



Meeting of Council

Minutes of the 113th Meeting of Council (Public), an in-person and online meeting, Thursday 25 November 2021 at Osteopathy House, 176 Tower Bridge Road, London SE1 3LU and via the meeting platform Go-to-Meeting.

Unconfirmed

Chair: Dr Bill Gunnyeon

Present: Daniel Bailey
Sarah Botterill
Professor Deborah Bowman
Elizabeth Elander
Caroline Guy
Simeon London (from 10.30)
Dr Joan Martin
Dr Denis Shaughnessy
Deborah Smith

Presenting: Steven Bettles, Policy Manager, Professional Standards (Item 13)
Fiona Browne, Director, Education, Standards and Development
David Bryan, Regulation Manager (Item 6)
Dr Stacey Clift, Senior Policy and Research Officer (Items 15 and 16)
Kabir Kareem, Quality Assurance Liaison Officer (Item 14)
Sheleen McCormack, Director of Fitness to Practise
Liz Niman, Head of Communications and Engagement
Matthew Redford, Chief Executive and Registrar
Maxine Supersaud, Head of Resources and Assurance (Items 6, 11, 12)

**External
Participants**

Dr Dawn Carnes, Director, National Council for Osteopathic Research (to November 2021) (Item 10)
Dr Jerry Draper-Rodi, Director, National Council for Osteopathic Research (from November 2021) (Item 10)
Andrew Harvey, Chair, Health Committee and Professional Conduct Committee (Item 9)
Simon McGeachie, Fairstone Asset Management (Item 11)
Steven Oliver, Brewer Dolphin (Item 11)
Brian Wroe, Chair, Investigating Committee (9)

In attendance: Marcia Scott, Council and Executive Support Officer

Rachel Heatley, Senior Policy and Research Officer

Observer/s: Maurice Cheng, Chief Executive, Institute of Osteopathy (iO)
 Alan Clamp, Chief Executive, Professional Standards Authority (PSA)
 Kathryn McDonald, Registrant
 Rebecca Moore, Scrutiny Officer, Professional Standards Authority (PSA)
 Giulia Quintarelli, Registrant

Item 1: Welcome and apologies

1. The Chair welcomed all to the first blended meeting of Council. Special welcomes were extended to the participants and the Registrant observers.
2. There were no apologies.

Item 2: Questions from Observers

3. There were no questions from observers.

Item 3: Minutes: 29 July 2021

4. The minutes of the 112th meeting, July 2021, were agreed as a correct record.

Item 4: Matters arising

5. Registration Fee Amendment Order: The Chief Executive informed members that a response had been received from the Department of Health and Social Care (DHSC) which included a number of questions that were currently under consideration.
6. Professional Standards Authority (PSA) Performance Review – GOsC: It was noted that the PSA would be publishing the finalised GOsC Performance Review Report on Monday, 29 November 2021.

Noted: Council noted the matters arising.

Item 5: Chair's Report

7. The Chair gave an update of activities undertaken since the meeting of July 2021. The following were highlighted:
 - a. Appointments and reappointments: the programme of recruitment is continuing with the shortlisting and interview dates scheduled for all Council and Committee positions:
 - Council Member (Lay) (NI)
 - Audit Committee member (Independent)
 - Council Associates
 - Lay member of the Professional Conduct Committee

- Registrant member of the Investigating Committee
- b. Council was informed that the number of applicants for the lay Council Member (NI) role had not been high. A number of routes had been taken to widen the reach in advertising the role, but it was acknowledged that response rates for this position are historically low. It was confirmed that interviews for the Council Member position would be taking place in mid-December.
- c. The Chair attended meetings with the following:
 - KPMG (with the Chief Executive) concerning Regulatory Reform and the independent review on the structure of healthcare regulation.
 - Ian Fraser, Chair of COEI
 - Mary Chapman, Chair of the GCC
 - The QC acting for GOsC in the case of GOsC v Wray.

Appointments and reappointments

8. The Chair introduced the item which, following the internal appointment processes, recommended the appointments of Nora Nanayakkara as the new Chair of the Health Committee and Melissa D'Mello as a new Panel Chair of the Professional Conduct Committee.

Pamela Ormerod, Professional Conduct Committee lay member, was recommended for reappointment following a process overseen by the Remuneration and Appointments Committee.

9. Council had no further comments relating to the recommendation for the appointments of the Health Committee Chair, the PCC Panel Chair and the reappointment of Pamela Ormerod for a further four-years as a member of the PCC.

Noted: Council noted the Chair's Report.

