



Meeting of Council

Minutes of the meeting of Council held in public on Wednesday 16 November 2022, at Osteopathy House, 176 Tower Bridge Road, London SE1 3LU and, hosted via Go-to-Meeting video conference

Unconfirmed

Chair: Dr Bill Gunnyeon

Present: Dr Daniel Bailey
Sarah Botterill (Chair, People Committee)
Prof. Deborah Bowman (Chair, Policy and Education Committee)
Elizabeth Elander
Caroline Guy
Shireen Ismail (Council Associate)
Harriet Lambert (Council Associate)
Dr Patricia McClure
Dr Denis Shaughnessy (Chair, Audit Committee) *(online)*
Deborah Smith

Presenting: Steven Bettles, Policy Manager (Item 10) *(online)*
Fiona Browne, Director, Education, Standards and Development
David Bryan, Regulation Manager (Items 8)
Andrew Harvey, Chair, Professional Conduct Committee and Health Committee (Item 9)
Banye Kanon, Senior Quality Assurance Officer (Item 10) *(online)*
Sheleen McCormack, Director of Fitness to Practise
Matthew Redford, Chief Executive and Registrar
Maxine Supersaud, Head of Resources and Assurance
Brian Wroe, Chair, Investigating Committee (Item 9)

In Attendance: Rachel Heatley, Senior Policy Officer *(online)*
Liz Niman, Head of Communications, Engagement and Insight, *(online)*
Marcia Scott, Council and Executive Support Officer *(online)*

Observers: Collette Byrne, Scrutiny Officer, Professional Standards Authority (PSA) *(online)*
Glynis Fox, President, Institute of Osteopathy (iO) *(online)*

Item 1: Welcome and apologies

1. The Chair welcomed all to the meeting. Special welcomes were extended to:
 - Glynis Fox, President, Institute of Osteopathy
 - Brian Wroe, Chair, Investigating Committee
 - Andrew Harvey, Chair, Professional Conduct Committee
2. Apologies were received from:
 - Simeon London, Registrant Member of Council
 - Maurice Cheng, Chief Executive, Institute of Osteopathy (iO),
 - Dr Jerry Draper-Rodi, Director, National Council for Osteopathic Research (NCOR)
 - Dr Stacey Clift, GOsC Senior Policy Officer

Item 2: Questions from observers

3. There were no questions from observers.

Item 3: Minutes of the meeting 14 July 2022

4. The minutes of the 116th public meeting, 14 July 2022, were agreed as a correct record.

Item 4: Matters arising

5. The Chief Executive introduced the report asking that Council note the actions highlighted had been completed.

Noted: Council noted the matters arising from the meeting of 16 July 2022.

Item 5: Chair's Report (including appointments and reappointments)

6. The Chair introduced his report. The key messages and following were highlighted:

Chair's Report

- a. Meetings and events attended included:
 - A bilateral meeting with the Chair and the Chief Executive of the PSA.
 - Attendance at the Institute of Osteopathy Roadshow in Glasgow
 - A bilateral meeting with the Chair and the Chief Executive of the General Optical Council. Discussion included the GOC approach to Regulatory Reform which includes consultation with its registrants.

- Attendance at the Annual Scottish Regulatory Conference in Edinburgh. It was noted that the delays on regulatory reform continue but it is expected that a consultation for new regulations for the General Medical Council (GMC) will launch by December 2022 and will provide the template for the reforms for the other Health Regulators.
- Attendance at a meeting of the Health Regulator Chairs hosted by the Chair of the PSA. The focus of discussions was on the strategic challenges and regulatory reform of health regulation.

Appointments and reappointments

- b. The interviews for the next Council Associate whose term will commence from 1 April 2023 took place on 15 November. Of the seven candidates shortlisted five were interviewed, and Council will be advised on the outcome in due course.
- c. Planning for a significant round of appointments and reappointments in the business year 2023-24 have commenced for the following positions:
 - Chair of Council (lay)
 - Two lay members of Council
 - One registrant member of Council

NB: one of the Council appointments must include an individual from Wales.

- One Council Associate
- Two registrant members of the Investigating Committee
- Two lay members of the Investigating Committee (one of which is a panel chair)
- Three registrant members of the Professional Conduct Committee
- Two lay members of the Professional Conduct Committee (one of which is a panel chair)

Reappointments from 1 April 2024: Council

- d. Deborah Bowman, Daniel Bailey, and Caroline Guy left the meeting for the duration of this discussion. Council was confirmed quorate.
- e. Three members of Council are eligible to seek reappointment from 1 April 2024. Council is required to decide whether it wishes to follow an open or closed appointment process in relation to reappointment applications.
- f. The People Committee had considered the advantages of an open and closed appointment process. It concluded that it would recommend Council agrees to a closed process on the basis of ensuring Council stability at a time when there is an automatic 40% turnover of membership.

