



General
Osteopathic
Council

**Minutes of the public session of the 93rd meeting of the General
Osteopathic Council held on Wednesday 2 November 2016 at
176 Tower Bridge Road, London SE1 3LU**

Unconfirmed

- Chair: Alison White
- Present: Sarah Botterill
John Chaffey
Bill Gunnyeon
Joan Martin
Kenneth McLean
Haidar Ramadan
Denis Shaughnessy
Deborah Smith
- In attendance: Richard Davies, Chair – Health Committee (Item 7)
James Kellock, Chair – Investigating Committee (Item 7)
Priya Lakhani, Regulation Officer (Item 9)
Kevin Morgan, Regulation Manager
Sheleen McCormack, Head of Regulation
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 (iO)
Elizabeth Huzzey, Registrant
Oliver Thomson, Registrant

Item 1: Welcome and apologies

1. The Chair welcomed attendees to the meeting. A special welcome was extended to Maurice Cheng, Institute of Osteopathy, registrants Elizabeth Huzzey and Oliver Thomson, Richard Davies, Chair of the Health Committee and a member of the Professional Conduct Committee, and James Kellock, Chair of the Investigating Committee. Kevin Morgan, recently appointed as Regulation Manager, was also welcomed to the meeting.
2. Apologies were received from Jorge Esteves, Judith Worthington, Chair of the Professional Conduct Committee, and Fiona Browne, Head of Professional Standards.

Item 2: Questions from Observers

3. There were no questions from observers.

Item 3: Minutes and Matters arising

4. The minutes of the public session of the 92nd meeting of Council held on 12 July 2016, were agreed as a correct record.

Matters Arising

5. There were no matters arising.

Item 4: Chair's Report and appointments

6. The Chair gave her report to Council. The main points were:
 - a. Since the last meeting a capacity building day had been held for registrants considering applications for non-executive positions. The day focused on helping attendees to develop the skills required to make a successful application and navigate their way through the extended selection process. It was anticipated this would help to raise the quality of applications received during the very extensive recruitment campaigns being undertaken in the coming months. The Remuneration and Appointments Committee would review this in due course.
 - b. The annual training day was held on 11 October. It was hoped that members had found the session useful as it was important to keep skills refreshed particularly with regards to equality and diversity when decisions are being made. The training session was also an opportunity to bring Council's knowledge of charity law and the requirements of trustees up to date. Further discussion and reflection on the session would take place at Council's seminar to ensure it is ready to carry out its role effectively when the application for charitable status is approved.
 - c. The Chair's annual review took place on 21 July. She thanked Kenneth McLean and Joan Martin for conducting the review. The development objectives agreed were to:
 - Continue to lead new Council to enable its increased effectiveness in strategy and policy development, financial capability and Executive scrutiny;
 - Ensure that Council is capable and competent to assume charitable status and its new accountabilities are properly and effectively executed;
 - Continue to focus on chairing skills so that style is seen to be inclusive and neutral, and that the Registrant voice is heard, and diverse views properly taken into account, with a lightness of touch that enables optimal performance.

- d. The work of the Osteopathic Development Group was also discussed. Members were reminded that Council had invested a substantial sum in sponsoring projects and needed to ensure scrutiny of the investment and also ensure consistency with the agreed risk appetite when considering the report was later in the meeting.
- e. A further important area of discussion was the development of the professional institute and its capacity to lead the profession in the future, potentially in the absence of a regulatory body. Following developments in the legislative agenda as highlighted in the Chief Executive's report (Item 5) it was important Council recognise this risk and continue to facilitate progress in this regard. The subject would be discussed at a meeting with the Institute of Osteopathy.
- f. The Chair attended the annual briefing for Audit Committee chairs organised by Treasury. The National Audit Office (NAO) highlighted some key learning points for the public sector arising from their audits, reviews and investigations, which included financial pressures, skills gaps, project management and cyber security. The NAO is particularly concerned about unclear accountability systems and capacity of reporting systems to highlight when things don't go so well. These were useful learning points for Council to be aware of when scrutinising the work of the Executive and attention was drawn to the good practice guides issued by the NAO and available on their website.
- g. Planning for discussions on individual members development objectives would begin in due course. Members would be contacted for meeting dates to be arranged.