Council agreed the following:

- a. **To appoint Nora Nanayakkara as the Chair of the Health Committee from 1 December 2021 until 31 March 2025.**
- b. **To appoint Melissa D'Mello as a Panel Chair of the Professional Conduct Committee from 1 December 2021 until 31 March 2025.**
- c. **To reappoint Pamela Ormerod as a lay member of the Professional Conduct Committee from 1 April 2022 to 31 March 2026.**

Item 6: Chief Executive's Report

10. The Chief Executive introduced the item which gave a review of activities and performance since the last meeting, July 2021, and not reported elsewhere on the agenda.
11. The key messages and following points were highlighted:
 - a. The PSA performance review report for 2020-21 has been finalised and will be published on 29 November 2021.
 - b. Rachel Heatley, Senior Policy and Research Officer, was keynote speaker at the PSA Symposium, Bridging the Gap, where she spoke about the GOsC's work with patients. The session was co-presented with patient representative, Sandra Frost. The Chair informed Council that he also attended the symposium and commended Rachel and Sandra for their presentation.
 - c. The Executive are continuing to engage with the regulatory reform agenda and the KPMG review of the number of regulators.
 - d. The Executive have continued to try to progress the work with the devolved nations. Since the previous meeting of Council, there have been meetings with the Scottish Complementary and Alternative Medicines Services Team and also Tony Rednall from the Nursing Directorate who are responsible for the Allied Health Professions in Scotland.
 - e. The Executive have continued to ensure Equality, Diversity and Inclusion is embedded within its work.
12. Business Plan: The Chief Executive reported on progress against the business plan to 31 October 2021 highlighting the following
 - a. The majority of activities are on track with just three activities slightly delayed due to resourcing challenges within staff teams. These activities have revised timelines.
 - b. One activity has been postponed relating to a proposed tender for external audit services. Following discussion with the Audit Committee it was agreed to postpone the tender because an opportunity has been identified to participate in a group tender with fellow healthcare regulators during 2022 which may yield greater benefits for the GOsC. Further details will be presented to Council at the meeting in February 2022.
 - c. It was confirmed that if the proposed group tender did not proceed as expected the GOsC would conduct its own tender in 2022.
13. The Chair on behalf Council thanked the Executive and staff for their work and what has been achieved under what continues to be highly challenging circumstances.

14. Finance Report: The Head of Resources and Assurance reported on the financial position for six-months to 30 September 2021 highlighting the following:

Key messages from the report:

- a. Income is higher than expected as the hesitancy that presented itself during the uncertain and volatile financial period of the pandemic is showing signs of recovery.
- b. Expenditure levels are significantly below budget for the six months to 30 September 2021. The reason for the underspend is predominately the extended hybrid working that is becoming embedded in GOsC culture.
- c. The Balance Sheet is in a strong position, meaning that future challenges can be faced from a position of financial health.

15. The following points were made and responded to:

- a. It was explained that the forecast for the end of year budget was difficult to predict but would be dependent on either a return to normalised working, hybrid working or the continuation of working from home, but all contingencies had been budgeted and planned for.
- b. It was confirmed that considerable savings had been made from holding online meetings and fitness to practise hearings. Looking ahead it was expected that in-house hearings and meetings would increase but at this point in time it was be difficult to forecast any trends.
- c. GOsC v Wray: It was confirmed that provisions had been made for the eventuality of cost being incurred as a result of the Wray appeal.
- d. It was agreed that an update on Registration administration costs would be provided at the February 2022 meeting.

Noted: Council noted the Chief Executive's Report.

Item 7: Registration Report: April 2021 – October 2021

16. The Chief Executive introduced the item which provided an update on registration activity covering the six-month period from 1 April 2021 to 30 September 2021.

17. The key messages and following points were highlighted:

- a. At the end of September 2021 there were 5,500 osteopaths on the Register.

- b. At the end of September 2021, the number of non-practising registrants stood at 182, which was down on a peak of 330 during the height of the pandemic.
- c. Ten return to practise assessments were completed in the reporting period. Six registration assessments, connected to internationally qualified applicants, were completed.
- d. We plan to undertake a more detailed analysis of registration data in 2022 in order to inform our longer-term planning.

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

- a. There had been no significant decline in the number of overseas applicants to register. The decision to pass the cost of the process back to the applicant in 2016/17 did not affect application numbers. It was recognised that the registration assessment process could be streamlined and consideration is being given to how this might happen.
- b. It was suggested that comparative data could be included as part of the next Registration Report. It was agreed that this might also be an opportunity to refresh the structure of the Registration report.