- g. The decision of Council to choose either an open or closed appointment process will be communicated to the Professional Standards Authority (PSA) as part of the Appointment/Reappointment Scrutiny Process.

Reappointments from 1 April 2024: Fitness to Practise Committees

- h. Brian Wroe left the meeting for the duration of this discussion.
- i. There are four fitness to practise panel members who are eligible for reappointment. The reappointment paper has been reviewed by the Chair of Council and the People Committee have overseen and scrutinised the recommendation coming before Council in this paper.
- j. All four fitness to practise panel members – Brian Wroe, Paul A Grant, Penny Sawell and Abby Mulholland – are recommended for reappointment for a further four-year term of office.

Appointment: Fitness to Practise – Health Committee (HC)

- k. In November 2021 a Chair of the Health Committee was appointed who has recently relinquished the role. It was proposed that Andrew Harvey, current Chair of the Professional Conduct Committee (PCC) be appointed as Chair of the Health Committee until 31 March 2024.
 - l. It was confirmed that there are no legal reasons for an individual to hold the joint roles of PCC and HC Chair but there are specific provision including that when considering a case as a panel member of the Health Committee the individual cannot then sit as a PCC panel member considering the same case.
7. Council had no further comments regarding the Chair's report, and the recommendations relation to the appointments and reappointments. Council noted and agreed the recommendations as set out.

Council noted:

- a. the activity to appoint the next Council Associate from 1 April 2023.**
- b. the planning underway for the recruitment campaigns to be held in 2023-24.**

Council agreed:

- c. the People Committee recommendation to run a closed reappointment process for those members of Council who are eligible to seek reappointment from 1 April 2024 and who choose to do so.**
- d. the reappointment from 1 April 2023 to 31 March 2027, of:**

- **Brian Wroe**
- **Paul A Grant**
- **Penny Sawell**
- **Abby Mulholland**

- e. **In addition to his role as Chair of the Professional Conduct Committee, Council agreed to appoint Andrew Harvey as Chair of the Health Committee until 31 March 2024.**

Item 6: Chief Executive and Registrar's Report

8. The Chief Executive introduced the report which set out the activities undertaken by the team since the previous Council meeting not reported elsewhere on the agenda.
9. The report headlines included:
 - a. The external financial audit tender process which was discussed by Audit Committee in October 2022 with a recommendation that Council be asked to agree that the GOsC should tender for external financial audit services in line with best practice.
 - b. The GOsC participated in the Scottish Regulatory Stakeholder Event which took place on 24 October 2022 by chairing one session with a focus on patients and participating in a panel discussion on regulatory reform. As a result of the discussion the General Medical Council (GMC) will be looking to liaise with the GOsC on its approach to patient participation.
 - c. The GOsC would be meeting with osteopaths in Northern Ireland on 19 November to engage with osteopaths in the region.
 - d. The GOsC have attended and presented at the Institute of Osteopathy regional roadshows in Wales and London.
 - e. The GOsC participated in the PSA 'Safer care for all' conference by being part of a panel discussion which considered 'Are learning cultures compatible with individual compatibility and candour?'
 - f. The GOsC collaborated in an event with the Collaborating Centre for Values Based Practice which took place on 2 November in Oxford. The focus of the event was to explore and understand values from a diverse perspective and consider the resources published might support patients and practitioners. The event was attended by regulators, osteopaths and patients and has had good feedback and outcomes for further exploration.
10. In discussion the following points were made and responded to:

- a. Audit Tender: it was confirmed that the timescale for the audit tender exercise was narrow, but all preparations have been put in place including the auditors to be approached and the supporting invitation to tender template.
 - b. The Chair noted the changes that would take effect in the Registration Team with the retirement of Brenda Buckingham, Registration Manager, and subsequent promotion of Ben Chambers who will take up the role. On behalf of Council the Chair thanked Brenda for her service to the GOsC and offered Council's best wishes on her retirement.
11. Business Plan Monitoring; reporting period to 31 October 2022: it was noted that a number of activities where there has been an extension to the timeline or have been deferred to the 2023-24 business plan have been highlighted and reasons outlined.
12. In discussion the following points were made and responded to:
- a. The Chair commented that Council had in the past commented on the Business Plan and the possible impact of it being overly ambitious. The Chair was pleased to note the recognition on what could be reasonably achieved with adjustments which had been made to timeframes.
 - b. It was agreed that to re-tender for banking services on a regular basis was good practice, but it was considered that with current resourcing and the number of other business activities underway, the banking tender exercise could be deferred to a later date.
 - c. It was explained there were no underlying concerns with the established three-stage process for international registration applications, but a review would be consider whether the process could be more efficient.
 - d. In relation to the expansion of the pool of legal assessors it was explained that this activity would be delayed but it is hoped to take this forward in the early new year.
13. Financial Report: six-months to 30 September 2022: the Head of Assurance and Resources introduced the financial report highlighting the following:
- a. Registration fees are broadly where they are expected to be having reviewed the register movements, though fractionally lower than the six-month budget prediction.
 - b. As is usual, the bulk of the work in progress is invoiced in the second half of the financial year, so the expenditure levels are below budget for the six months to 30 September 2022.

- c. The investment portfolio has been significantly impacted by the recent economic uncertainty; however, the Balance Sheet is in a strong position, meaning the future challenges can be viewed from a position of health.
- d. The economic challenges have meant that for the investment portfolio equity valuations are down c.£137k at 30 September 2022.
- e. Cash at bank is up on the year-end position, reflecting that the spend will take place in the latter part of the financial year.

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

- a. Registrant debtors: Members were advised that legislation requires that as part of the renewal of registration process registrants are required to pay an annual fee. There are processes in place to assist those registrants who may experience difficulties in paying the fee and can contact members of the Registration team who can discuss and consider direct debit options with registrants to spread the cost.
- b. Registration Administration: Members were informed that what appeared to be an anomaly in the budgeting did not sufficiently explain the disparity between expenditure and budget, and therefore the rationale is that there has been an underbudgeting for this expense which would be corrected in the budget strategy for 2023-24.
- c. Provision: The allocation related to the NMC tribunal case, the outcome of which will have implications for the health regulators, was confirmed. Whether the allocation remained as set would be dependent on the judgement and outcomes from the case. Members were advised that the NMC would be returning to court in January 2023, but at this time it was not entirely clear what the full implications for the GOsC and other regulators might be. Members would be kept informed of any significant developments.
- d. Communications and Engagement: The Executive team are aware there is an underspend in Engagement activities. It was expected this would improve with the continuing dissipation of the restrictions associated with the COVID-19 pandemic and more use of external commissioning of activities.

Agreed: Council agreed to tender for external financial audit services.

Noted: Council noted the content of the report.

Item 7: Budget Strategy: 2023-24

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

16. The key messages and following points were highlighted:

- a. The budgeted expenditure for FY2023-24 is expected to be marginally lower than the previous financial year, with the expectation that a balance is struck between cost constraints and planning activity over appropriate timeframes.
- b. The forecast total income for FY2023-24 is c.£2.84m and is sufficient to cover planned expenditure.
- c. It is proposed that registration fee levels are held the current level. This would be for the ninth year in succession and would help the profession with the challenge of the rising cost of living.
- d. Holding registration fees constant for nine years would mean GOsC has absorbed +£350k of lost income; this represents our ongoing commitment to cost efficiency and effectiveness.

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

- a. It was confirmed that the framework did not consider the costs relating to the Cloud Engage Project. The budget envelope presented considered the regular budget activity. Further information and the plans relating to the IT Project would be submitted to the Audit Committee and to Council at future meetings.
- b. It was noted that one of the core principles of the Budget Strategy is to ensure that the patient voice is heard. In response to a question on the extent to which the patient voice might be compromised if it was found that certain activities might need to be reduced to focus on core activities, Council was given the assurance that where possible, activities related to the Patient Voice and other areas of engagement would be prioritised. It was also noted that as a regulator the stress testing considered what could be undertaken as a minimum. It would be for Council to decide what should be prioritised keeping in mind the core function of the regulator is the protection and safety of patients and the public.
- c. It was also suggested that in considering the budget principles more broadly, having the principles sit on their own might not set the right tone. It was suggested that when the budget and business plan is presented to the meeting of Council, February 2023, the paper highlights how the principles are adopted and the outcomes associated with them. The Chief Executive welcomed the observations and suggested that a narrative be part the next Business Plan / Budget Strategy paper for Council and noted that this would be taken forward by the Head of Resources and Assurance.
- d. It was noted that the GOsC would maintain registrant fees at the current level, but it was also noted there could be no reduction or removal of the administrative fee (set at £20.00) as this is set in legislation and can only be

changed by way of an Amendment Order. It was agreed that maintaining the registrant fees at the current level would be a positive news story.