Noted: Council noted the Chair's report.

Appointments

- 7. The Chair introduced the item which sought approval from Council for the reappointment of members of the Professional Conduct Committee (and Health Committee) and the Investigating Committee.
- 8. It was noted that Miles Crook, a member of the Investigating Committee, had made the decision to withdraw his application for reappointment. Council were therefore asked to ignore the recommendation for his reappointment.
- 9. Council was advised that an extensive recruitment process was taking place which included appointments to the Investigating Committee and the vacancy left by Miles Crook would be covered by the process.
- 10. Members were also informed that a recruitment exercise had recently concluded to appoint two Legal Assessors. Council's approval for the appointments would be sought by e-mail in due course. It was added that the response to the

advertised vacancies had been very good with a high number of good quality candidates.

Agreed: Council agreed the following recommendations:

- a. to reappoint Richard Davies, Philip Geering, and Colette Neville to the Professional Conduct Committee and Health Committee from 1 April 2017 to 31 March 2021.**
- b. to reappoint of Jacqueline Pratt as a member of the Investigating Committee from 1 April 2017 to 31 March 2021.**
- c. to reappoint Yvonne McNiven as a member of the Investigating Committee from 1 April 2017 to 31 March 2018.**

Item 5: Chief Executive's Report

11. 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.
12. The Chief Executive highlighted the following:
 - a. Department of Health legislation: amendments to the Osteopaths Act 1993 came into effect on 26 September 2016 and reinforce the purpose of the GOsC:
 - i. To protect, promote and maintain the health, safety and well-being of the public;
 - ii. To promote and maintain public confidence in the profession of osteopathy; and
 - iii. To promote and maintain proper professional standards and conduct for members of that profession.
 - b. It was added that the strengthening of the Act would also help with the application for charity registration.
 - c. Appointments: a major round of appointments was currently underway for members of Council, the fitness to practice committees and the Policy Advisory Committee. The recruitment exercise was the largest undertaken since 2008-9 and due to the logistical challenge, opening and closing dates for the campaign had been staggered with the final round of interviews taking place in February 2017.
 - d. Australia and New Zealand Memorandum of Understanding: a new Memorandum of Understanding has been finalised with osteopathic regulators in Australia and New Zealand – the Australasian Osteopathic Accreditation Council, the Osteopathic Board of Australia and the

Osteopathic Council of New Zealand. The MoU covers regulatory information sharing, streamlining regulatory processes and sharing best practise.

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

- a. Department of Health: members asked if there was any further information on the DH consultation on the future of healthcare regulation and the timetable. The Chief Executive informed members he was aware of discussions but the current ideas required more thought and feedback from regulators. There was no consensus from the four UK regions and any changes would require legislative consent. Although it was not possible to say that there would be changes to legislation, much could be achieved without changes.
- b. Members asked about the role of the Professional Standards Authority (PSA) in relation to the 'architecture' for the future of healthcare regulation and if there was any further insight into the PSA developments in risk profiling. It was explained that there was concern amongst the regulators that the PSA remit of performance monitoring was not included in the new 'architecture' and that their role was not clear. The risk assessment model which the PSA had reviewed at the request of the Department of Health could be useful in terms of the discussions it will raise about the professions to be regulated.
- c. Appointments: it was acknowledged that the Council and committee recruitment exercise was a significant undertaking but the activity had been planned for and was included in the Business Plan. Members were assured that there were sufficient resources allocated for the activity.
- d. Members were assured that as much had been done to encourage osteopaths to apply for positions on Council or the Committees and it was anticipated that registrants who had attended the open days would apply.
- e. Memorandum of Understanding: members asked what benefits would the Memorandum of Understanding bring to the GOsC. The Chief Executive responded that a MoU had been set up in 2010 which focused on a competent authority model which Australia and New Zealand successfully implemented but had not been a priority for the GOsC at the time. The MoU might streamline the registration process for Australian and New Zealand osteopaths and would also have significant benefits for fitness to practice with the exchange of information.
- f. Advertising: members asked about the meeting with the complainants relating to advertising. The Chief Executive responded that initially it had been difficult to engage with them but a better understanding of the GOsC had been achieved although it was not certain that the complaints would cease. A further meeting which would include the Advertising Standards Authority would take place in due course.