Noted: Council noted the Registration Report.

Item 8: Fitness to Practise Report

19. The Director of Fitness to Practise introduced the quarterly update to Council on the work of the Regulation department and the GOsC's Fitness to Practise committees.

20. The key messages and following points were highlighted:

- a. Meetings and hearings continue to be listed and held through the use of remote hearings and blended hearings, ensuring the safety and wellbeing of all participants.
- b. KPI's have been met or exceeded at all three stages of the FTP process.
- c. An external audit of fitness to practise Interim Order decisions made by the Investigating Committee and Professional Conduct Committee was undertaken in August and September 2021. No concerns regarding patient safety were identified within the report.
- d. In parallel with the external audit, an internal audit took place to review all the current GOsC caseload to ensure that risk assessments are clearly documented both at receipt and throughout the lifecycle of an investigation, (including at the point after a case is referred by the IC). A number of action points have been flagged and will be included in the Business Plan for 2022-23.

- e. The Chair of the IC provided feedback on the IC training day which took place on 24 November, commenting that the training had been successful and well received. The topics covered in discussion included updates on unconscious bias, case law, issues as outlined in the ftp audit.
 - f. On 23 September 2021, the third in the series of live Fitness to Practise webinars was hosted with over 100 attendees joining the event.
 - g. On 2 September 2021, the first in a new series of 'Insights on Fitness to Practise' ebuletins were emailed osteopaths and stakeholders.
21. Dataset: The Regulation Manager presented the statistical report. One correction was made:
- a. Protection of Title: the following sentence was corrected on page 8 of the report to read:
 - *There were 34 active Section 32 investigations at 30 September 2021.*
22. In discussion the following points were made and responded to:
- a. Wray Appeal: Members were informed that the outcome of the appeal hearing had not yet been handed down. At this point in time, it is not possible to anticipate the outcome and to do so would be speculation. It is hoped that there will be a decision prior to Christmas.
 - b. Nature of Complaints: Members were advised that complaints concerning issues relating to the pandemic and COVID-19 had reduced over the last quarter.
 - c. Section 32 cases: Members were assured that although the data showed an increase in the number of active Section 32 cases these were being progressed and concluded as quickly as possible. Members were advised there is some comparative data contained within the dataset including the number of 'cease and desist' letters which have been sent. It was added that there are processes in place that in the event where it is apparent an individual, after leaving the register, continues to use the title 'Osteopath' in breach of Section 32. This will be reported to the Regulation Department to follow through with the appropriate action.
 - d. Incoming telephone calls: Members were informed that calls are monitored and there had been no apparent increase or decrease in the number of calls received but any concerns raised by Council could be explored.
 - e. Members acknowledged the work of the Regulation team and the openness and transparency throughout the reporting allowing the opportunity for Council to better engage with the ftp process. It was also acknowledged that

following Council's decision to adjust the timescales on the KPIs though ambitious at the time the challenge had been met and had a positive outcome of the team's work.

Noted: Council noted the Fitness to Practise Report.

Item 9: Fitness to Practise Annual Reports 2020-21

23. Each Committee is required to report annually on its work to Council. The reports of the Fitness to Practise Committees cover the period 1 October 2020 to 30 September 2021.

Investigating Committee (IC)

24. The Chair of the Investigating Committee introduced his report. The following points were highlighted:

- a. The IC Chair asked that a correction should be made at page 2 paragraph 5, of the IC the Annual Report to read:
 - *In addition, the IC has sat on **6** occasions to consider applications by the Council for the imposition of Interim Suspension Orders on registrants (**2019/20, 4 occasions; 2018/19, 2 occasions**).*
- b. There were seven meetings of the Committee during the reporting period. This is reduction in comparison to previous years.
- c. There were 25 complaints considered by the Committee in the reporting period of which the highest number were transgression of sexual boundaries and remains a concern albeit that the number remains the same as in the previous reporting period and slightly down on the year 2019-20.
- d. The Committee considered whether to impose Interim Suspension Order (ISO) in 6 cases. Of these it imposed 2 orders, accepted 1 undertaking, and made no order in the other three cases.
- e. The IC Training Day took place on 24 November with a focus on unconscious bias, case law, and the audit on interim suspension orders. The day was well received and of significant benefit to Committee members.
- f. Council should be assured that the IC maintains its independence in processes and procedures
- g. The Regulation team were commended for their support, and their work in what have been, and continue to be, challenging circumstances.