Noted: Council considered and noted the overall financial envelope for financial year 2023-24

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

Item 8: Fitness to Practise Report: Quarter 2 - 01 July to 30 September 2022

18. The Director of Fitness to Practise introduced the item which presented the quarterly update to Council on the work of the Regulation department and the GOsC's Fitness to Practise committees.
19. The key messages and following points were highlighted:
 - a. At the time of writing, 7 of the 19 cases referred by the Investigating Committee (IC) to the Professional Conduct Committee (PCC) have been listed. There are currently no substantive hearings to be considered by the Health Committee, although there was one Health Committee review hearing that took place during the reporting period.
 - b. In this reporting period, an increased number of concerns were received in comparison to the previous quarter. Six concerns were made formal in this reporting period. It should be noted that a number of concerns raised are very serious and there are challenges in engaging with vulnerable complainants who raise serious concerns. As a consequence of the challenges this can lead to cases being closed as they cannot be kept open indefinitely
 - c. The screener KPI has been met and exceeded the end-to-end PCC KPI by three weeks. The IC KPI however was not met.
 - d. A Section 32 prosecution case against an individual who is currently suspended from the register on an interim basis while an FtP investigation has concluded.
 - e. An IC Training-day will take place on 29 November 2022. The agenda will include training arising from recommendations from the external audit report findings reported to Council in 2021.
 - f. External research is being conducted by the Open University which involves all the Health Regulators focusing on serious misconduct in healthcare and the impact on witnesses. Researchers have observed GOsC hearings and progress meetings have been held and feedback specific to the GOsC has been requested.
20. In discussion the following points were made and responded to:

- a. It was confirmed that registrants are made aware of the end-to-end key performance indicators but there is no comparative data of the GOsC's KPI against other regulators. There would be a reluctance to make such a comparison as each regulator is unique and the focus should remain on the information and support that the GOsC can offer such as the Independent Support Service which is available to registrants and complainants. It is planned that information on this topic will be featured in an e-bulletin in early 2023.
- b. It was explained that if registrant applies for voluntary removal and has a flagged/outstanding concern relating to their fitness to practise the removal will not progress. If the removal was to be implemented, the GOsC would no longer have jurisdiction over that individual.
- c. It was confirmed that the concerns shown in the report are both historical and current.
- d. In response to a question on complainants' engagement with the FtP process and other support that might be available in addition to the Independent Support Service, it was explained that this was dependent on the point that has been reached in the complaint process. If the complainant has disengaged once the screening process has taken place the matter cannot be closed by the GOsC but must be taken forward by the Investigating Committee and, if referred, to the Professional Conduct Committee who under statutory rules can compel a witness to give evidence. The Regulation team have all received appropriate training and will, as far as possible, ensure that complainants, including those who are vulnerable, can be supported and given assistance through the complaints process.

Noted: Council noted the Fitness to Practise Report.

**Item 9: Annual Reports of the Fitness to Practise Committees:
Investigating, Professional Conduct, and Health Committees**

- 21. Each committee of the GOsC is required to report annually on its work to Council. These reports of the Fitness to Practise Committees cover the period 1 October 2021 to 30 September 2022.
- 22. The following points of the reports were highlighted:

Investigating Committee (IC)

- a. During the reporting period the Committee met on thirteen occasions, in comparison to seven meetings during the 2020-21 period.
- b. There has been an increase in the number of Interim Suspension Order (ISO) hearings compared to last year (ten during this reporting period compared to six in the previous year). During the period 2021-22, the

Committee imposed two orders, accepted two undertakings, and made no order in the other six cases