14. Progress against the 2016-17 Business Plan: members were informed that the Business Plan was on track. A line had been added to include Equality and Diversity and the Welsh Language Scheme.
15. Members congratulated the Executive on progress to date. It was agreed that timings, where absent, would be included in the plan.
16. Financial Report: the Head of Registration and Resources introduced the report advising that finances for the reporting period were on track. He highlighted it was anticipated that the budget provision for IT sundries and consultancy would be spent by the year end specifically on an external audit of IT/cyber security risks. Details would be presented to the Audit Committee at the meeting in November 2016.
 - a. Members congratulated the Head of Registration and Resources for the clarity of his report.
 - b. Members asked about oversight of the GOsC pension fund and whether there were any risk related to the fund. It was explained that Council was not liable or exposed to any risk relating the staff pension scheme. The GOsC contribution was included in the employment costs. The scheme is a defined contribution scheme with each contributor responsible for the management of their contributions and pension. A financial advisor is available to staff to discuss any aspects of the scheme and investment. It was confirmed that all staff are members of the pension scheme.
 - c. A correction to the first sentence at paragraph 8 of the financial report was noted and would be amended to read:

We have made some adjustments to the year-end forecast which sees an increase in the surplus from £11k to £19k.
17. Audit tender: the GOsC's auditors were appointed in 2008 for a period of five years. They were reappointed in 2013 following a tender process initially for two years and given a three year extension after agreement by Council in 2015. The auditors had now indicated that if they were to remain with the GOsC for a further two years they would require a significant rise in their fee from £21k. It was concluded that it would be more advantageous to begin a tender exercise for the appointment of new auditors in time for the 2016-17 audit. The tender exercise would also be an opportunity to work with the new auditors in the transition from FRS102 to Charity SORP if the GOsC were successful with its application for charitable status. Members were advised that although the timetable would be tight it was considered achievable.
18. In discussion the following points were made and responded to:
 - a. It was confirmed that the Audit Committee would discuss the tender process at their next meeting 24 November 2016. The Committee would also be

involved in the process and the tender panel would include the Audit Committee Chair.

- b. Members were advised that the GOsC had compiled a long-list of companies to be targeted who work with regulators and within the charitable sector.

Agreed: Council agreed the commencement of a tender process for the recruitment of financial auditors.

Noted: Council noted the Chief Executive's report.

Item 6: Fitness to Practise Report and Item 7: Annual Reports of the Investigating, Professional Conduct and Health Committees

Fitness to Practise Report

19. The Head of Regulation introduced the item which gave an update on the work of the Regulation department and the GOsC's fitness to practice committees.
20. The following areas of the report were highlighted:
 - a. Section 32 Cases: it was reported that following the trial of the former registrant Mr Jonathan Cove on 25 October 2016, he was found guilty and the GOsC awarded costs of £1,400.
 - b. Dataset for Q2 1 July – 30 September 2016: the new dataset report which replaces the quarterly dashboard was presented to Council. It was hoped that the new reporting approach would be more accessible than the previous reporting method.

Investigating Committee (IC) Annual Report

21. The Chair of the Investigating Committee presented his report highlighting the following:
 - a. All four new members of the Investigating Committee had now sat at meetings and the IC Chair was pleased to inform Council that the recruitment process had worked very well and that he was happy with the appointments which had been made.
 - b. The IC Chair asked that his thanks be noted for the departing members who had served on the Committee:
 - Abigail Miller
 - Anne Johnstone
 - Charles Dunning
 - Dr Michael Yates

Health Committee (HC) Annual Report

22. The Chair of the Health Committee presented his report highlighted the following:
- a. Council was reminded that although the Health Committee report was not substantial due to the low number of health related cases when a case was brought before the Committee it was often under very difficult circumstances and therefore required sensitivity and compassion when considering it.
 - b. It was also highlighted that due to the nature of the Health Committee Rules there were areas which could lead to difficulties if not correctly interpreted and the Committee worked hard to ensure cases were properly considered. It was stressed that if there were opportunities to make legislative changes or to check processes to ensure best practice in relation to the Health Committee, Council should do so.