25. The following points were made and responded to:

- a. It was confirmed that the number of insurance cases had markedly reduced. The success in the reduction in these cases might be due to a number of contributing factors including cross-departmental learning, improved and consistent communications and the publication of the Insurance Guidance Note.
- b. It was confirmed that an Interim Suspension Order can be imposed only once in relation to allegations considered by the IC and can be enforced for a period of two-months.

26. The Chair on behalf of Council thanked the IC Chair and his colleagues for all their work over the past year.

Professional Conduct Committee (PCC) and Health Committee (HC)

27. The Chair of Professional Conduct Committee and the Health Committee introduced his reports. The following points were highlighted:

Professional Conduct Committee

- a. This was the first report of the Chair who was appointed to the role on 1 April 2021, and follows on from his predecessor, Richard Davies, whose terms on the Committee ended on 31 March 2021. Andrew Harvey thanked and paid tribute to Richard Davies for his support in making the transition.
- b. Appropriate arrangements for remote hearings are well established, and in consistent and effective use. The arrangements at GOsC compare favourably with those in place at other regulators but there are the inevitable 'technical problems' from time to time which, although can be the cause of delay, there is no detrimental impact on the fairness or efficiency of hearings.
- c. Caselines has performed well in providing reliable access to documents in a digital format and, when used effectively by counsel, is a helpful tool. Caselines is particularly helpful for registrants and witnesses, especially those who are vulnerable, who need to be directed to evidence and for whom appearance in a tribunal setting may be a worrying and/or unfamiliar experience.
- d. The Committee is looking forward to hearings and meetings being conducted in-person. Looking ahead it is realised that how meetings are conducted, by remote means or in-person, will be a challenge. It will be important to maintain a dialogue between the Regulation team, the Committee, and parties, on what will be the appropriate approach for particular cases.
- e. The PCC is in a period of stability in terms of its membership but in the next 18-months to two-years, the terms of office will end for twelve members of the Committee. To ensure the appropriate continuity and to minimise any risk to the effectiveness of the PCC early discussions with the Chair and the Executive on succession planning have taken place and will continue.

- f. The Chair expressed his thanks to the Chair of Council, the members of the PCC, the Executive, and staff team for their support in not only taking up a new role but also with the challenges presented by remote working.

28. The following points were made and responded to:

- a. Council commended the work undertaken to establish good communications and to ensure that members of the Committee remain consistently engaged with the training programme and the hearings process to maintain skills, competencies, and knowledge. It was noted that the number of sittings by individual members are being monitored in order to ensure fair and sufficient sittings and to ensure competencies are maintained.
- b. To ensure that all FtP Committee members undertake mandatory training Council was informed that members unable to attend training/development days would have opportunity to access and watch recordings of the sessions. Developments were also underway to make the recordings a more permanent resource for members through the GOsC website.

Heath Committee

- 29. Council was reminded that the members of the Professional Conduct Committee also formed the pool for the members of the Health Committee.
- 30. The appointment of the interim Health Committee Chair was agreed by Council at its meeting, July 2021.
- 31. The interim Chair of the Health Committee thanked and paid tribute to his predecessor, Philip Geering, whose term ended 31 March 2021.
- 32. There had only been one case heard by the Health Committee during the reporting period and therefore no conclusions or observations could be drawn from the report for the period.
- 33. In discussion it was explained that the PCC while considering a matter can refer the case to the HC. Based on its findings the HC will make a determination and then refer the case back to the PCC for further consideration and decision. The HC can also request a health assessment which requires a Medical Assessor to be in attendance. Additionally, where the IC refers a matter to the PCC it does not mean that health is no longer a component of the case.
- 34. The Chair of Council on behalf of members thanked Andrew as the PCC and interim HC Chair for his reports, his work, and the work of the Committees.

Noted: Council noted the Fitness to Practise Committee's Annual Reports.

Item 10: National Council for Osteopathic Research: Concerns and Complaints Report 2020

35. The Director of Education, Standards and Development introduced the item which concerned the National Council of Osteopathic Research (NCOR) Concerns and Complaints Report 2013-2020 presented to Council prior to its publication.

36. The key messages and following points were highlighted:

- a. Every year the National Council for Osteopathic Research (NCOR) produce a report on the type of concerns and complaints made against osteopaths and osteopathic services. The report for 2013-2020 is annexed to this paper.
- b. The updated data collection took place during January to December 2020, and therefore there are some features attributed potentially to the coronavirus pandemic lockdown. Key findings include:
 - Reduced number of concerns overall
 - Reduced proportion of concerns relating to communication
 - Increased concerns related to covid 19 issues
 - Ongoing concerns around sexual impropriety
 - Professionalism is the dominant theme in relation to concerns.