- c. The highest numbers of complaints relate to transgression of sexual boundaries (eleven), inadequate clinical treatment (thirteen), and lack of insurance (five). Areas of concern include the inappropriate crossing of professional boundaries and sexually motivated conduct. These have featured in eleven cases during 2021-22 in comparison to eight cases during 2020-21. The number of cases involving alleged transgression of sexual boundaries remains a concern. The willingness of potential victims to come forward is welcome but it is unknown how many remain silent.
- d. The Annual Performance Reviews (APR) for all members of the Committee have been completed and submitted. Members are committed to the effective use of feedback with meetings and hearings concluding with an informal feedback session to identify areas of good practice or areas for improvement at an organisational level.
- e. The current Investigating Committee comprises eight lay members (including the Chair) and eight osteopaths. One registrant member has been recruited during the current reporting period. The membership of the IC will be undergoing significant change with new appointments to commence in 2024. The preparations for recruitment are well underway.
- f. The migration to Caselines for reviewing evidence continues and is supported by members. It is recognised that using the platform increases efficiency, safeguards confidentiality, and allows for flexibility. The Committee has continued to meet remotely with a few exceptions and the meetings have been successful, with some minor interruptions due to technical difficulties. It is acknowledged that there is clearly a role for remote hearings, however there is also benefit in holding some face-to-face meetings when it is safe and appropriate to do so. Although remote meetings are working well it should be noted that hearings take longer to complete in comparison to in-person meetings; a remote meeting will consider four cases in comparison to six in a face-to-face meeting.
- g. The IC Chair expressed his thanks for the excellent administrative support provided to the IC commenting that staff members are responsive and extremely helpful in ensuring that matters are addressed promptly and efficiently.
- h. IC – Fees and Expenses: In considering the decision made by the People Committee on members fees and allowances, feedback was given by members of the IC and has been shared with the Chief Executive:

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

- a. In response to a question regarding the disparity between remote and in-person meetings and the number of cases considered, a number of reasons were put forward:
 - Technical issues although this has and continues to improve
 - The mechanics of conversation, in-person this is more dynamic and fluid
 - The hearing/meeting process takes a little longer with the legal assessor report needing to be circulated a number of times before finalising. Reducing the number cases considered when meetings are held online has made this process more manageable and conducive to decision making.
- b. In relation to insurance cases the Chief Executive commented that during a recent meeting with GOsC counterparts in Australia and New Zealand the problems experienced with issues concerning insurance were similar to those in the UK.

Professional Conduct Committee (PCC)

- a. The PCC Chair expressed his thanks to the Regulation team for the quality of support provided to the PCC members in particular the timeliness of communications.
- b. The relaxation of COVID-19 restrictions means that the pandemic is no longer a primary factor when considering the venue for a hearing. Clear processes have been established to support decisions on whether a hearing is in-person or remote, if in-person and is necessary can revert to remote a setting. The 'Remote Hearings Guidance and Protocol' sets out a clear and consistent approach for agreeing a hearing's setting taking in consideration the needs of witnesses, the registrant and panel members.
- c. There has been a fall in workload for the PCC and therefore less opportunity for members to sit on a hearing. This should be monitored as if this were to become a trend there could impact on the progress of an individual case.
- d. Council can be confident that the members of the PCC are committed to the role, have an understanding and awareness of the Committee's responsibilities and the importance of its independence. Outside of formal meetings the Committee meets three times a year; a training/development day and two informal online meetings to consider various aspects of the Committee, what has gone well or not so well and shared/common concerns.
- e. The membership of the PCC will be undergoing significant change with members terms of office ending in 2023, 2024 and 2025. Preparations for recruitment are well underway but the level of change may present some risk. To mitigate this, it will be important to ensure that there are experienced panellists available to sit on hearings.

- f. Fees and Expenses: As commented by the IC Chair, concerns about fees and expenses have also been highlighted by the members of the PCC.

Health Committee (HC): The Chair had no further comments regarding the report.

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

- a. Council was advised that in advance of the forthcoming FtP Committee recruitment the Executive would be reaching out to both the IC and PCC Chairs to review the Committee competencies for the recruitment of new members. The competencies will be a key feature of the recruitment to ensure that both Committees complement maintain the appropriate level of experience and skill.

FtP Committees: Fees and Expenses

- b. The Chair of the People Committee (PC) commented that the decisions on fees and expenses had been taken with careful consideration and had been based on the evidence presented to the Committee. It was agreed that the feedback provided by the Committee Chairs would be presented to the PC for consideration at its meeting in March 2023. Members were also informed that consideration would be given to widening the scope of benchmarking beyond the health sector. This would include the reading fees payable to members.

25. On behalf of Council the Chair thanked the FtP Committee Chairs and the members for all their work. The Regulation team were also thanked for their work in supporting the FtP Chairs and the Committees.

Noted: Council noted the Annual Reports of the Fitness to Practise Committees.

