteopathic profession as being the financial difficulties facing the osteopathic educational institutions and the closure of programmes. He commented that the question for the ERSC and the GOsC was what could be done to address potential problems now and in the future.

Osteopathic Practice Committee (OPC)

62. The Chair of the OPC commented that the transition from the Fitness to Practise Policy Committee to the Osteopathic Practice Committee had gone well and thanked the committee's support staff for all their work and assistance.

Remuneration and Appointments Committee (RaAC)

63. The Chair of the RaAC also commented on the Committee's transition from the former Remuneration Committee and a year which had also been very busy. Scrutiny by the PSA had led to the implementation of a more rigorous appointments process but there is still much to be done. She thanked the support team, the Chief Executive and the external member of the Committee, Ian Muir.

Council noted the Committee Annual Reports.

Item 19: Welsh Language Scheme

64. The Web Manager explained that under the Welsh Language Act 1993 the GOsC is required to publish an Annual Report on the implementation and progress of its Welsh Language Scheme. The paper provided the GOsC's third annual report and explained forthcoming changes to the Welsh Language Commissioner's system of monitoring provision for Welsh Language Speakers.
65. The Chair thanked the Web Manager for her report and explanation of the new standard.

Council noted the Welsh Language Scheme Annual Report 2013-14 and the forthcoming changes to the system of monitoring provision for Welsh language speakers.

Minutes for Noting

Item 20: Education and Registration Standards Committee (ERSC) – 25 June 2014

66. The Chair of the ERSC commented on the work of the Professional Standards team and their proficiency in supporting the ERSC, their drive to ensure high standards are maintained in reporting on the osteopathic education institutions and in presenting reports to the committee.

Council noted the minutes of the Education and Registration Standards Committee.

Item 21: Osteopathic Practice Committee (OPC) – 25 June 2014

67. Members commented on the note referring to the Advertising Standards Authority (ASA) at paragraph 31, page 6, advising caution in working with the ASA as it is a private organisation and not regulated. The Chief Executive responded that though the ASA might be unpopular it is the legitimate authority in the UK for implementing EU advertising law.
68. It was suggested a communication might be circulated to registrants reminding them of their obligations in relating to advertising and the action which can be taken by the ASA. The Chief Executive responded that clear guidance is available and contained in the *Osteopathic Practice Standards*.

Item 22: Minutes of the Audit Committee (AC) – 1 July 2014

69. The minutes of the Audit Committee were noted.

Item 23: Minutes of the Remuneration and Appointments Committee (RaAC) – 1 July 2014

70. The minutes of the Remuneration and Appointments Committee were noted.

Any other business

71. Accounts – advertising income: Members asked whether there was a clear policy on advertising. The Head of Policy and Communication responded there are guidelines which state what can be accepted and also that advertising content is always reviewed before publication.
72. It was agreed it would be helpful for a review to take place to look at the issue of advertising income.

Date of next meeting

73. Date of the next meeting: Thursday 6 November 2014 at 10.00.