37. The outgoing Director of NCOR, Dr Dawn Carnes, made the following comments:

- a. This was the eighth year of the analysis and a picture is now being built of developments in concerns and complaints overtime. The pandemic has had an impact but has highlighted some of the recurrent themes and also issues due to the pandemic.
- b. The ways in which the data was different in 2020 were:
 - Due to the pandemic many clinics were closed and therefore fewer complaints were reported than in previous years.
 - The impact COVID has had on complaints and bringing the profession into disrepute.
- c. Osteopaths aged over 40 and male are still the most likely to have complaints made against them.
- d. Complaints relating to sexual impropriety though low still remain and the continuing work the GOsC is doing in this area as a result of the research is welcomed.

- e. It should be noted that the data shows that complaints are orientated towards older members of the osteopathic profession and it will be of interest to monitor whether there is a reduction of complaints and concerns as older members retire from the register.
- f. As a result of the information contained in the report areas for continuing activity are:
 - Boundaries
 - Sexual impropriety
 - Social media and Osteopathic Practise Standards; professionalism and presence on social media; osteopaths and their role in public health in relation to vaccinations, false and misleading information about COVID-19, and disease/infection control.

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

- a. It was confirmed that a summary video of the NCOR report could be made as a supporting resource.
- b. It was confirmed that in the work currently being conducted on Boundaries, context setting is an important part of the research. The current project is an updating of the thematic boundaries review and is being completed through discussion with stakeholders to acquire a sense of the current thinking.

39. The Chair on behalf of Council thanked Dawn for all her work and leadership during her time as Director of NCOR and hoped that moving forward she will continue her relationship with the Council. Dr Jerry Draper-Rodi was welcomed as the new Director and the Chair, Council and the Executive looked forward to working with him and continuing to support the work of NCOR.

Noted: Council considered and noted the implications of the NCOR concerns and complaints report 2013-2020.

Agreed: Council agreed to publish the NCOR Concerns and Complaints Report 2013-2020.

Item 11: Investment Portfolio: Environmental, Social Governance

- 40. The Head of Resources and Assurance introduced the item which concerned the existing GOsC investment framework which requires transparency around environmental and social governance (ESG). The paper starts to provide that transparency and commits to reporting annually to Council on the ESG performance.
- 41. There is still significant cash holding within the portfolio and it was suggested at the July 2021 meeting that a decision would be required from Council as to

whether it should be invested or returned to be deposited into the GOsC account.

42. The key messages and following points were highlighted:

- a. ESG already forms part of the investment decisions made by Brewin Dolphin; however, we have not previously made that explicit to Council.
- b. We will be providing more transparency on our investments by monitoring the ESG scoring, which we will report to Council on an annual basis, as part of the investment update paper.
- c. Our existing portfolio is performing very well in terms of those funds which have been scored as part of ESG.
- d. The reinvestment of the cash held in the portfolio is recommended, as much of the uncertainty around the financial position during the pandemic has eased.

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

- a. It was confirmed that there is an annual review of risk appetite relating to investments. It was explained that as part of an annual review process Fairstone and Brewin Dolphin will seek assurances about any changes in the way Council operates that might impact on investments. This will feed into the report which will be presented to Council at its July meeting.

- a. Agreed: Council agreed to continue to focus on a responsible investment approach, which will include the monitoring, reviewing, and annual reporting to Council on the ESG Portfolio Sustainability Score ratings.**
- b. Agreed: Council agreed to reinvest the cash holding within the investment portfolio.**

Item 12: Budget Strategy 2022-23

44. The Head of Resources and Assurance introduced the paper which looked at the overall financial envelope for financial year 2022-23 and set some parameters around forecast expenditure levels and registration fee income projections to inform the business plan and budget cycle.

45. The key messages and following points were highlighted:

- a. There are set core principles on which the budget forecasts are developed, and which help guide us through an ever-changing uncertain environment.
- b. Assuming all business activities continue, our budgeted expenditure for FY2022-23 is expected to be similar to the previous financial year.

- c. Our forecast total income should be sufficient to cover our expenditure.
- d. It is proposed that registration fee levels are held constant. This would be for the eighth year in succession and would help the profession with the challenge of rising cost of living expenditure.
- e. Holding registration fees constant for the previous seven years has meant GOsC has absorbed +£250k of lost income; this represents our ongoing commitment to cost efficiency and effectiveness.
- f. It is important to recognise the pressures and challenges of the current economic situation across all sectors and the impact in particular on osteopaths who are self-employed. It is right that this is recognised and that Registration fees should remain at the current level and this cost absorbed.