Professional Conduct Committee (PCC) Annual Report

23. The Health Committee Chair and the Head of Regulation presented the Professional Conduct Committee Annual Report on behalf of its Chair, Judith Worthington. The following points were highlighted:
- a. The improvements in guidance and practice notes were welcomed. The communications between the PCC and Regulation were also much improved.
 - b. Adjournments: there had been a rise in the number of case adjournments which was, in the majority of cases, due to unrepresented registrants. It was anticipated that the proposed guidance on hearings would alleviate this helping registrants to better understand the procedures.
 - c. Listings Protocol: members were informed a new protocol for listing hearings was to be implemented. The process would actively involve all parties in the planning and cases would be listed on the basis of how long they might last with committee members then allocated to cases. It was acknowledged it would be a complicated process and resource intensive. A more detailed update would be brought to Council at a future meeting.
24. In discussion the following points were made and responded to:
- a. Listings: members asked if there was cooperation from registrants for the new listings protocol. It was explained that registrants were responsive to request made by the Regulation team. With the new protocol the registrant questionnaire would seek answers to a number of matters relevant to the final hearing including availability, whether the registrant had legal representation and admissions. Difficulties arose where defence representatives, for example, make preliminary applications on the morning of the hearing or do not serve bundles in advance and turn up on the day

with large amounts of paperwork for the hearing. It was explained that ways to manage and minimise these situations through standard directions are actively being looked into. A meeting would be held with defence organisations in November as a first step to highlight the issues and explore ways of joint working.

- b. Adjournments: members asked why registrants were choosing not to be represented. The Head of Regulation surmised that registrants did not fully appreciate the fitness to practise process and the proposed complaints and hearings guidance would assist in addressing this issue.
- c. It was also pointed out that the legal requirement for professional indemnity insurance covers against claims made by a patient therefore the level of cover varies and may not include fitness to practise cover. It was added that the quality of defence for registrants does vary and can have a significant impact on the time, expense and executive support for cases heard by the committees.
- d. Support to the ftp committees: members asked for further clarification about the support provided by the Regulation team to the ftp committees. It was noted that there had been some problems in the support provided but it was also recognised by both Chairs of the IC and the HC that in comparison to other regulators the team was small and had more recently experienced a high turnover in staff.
- e. Dataset: it was agreed that the Dataset report would in future include length of time for PCC cases. It was also noted there had been no recent Rule 8 disposals and this might be due to the complexity of cases. Members were advised that the practice notes needed to be reviewed as they place limitations on cases that can be disposed of in this way.
- f. Members asked about policy development following the outcome of the Michalak case. The Head of Regulation responded that depending on the outcome, the Supreme Court's judgment might have some limited impact on the GOsC and there could be an opening for potential action, therefore the GOsC are informally supporting the appeal being made by the GMC.
- g. Interim Suspension Orders – Health Committee: members asked what mitigation the GOsC offered in relation to ISOs and the Health Committee where the outcome at the hearing is a conditions of practice order and, in those circumstances, could the Registrant continue to practise without restriction during the 28 day appeal period. It was explained that there were no assurances that could be offered apart from entering into a voluntary undertaking not to practise during this period but there was no mechanism where the Committee could impose this without the consent of the Registrant. However it should be noted that if there was a conditions of practice order this would only have been imposed where the individual had demonstrated insight and was willing and able to comply, and therefore

more likely to agree to undertakings. The situation arose infrequently but was sufficient for there to be concern.

- h. Members were assured that the Regulation team were meeting their key performance indicators and what appeared to be a backlog were cases that had been referred by the IC and waiting to be listed for the PCC. This was where the new listings protocol would be effective.
- i. Section 60 Orders and the Health Committee: Members asked what actions had been or could be taken to resolve the issues highlighted at paragraph 9 of the Health Committee Annual Report. It was explained that since 2010 the GOsC has been submitting items requiring amendments to be made to the Osteopaths Act by way of the Section 60 procedure but without success and this had been the case for many of the health regulators. Even though the amendments requested by the GOsC are considered a matter of public protection the submissions have not been given priority. It was agreed that it was very helpful that the importance of these issues were being raised by an independent member of the fitness to practice committees.