Item 10: London College of Osteopathic Medicine (LCOM): Withdrawal of Recognised Qualification

26. It was confirmed there were no conflicts of interest in relation to this item.

27. The Policy Manager introduced the item which asked Council to consider whether the London College of Osteopathic Medicine Recognised Qualification should be withdrawn.

28. The key messages and following points were highlighted:

- a. The London College of Osteopathic Medicine (LCOM) Recognised Qualification (RQ) is due to expire on 16 July 2023. A RQ Visit was in the process of being planned but has been cancelled as LCOM no longer intend to run a programme.

- b. LCOM advised the GOSC that their Trustees have taken the decision not to run the programme as planned this autumn in a letter dated 10 August 2022 due to issues related to resources (including finance) and the impact on the ability to deliver standards.
- c. The LCOM RQ expires on 16 July 2023. As the programme has been cancelled, the planned RQ review visit will no longer take place, and the RQ will expire with no further action required. The suspension of the course is published on our website and on the LCOM website.
- d. At its meeting on 6 October 2022, the Policy and Education Committee (PEC) considered whether the suspension of the programme fell within the scenarios outlined in Section 16 of the Osteopaths Act 1993. The Committee considered that it was appropriate to refer the matter to Council.
- e. Options for Council were presented, as to whether to exercise its power to recommend withdrawal of the qualification in accordance with s16(2) of the Osteopaths Act 1993.

29. The Chair of the Policy and Education Committee commented:

- As the situation with LCOM progressed the PEC Chair had been kept fully informed developments throughout by the Professional Standards team.
- The discussions at the Policy and Education Committee concerning LCOM had been thorough, well considered, considered within the relevant section of the rules, and supported by legal advice.
- Based on the discussions it was agreed to make the referral to Council.

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

- a. In response to question about the risks to be considered in relation to the options presented it was explained that the situation although unique did not carry negative implications. The LCOM had made the decision to withdraw the programme and, following advice from King's Counsel, the institution was informed by the GOSC that an application to reinstate the RQ would be considered under the established process for awarding a Recognised Qualification.
- b. The focus of concern for the PEC was the possibility that the institution might recruit and rush through a graduating cohort before the July expiry date. It was considered that the probability of this happening was slim to zero. It was also noted that LCOM when they had been looking to recruit were already aware of the assurances required by the Committee.

31. The Chair summarised the discussion:

- The London College of Osteopathic Medicine (LCOM) currently holds a Recognised Qualification but is not in a position to deliver a course to meet the qualification.
- For Council this is a reputational issue and it should consider:
 - does Council continue to allow the institution to hold an RQ knowing the institution will be unable to deliver the course?
 - if the institution is permitted to deliver a course Council will not have the assurances on the quality of the course as the requirements for the management of the course are not in place.
- Council must decide either to accept the course will not be undertaken and leave the RQ to run to its expiry date, 16 July 2023, or recognising that the institution is unable to deliver the course and unable to provide assurances decide that the RQ should be withdrawn.
- LCOM would be welcome to reapply for the RQ at a point in the future when it is able to provide level of assurances required by Council in order that the recommendation to approve the RQ can be made.

Noted: Council noted the situation regarding the suspension of the LCOM programme.

Noted: Council noted the Policy and Education Committee's referral of this issue to Council.

Agreed: Council is satisfied that the LCOM Recognised Qualification should be withdrawn in accordance with Section 16 of the Osteopaths Act 1993. Council therefore agreed that Privy Council's approval of Council's decision to withdraw the LCOM Recognised Qualification should be sought.

Item 11: National Council for Osteopathic Research: Concerns and Complaints Report

32. The Policy Manager introduced the item which asked Council to consider and reflect on the findings from the NCOR concerns and complaints report 2013 to 2021.
33. The key messages and following points were highlighted:
 - a. The report brings together concerns and complaint data from the General Osteopathic Council (GOsC), the Institute of Osteopathy (iO) and three insurers of osteopaths.

- b. The updated data collection for this report took place during January to December 2021, and therefore there are some features attributed potentially to the coronavirus pandemic restrictions. Key findings include:
 - Reduced number of concerns overall (compared to 7-year average)
 - There were no concerns and complaints raised about consent
 - There were slightly more than average complaints about communicating inappropriately (Figure 8a) and the numbers of concerns and complaints around sexual impropriety are around the 8-year average. This is despite the overall number of complaints being low. This indicates proportionally these figures are higher than might have been expected.
 - Professionalism and Safety and Quality in Practice are the dominant themes in relation to concerns.
 - c. The GOsC continues to use this report to ensure it is focusing on practice in accordance with the Osteopathic Practice Standards (OPS) with communications and policy priorities covering the areas of concern as outlined in the report.
34. The Chair of the Policy and Education Committee commented that the discussions about the report were thorough. It was noted that the report is more triangulated with other sources of information and used to inform priority setting and work on other projects.
 35. The Chair on behalf of Council asked that thanks be passed on to Dr Jerry Draper-Rodi and his team for NCPOR's continuing work and for its report.