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

- a. It was acknowledged that although the recommendation to Council is to freeze registrant fees there would be, at point in the future, a need to increase fees and registrants needed be prepared for this. If Council agreed the recommendation to hold fees at the current level then, so as to manage future expectations, the communication to the profession should reflect this.
- b. It was explained that the GOsC has no provision for a registrants' hardship-fund and that this was a matter for the professional membership association, the Institute of Osteopathy.
- c. In considering the reasons for the non-payment of fees there is not always the level of engagement with individuals who are removed from the register and therefore it is difficult to determine any underlying reasons.
- d. It was considered that a key area of volatility which carried the risk of requiring a significant increase in fees would be a significant increase in concerns and complaints. The current position is that the GOsC has a strong balance sheet position, good cash reserves, and good investment portfolio which provides a buffer should the need arise.

In response to the comments on staff retention, recognition and reward it was explained that the Remuneration and Appointments Committee (RaAC) are currently overseeing a job evaluation process to benchmark the GOsC against the current employment market.

- e. The Chief Executive thanked members for their input and suggested that once the communication for the profession has been drafted it might be shared with the Registrant members of Council in advance of publication.

47. In noting the discussion and recommendations the Chair added the following caveats relating to the agreement to hold registration fee at its current level:

- a. To look ahead and consider what increases might be required and how to prepare registrants for this possibility.
- b. To carefully consider the communications to be made to the profession about the registration fees being held at their current level.

Noted: Council considered and noted the overall financial envelope for financial year 2022-23.

Agreed: Council agreed to hold the registration fees at their current level for the forthcoming year.

Item 13: Adjunctive Therapy Guidance – Consultation

- 48. The Professional Standards Policy Manager introduced the item which concerned the protecting patients and supporting other stakeholders in understanding the application of the Osteopathic Practice Standards (OPS) in relation to the breadth of practice undertaken by osteopaths.
- 49. The key messages and following points were highlighted:
 - a. This paper outlined the development of draft guidance to support osteopaths engaged in adjunctive or complementary therapies in relation to the Osteopathic Practice Standards.
 - b. The guidance uses fictional case examples to explore the issues that arise for osteopaths and patients when applying the Osteopathic Practice Standards in different contexts.
 - c. This matter was carefully considered by the Policy and Education Committee at its October 2021 meeting.
- 50. In discussion the following points were made and responded to:
 - a. Council congratulated the team on their work commenting the guidance would be especially welcome by the Fitness to Practise Committees.

Agreed: Council agreed to proceed to formal consultation on the 'guidance on the application of the Osteopathic Practice Standards in relation to the application of adjunctive therapies, non-osteopathic treatments or other work undertaken by osteopaths', in accordance with the strategy outlined.

Noted: Council noted the Equality Impact Assessment.

Item 14: College of Osteopaths Recognised Qualification (RQ)

- 51. Elizabeth Elander declared an interest and did not participate in the discussion of the item nor the decision to amend item.

52. The Quality Assurance Liaison Officer (QALO) introduced the item concerning the College of Osteopaths which is seeking renewal of its current Recognised Qualification (RQ) for the Bachelor of Osteopathy (B.Ost part-time) and Masters of Osteopathy (M.Ost part-time) award by Staffordshire University and Bachelor of Osteopathy (B.Ost part-time) awarded by University of Derby.
53. The key messages and following points were highlighted:
- a. The RQ Visit to the College of Osteopaths took place in May 2021. A report was produced and sent to the College who offered no observations. This was presented to the Policy and Education Committee (PEC) in October 2021.
 - b. Due to the short timescales set out in their recommended conditions, the College had provided evidence to demonstrate progress or fulfilment of the conditions recommended by the Visitors.
 - c. The report was positive and was the first conducted by the new quality assurance provider Mott McDonald and undertaken by remote means.
 - d. The Committee considered the evidence and concluded that no conditions should be placed on the RQ. The Committee's Chair added that each condition had been carefully considered and that there were no concerns regarding the recommendation.
 - e. The Committee recommend to Council the approval of the RQ with no expiry date.
54. Council had no further comments concerning the recommendation to renew the RQ for the College of Osteopaths.