25. The Chairs of the Investigating, Health, and Professional Conduct Committees were thanked for their reports. The Chair also expressed her appreciation for the work of the fitness to practise committees and the hard work of the members.

Noted: Council noted the Fitness to Practise Report and the Annual Reports of the Investigating, Professional Conduct and Health Committees.

Item 8: Budget Strategy

26. The Head of Registration and Resources introduced the item which set out the budget strategy for financial year 2017-18 and the projected budget envelope including expenditure forecasts, cost reductions and the potential impact on the registration fee.

27. The following areas were highlighted:

- a. The expenditure forecast was expected to be £2.8 million. The income forecast was expected to be at similar level and took into account the expected reduction in student numbers with the course closure at Oxford Brookes University.
- b. Council could be assured that the Business Plan and Budget would be fully costed with an anticipated small surplus position by the time of the next meeting of Council in February 2017. In order to do this would mean it would be necessary for the level of fees to remain the same.

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

- a. Members asked which areas carried the highest risk, given the assumptions which had been presented. It was explained the area which carried the highest risk in terms of volatility was fitness to practise due to its unpredictability. The forecast relating to fitness to practise was set out in the paper and members were asked to take into account attempts to bring down costs. Members suggested that if costs were to increase the organisation would be stretched as most areas for cost savings had been captured. It was agreed there was little scope for significant savings and that if it was necessary some projects might have to be put on hold. The organisation did have healthy reserves from which it could draw down funds if it became necessary.
- b. It was pointed out that there could be no increase in fees to meet any deficit as fee changes would require amendment to rules which is unlikely to be forthcoming.
- c. Members asked about the rationale behind reduced fees. It was explained that reduced fees applied to registrants who were not practising for three months or who were practising overseas for three months or more continuously. This represented approximately 10% of the register.
- d. It was noted that the loss of European students owing to the possible exit of the UK from the European Union was a key risk to the OEIs. Statistics were received from the OEIs but it was recognised that it was difficult to differentiate between those students who come to the UK to solely to study and those who register and then move on after graduation.
- e. Members were advised that acquiring charitable status would not mean a significant decrease in the GOsC's banking costs.
- f. It was explained that in terms of inflationary costs there were variations but it had been cited that due to factors such as 'Brexit' there could be an increase of approximately 10-12%. Members were assured that general long-term forecasts are included when reviewing the budget.
- g. It was noted that steps had been taken to reduce fitness to practise costs by keeping areas of work in-house. Where it was necessary for work to be undertaken externally wherever possible this was conducted on a fixed-fee basis but the main difficulty with cost lay with cases which were difficult/complicated. The Regulation team had no capacity for additional work at present.
- h. The Chief Executive reflected that savings were made on an ongoing basis as inflationary costs are absorbed. It was recognised that a review of staffing costs might be required by the Remuneration and Appointments Committee. It should be noted that the Regulation team retained a high level of legal resource within the staff team.

- i. It was noted that a correction should be made at paragraph 19b, which should read:

The number of osteopaths paying a reduced fee remains constant.

Agreed: Council agreed:

- a. the overall financial envelope for 2017-18.**
- b. to hold the registration fees at their current level.**

Item 9: Complaints and Hearings Guidance

29. The Head of Regulation introduced the paper which proposed two guidance booklets developed as part of a range of support and information the GOsC is planning to put in place to assist osteopaths under investigation in our fitness to practise procedures.
30. It was added that the guidance would make the process more transparent and also help registrants through the fitness to practise procedures. Both documents had been completed with the input of the Institute of Osteopathy and an osteopath consultant.
31. The guidance would go out to consultation for three months and would also be reviewed for Plain English. Any necessary changes coming from comments in from the consultation would be included in the documents.
32. In discussion the following points were made and responded to:
 - a. Council was advised that the documents had been reviewed by the Policy Advisory Committee and their comments had been incorporated. The guidance documents would also be reviewed by the FtP Users Group, the IC, the PCC and related parties.
 - b. Council agreed that the guidance was clear and easy to read. It was suggested that the expected timescale of cases should be included in Annex B: Hearings Guidance.
 - c. Members suggested that that the opportunity should be taken to emphasise in the Complaints Procedure (Annex A) that the cooperation of all parties is required when going through the complaints process with some of the factors which should be considered like timescales, when initial investigations are undertaken, and hearings are being scheduled. It was commented that that although the timescales might seem long it was to ensure fairness and the ability of those involved to be able to respond.
 - d. It was confirmed that the guidance would be available on the GOsC website and printed versions would also be available to osteopaths on request.