Noted: Council considered and noted the implications of the NCOR concerns and complaints report 2013-2021.

Agreed: Council agreed to publish the NCOR concerns, and complaints report 2013-2021.

Item 12: Registration report: six months to 30 September 2022 including registration modelling report

36. The Chief Executive introduced the item which provides an update on registration activity covering the six-month period from 1 April 2022 to 30 September 2022.
37. The key messages and following points were highlighted:
 - a. At the end of September 2022 there were 5,465 osteopaths on the Register.
 - b. The number of non-practising registrants stood at 140 at the end of September 2022, which was down on a peak of 330 during the height of the pandemic. The figure is currently below our pre-pandemic average.

- c. Ten return-to-practise assessments were completed in the reporting period. Nine registration assessments, connected to internationally qualified applicants were completed.
- d. The final report on registration modelling, commissioned by the GOsC and undertaken by Middlesex University, has been completed. There will be further work on how to take forward with stakeholders.

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

- a. Members were advised there has been no significant change in the percentage of registrants aged 61+ (12%), this figure has remained relatively stable due to the profession's older demographic. It was acknowledged that the position could change and present a risk as it is reasonable assumption that a proportion of registrants in this group may leave the Register in the next 5-10 years. Monitoring of this component of reporting will continue and consideration given to the impact on income from fees in the future.
- b. It was confirmed that data is held on the numbers who have retired from the Register and it was suggested that the data could be reviewed for any trends.
- c. Members expressed some surprise about the number of registrants in the 71-80 (88) and 81+ (6) age brackets and how productive they might be as practising osteopaths. It was pointed out some older registrants may hold non-practising status and that some may only be practising on a minimal basis.
- d. It was asked if the registration modelling report might become a mapping tool working in conjunction with the Registration Report. With the changing nature of the profession would the report be viable in the future? It was explained that the report would be the start of a conversation and initially shared with stakeholders and, in the future, consider whether the assumptions within the report stood the test of time.

39. The Chair in summary noted:

- the modelling report captures the current position but would not reflect the registration report a future point.
- it will be important to see a growth in the OEIs to ensure the replacement of those who will eventually retire or leave the register.
- it would be helpful to understand how many older registrants are practising.

Noted: Council noted the registration statistics for the six-months to 30 September 2022.

Agreed: Council agreed to publish and share with Stakeholders the registration modelling report from Middlesex University.

The Director of Regulation introduced the following items, 13 – 15.

Item 13: Fitness to Practise Publication Policy Consultation

40. This item invited Council to consider the draft Fitness to Practise Publication Policy in relation to:

- publishing interim order determinations and
- final determinations where a registrant is voluntarily removed from the Register

41. The key messages and following points were highlighted:

- a. The GOsC has a Fitness to Practise (FtP) Publication Policy which has been in place since 2013. The policy focusses on the length of time that notices of decisions should appear on the public website.
- b. The policy provides that Investigating Committee (IC) written decisions to impose an Interim Suspension Order (ISO) should be publicised in full and a note of the suspension should be made against the registrant's entry on the online register.
- c. The policy states that Professional Conduct Committee (PCC) ISO written decisions should be published in full and a note of the interim suspension should be made against the registrant's entry on the register.
- d. A registrant can request removal from the Register of osteopaths (the Register) at any time. This is a process called voluntary removal.
- e. The FtP publication policy is silent as to whether the written determination pertaining to individuals who request and are granted voluntary removal after their substantive hearing has concluded are also removed from the website.
- f. GOsC will publish a summary only of the outcome for PCC and IC ISO decisions. In short this is because:
 - Publishing decisions enables members of the public, including current and future patients, employers, and colleagues, to know when there has been concern about an osteopath's fitness to practise.
 - A summary of the ISO decision provides sufficient information of the concerns without risking contamination of any external third-party investigations and protects the rights of the registrant in circumstances where no findings of fact have been made against them