Agreed: Council agreed to renew the recognition of the Bachelor of Osteopathy (B.Ost part-time) and Masters of Osteopathy (M.Ost part-time) awarded by Staffordshire University and Bachelor of Osteopathy (B.Ost part-time) awarded by University of Derby, from 1 May 2022 with no expiry date, and to seek approval of the recognition from the Privy Council.

Postscript and note on the correction to

Item 14: College of Osteopaths, renewal of recognised qualification (RQ)

55. The reference to the validating universities of the College of Osteopath awards was made within the [RQ Specification](#) to differentiate the programmes delivered by the College of Osteopaths as they teach out the programmes validated by Staffordshire University, and transition to The University of Derby as validator.
56. The context of the paper demonstrates that the College of Osteopaths is the awarding institution, but on reflection, this should have been made clear within the recommendation which Council agreed, and reference to the validating universities as awarding bodies removed.

57. To make this clear and to avoid delays in seeking Privy Council approval to the recognition Council reviewed and agreed the revised recommendation by email, 10 December 2021, as follows:

Agreed: Council agreed to renew the recognition of the Bachelor of Osteopathy (B.Ost part-time) and Masters of Osteopathy (M.Ost part-time) programmes awarded by The College of Osteopaths from 1 May 2022 with no expiry date, and to seek approval of the recognition from the Privy Council.

Item 15: Equality, Diversity and Inclusion (EDI): piloting the collection of EDI data for the osteopathic profession

58. Dr Stacey Clift, Senior Policy and Research Officer introduced introduced the item which outlines the Executive's wish to collect equality, diversity and inclusion data for the osteopathic profession. The approach to the specification and collection of equality, diversity and inclusion data is set out in the report for consideration.

59. The key messages and following points were highlighted:

- a. Due to the pervasive nature of equality, diversity and inclusion we are proposing a pilot to collect equality and diversity data about protected characteristics from registrants.
- b. The intention is to be sensitive and develop an approach which is more profession led, softer in its landing and more subtle, which will help us to understand any unintended consequences of our regulatory approaches and interventions for particular groups, which will in turn inform our future strategy.
- c. In addition, we are tying in other approaches to enhance the collation of our equality, diversity and inclusion data over time, including specifying the characteristics as part of our registration renewal process, so it hopefully becomes a more comfortable process over time.

60. The following points were made and responded to:

- a. Members welcomed the proposed changes.
- b. Members were informed that it has been suggested that the limit for the number of participants for the survey should be set at or around fifty. Registrants would be invited to participate in the survey through communications messages circulated to registrants. It was also planned that participants with key characteristics would also be invited to participate to try and ensure broad representation of the community. As part of the pilot survey respondents would also be asked if they would be willing to provide

personal details and dependent on responses this would provide attributable and non-attributable data. Non-response rates could also be considered for data capture.

- c. Members suggested the following for the questionnaire:
 - Q1 – to add an anchor on the Likert scale at no 3 for clarity – either agree/disagree
 - Q9 – so that subsequent responses are not missed a signpost be added so that respondents don't miss the second part of the question.
 - Q14 – insert an asterisk next to full and part-time to alert that there is additional information.
 - Q15 – The question on whether a respondent is willing to provide name and registration number or not requires clarity.
 - Section 8 – inclusion of questions on reasonable adjustments
- d. It was explained that there were two elements to the qualitative component. It is intended to test the survey with participation from the GOsC Equality and Diversity staff group, the GOPRE stakeholder group, and the Patients Group to identify where groups may be less well represented and where a qualitative approach might be more appropriate before launching to the profession.
- e. The point made relating to protected characteristics and subsequent actions was noted and it was agreed that the text about flexible working patterns could be adjusted.
- f. It was suggested the number of questions on the Likert scale should be an even number to provide a better range and the suggested responses provided to be more explicit.
- g. It was explained and confirmed that the terminology used in the survey including the term 'queer' was based on advice from the EDI Consultant and correct at this time.
- h. It was explained that the nationality groupings the categories are based on was the 2021 Census listings. The question of religion and the disparity between those who actively practise and those who do not was acknowledged, it was agreed this would be considered and a sub-question factored into the survey if viable.

Agreed: Council agreed the approach to piloting the collection of equality and diversity data for the osteopathic profession 2021-22.

Item 16: Continuing Professional Development: Assurance and Evaluation

61. Dr Stacey Clift, Senior Policy and Research Officer and introduced the item which concerned the provision of assurance on the implementation of the Continuing

Professional Development (CPD) scheme as the first osteopaths are due to complete their first three-year cycle in 2021.