- g. GOsC will continue to publish an FtP written decision and sanction imposed (for the length specified within the FtP publication policy) for those individuals who have been granted voluntary removal by the Registrar after the hearing has concluded. In short, this is because:
 - Members of the public can then see that the former osteopath faced a professional conduct or professional incompetence hearing as this will be put on public record.
 - It supports the wider public interest in the publishing of sanctions by maintaining public confidence in the osteopathic profession and declare and upholding proper standards of conduct and competence amongst the osteopathic profession
 - h. Legislation requires that an Annual Fitness to Practise report is published by the GOsC. The Legislation also requires that the name of individuals, findings made, and sanctions imposed are also published and this information appears on the GOsC website. A number of queries have been raised regarding historical reports and sanctions imposed and whether it is correct for this information to be publicly available after a given number of years. The consultation will consider this matter, and how it should be addressed.
 - i. The consultation, which aligns with the GOsC consultation principles, will run for a period of three months and the outcome will be reported back to Council at its meeting in May 2023.
42. In discussion the following points were made and responded to:
- a. It was confirmed that a further question would be added to the consultation document although the consultation was already wide enough to be published without additions. It was thought helpful to flag the issue to allow respondents to reflect and respond to area not previously considered.
 - b. Members were advised that Council had made the decision on the length of time for which determinations should be published, and it was not proposed to revisit this as it is considered proportionate, therefore, a sanction of five-years would be in relation to the full determination.
 - c. It was confirmed that a registrant with a sanction would be removed from the search function of the live online register. If the sanctioned individual were to make a registration application during the sanction period this would be picked up by the Registration team.
 - d. The issue concerning the Annual Fitness to Practice report is that legislation requires that sanctioned individuals are named and this along with the details remains in the public domain beyond the length of the imposed sanction. Advice will be sought about this issue.

Agreed: It was agreed that a final draft consultation document will be circulated to Council by electronic means for further review and comment in advance of publication and in line with the agreed consultation timescale.

Item 14: Review of Whistleblowing Policy

43. This item invited Council to agree the proposed amendments to the Whistleblowing Policy following a review.

44. The key messages and following points were highlighted:

- a. The GOsC has a Whistleblowing Policy which has been in place since 2014.
- b. A general review of our Whistleblowing Policy has been conducted practical changes have been made to the policy in terms of structure to improve its accessibility for those seeking to raise a concern with the GOsC.
- c. Changes include:
 - setting out the criteria that must be met for a concern to amount to a qualifying disclosure
 - Addition of a section on help for whistleblowers
 - General updating, for example, the addition of the requirement that GOsC, is required to publish an annual report on the whistleblowing disclosures.
- d. Given the amendments to the policy are predominantly focused on restructuring existing information we have not proposed that a consultation is required.

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

- a. It was confirmed that any individual could be considered a Whistleblower including Council and Committee members. It was proposed that an additional category of 'Office Holder' might be considered.

Agreed: Council agreed the amended Whistleblowing Policy subject to the Policy being clear there is no barrier in its application to Council and Committee members and to whom the policy equally applies.

Item 15: Practice Note consultation outcome: Questioning Witnesses

46. This paper invited Council to agree the Draft Practice Note on Questioning Witnesses.

47. The key messages and following points were highlighted:

- a. The Interim Practice Note on Questioning Witnesses, approved by Council in July 2020, was introduced as an interim measure, alongside the interim Remote Hearings Protocol, to enable us to continue to fulfil our statutory function and progress fitness to practise hearings during the Covid 19 pandemic and lockdowns.
 - b. We also actively sought feedback from all participants post-hearing to ensure that any improvements identified are proactively addressed and incorporated within our new draft guidance and protocol.
 - c. We ran a consultation from 20 September – 31 October 2022. This is less than the 12 weeks stipulated in our consultation principles. However, the practice note has been interim guidance for over 2 years and used by the PCC throughout the pandemic.
 - d. During this time, we have been able to gather feedback from stakeholders on its content. The suggested additions enhance but do not change its content and are largely draw on our experiences of remote hearings.
48. Council made no further comments and agreed the draft Practice Note on Questioning Witnesses.

Agreed: Council agreed the draft Practice Note on Questioning Witnesses.

Item 16: Minutes of the Policy and Education Committee (PEC), October 2022

49. The Chair of the Policy and Education Committee had no additional comments relating to the meeting.

Noted: Council noted the unconfirmed minutes of the Policy and Education Committee.

Item 17: Any other business

50. There was no other business.

Item 18: Questions from Observers

51. There were no questions from the observers

Date of the next meeting: 2 February 2023 at (10.00)