The paper provides an update on the ongoing evaluation since May 2021, and assurance about the implementation of the current CPD scheme

62. The key messages and following points were highlighted:

- a. This paper draws on a number of sources, to provide assurance to Council about the implementation of the CPD scheme and also its impact.
- b. The scheme is being well implemented.
- c. Osteopaths are practising in accordance with the Osteopathic Practice Standards (OPS) and overall, concerns and complaints have reduced, although concerns around Theme D: Professionalism and sexual impropriety remain.
- d. Webinar activities in particular give us assurance that osteopaths are engaged in discussing CPD and practice.
- e. There are still gaps in osteopaths recording of reflections, along with some internal challenges concerning data extraction issues and the possible need to consider extra resourcing to tackle a backlog of verification and assurance checks.
- f. We are continuing to undertake activities to signpost existing resources and preparing more online videos to support osteopaths to undertake the CPD scheme successfully (particularly in areas of objective activity and PDR) and to realise the benefits of the scheme.

63. The following points were made and responded to:

- a. It was explained that there had been difficulties in extracting data from the CRM system. The issue had been identified in that an extraction file had been corrupted and is responsible for the difficulties being experienced. This does not mean the data is being lost but that the file may need to be reconstructed. Further information will be provided at the next meeting of Council.
- b. In relation to issues raised regarding verification and assurance and the necessity to maintain monitoring it was explained that the winter period is the slower period for renewals and, historically, is the period to catch-up on any delays from the busy summer period to be on track for the end of the business year. Although it is recognised that extra resources may be required to complete the verifications process, in terms of those which have taken place thus far the verifications have matched declarations made.

- c. Members commented that there is a huge amount of support activity which has been put in place for registrants completing CPD and it is not clear what more can be done to support a positive outcome and results won't be known until tested.

64. The Chair in summary highlighted the following:

- a. The CPD Scheme is one of the most complex and comprehensive areas of work introduced by the GOsC.
- b. A lot of work has been undertaken over the period of the scheme and a lot of work to support registrants.
- c. The report provides reassurance but not yet the assurance as this will come from the verification process. The issues and difficulties of extraction and verification are issues which the Executive are in the process of resolving therefore Council should receive an update at the next meeting, February 2022.

Noted: Council considered and noted the progress of the implementation of the CPD scheme.

Item 17: Professional Standards Authority Performance Review Report 2020 - 21

65. The Chief Executive introduced the item which gave an update on the PSA Performance Review Report 2020-21 for the GOsC.

66. The following points were highlighted:

- a. The PSA Performance Review of the GOsC is now completed and the embargoed report has been shared with members of Council. Once the report is formally published on Monday 29 November, it will be featured as a GOsC news item. The report will also be considered by the Audit Committee to reflect on the review year and any action points to be taken forward.
- b. Council was also informed that the PSA are considering a change to the Performance Review process and moving to a process of periodic reviews with intermediate monitoring. A meeting with the PSA to discuss the implications the proposed changes for the GOsC will place at the beginning of December 2021.

Noted: Council noted the update on the Professional Standards Authority Performance Review report 2020-21.

Item 18: Meeting of the Policy and Education Committee, 7 October 2021: Minutes (unconfirmed)

67. The Chair of the Policy and Education Committee had no additional comments regarding the draft minutes of the PEC meeting 7 October 2021.

68. Council had no questions relating to the meeting of the PEC.

Noted: Council noted the minutes of the Policy and Education Committee, 7 October 2021 (unconfirmed).

Item 19: Meeting of the Audit Committee, October 2021 (unconfirmed) and forward planning

69. The members of the Audit Committee had no additional comments regarding the draft minutes of the AC meeting June 2021.

70. Council had no questions relating to the meeting of the Audit Committee.

Noted: Council noted the minutes of the Audit Committee October 2021 (unconfirmed).

Item 20: Meeting of the Remuneration and Appointments Committee, October 2021 (unconfirmed), and forward planning

71. The Chair and members of the Remuneration and Appointments Committee had no additional comments regarding the RaAC meeting June 2021.

72. Due to unforeseen circumstances a decision could not be reached on Item 5. Non-Executive Fees and Allowances, as the Committee was inquorate. As result of this the Terms of Reference for the RaAC are to be reviewed and the consideration given as to whether the Chair of Council also Chairs the Committee.

Noted: Council noted the unconfirmed minutes of the Remuneration and Appointments Committee, October 2021 (unconfirmed).

Item 21. Any other business

73. There was no other business.

Item 22. Questions from Observers

74. Observers had no other questions.

Date of the next meeting: 9 February 2022 at 10.00