Agreed: Council agreed to consult on the draft complaints and guidance documents shown at Annex A and Annex B.

Item 10: Osteopathic Practice Standards Review

33. The Chair commended the Executive on the paper presented to Council noting the thought and effort in taking on board the comments from the Policy Advisory Committee.
34. The Chief Executive introduced the item which gave an update on the review of the *Osteopathic Practice Standards*. He commented that following the discussions at the PAC, the Executive had time to reflect and make the suggested changes.
35. The following were highlighted:
 - a. There had been in-depth and encouraging discussion about the review at the meeting of the Policy Advisory Committee, 13 October 2016, which highlighted the difficulties in differentiating the *Osteopathic Practice Standards* (Code of Practice and the Standards of Proficiency) and the 37 standards contained within the OPS.
 - b. The Executive has tried to focus on modifications to the 37 Standards as requested by Council along with the associated guidance and learning resources.
 - c. The Executive understood that the four themes should remain the same but there were issues about whether some of the 37 Standards were in the correct place. Some of the wording and presentation of the 37 Standards and the guidance would also be improved.
 - d. Legal advice had been taken about the Standards of Proficiency and the Code of Practice being one document with additional supplementary guidance sitting outside of the single document. The advice is that there are no barriers to the GOsC doing this.
 - e. Whether all the guidance is contained within the single OPS or as separate documents will be discussed at the planned meeting of the OPS Reference Group.
 - f. The issue of capacity had been addressed and there would be continuous monitoring of the review process and timetable in light of other demands on the organisation. It was not thought there were any contradictions or problems in relation to the CPD scheme.
 - g. The timetable had been revised as the draft OPS would not be ready for presentation to Council in February 2017. The revised timetable would give

the Executive the time to ensure the publication was effective, with appropriate and useful standards, guidance and learning resources.

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

- a. Members asked how the timetable for the OPS review and CPD scheme fit. It was explained that the CPD scheme would not be implemented until autumn 2018 and that the schemes were not interlinked beyond the issue of the OPS themes. The OPS would not be a new item but an updating of what already existed and therefore should not make a huge impact.
- b. The Chair of the Policy Advisory Committee (PAC) informed members that the discussion during the committee meeting had been robust and the OPS review properly considered. The new timetable would allow for further review by the PAC.
- c. Members asked what the planned strategy was for communication with registrants. Members were advised that the Executive had been conscious of communications issues from the close of the consultation. There would be discussions with stakeholder groups on the feedback from the consultation. There would also be updates via *the Osteopath* magazine and further engagement campaigns.

Agreed: It was agreed that the progress of the review was consistent with Council's principles.

Agreed: Council agreed the proposed revised timetable.

Item 11: British School of Osteopathy (BSO) – renewal of Recognised Qualification

37. The Chair reminded Council of its duty in approving Recognised Qualifications based on the recommendations of the Policy Advisory Committee (statutory Education Committee).
38. Haidar Ramadan declared an interest in the British School of Osteopathy and left the meeting for the duration of the discussion.
39. The Chief Executive introduced the item concerning the British School of Osteopathy seeking to renew its current Recognised Qualifications for:
 - a. Bachelor of Osteopathy
 - b. Master of Osteopathy
 - c. Master of Science in Osteopathy (pre-registration).

Agreed: Council agreed to renew the recognition of the qualifications, Bachelor of Osteopathy, Master of Osteopathy and Master of Science in Osteopathy (pre-registration), awarded by the British School of Osteopathy subject to the conditions outlined in paragraph 9 from 1 May

2017 until 30 April 2022, and to seek approval of the recognition from the Privy Council.

Item 12: College of Osteopaths – renewal of Recognised Qualification

40. The Chief Executive introduced the item concerning the College of Osteopaths seeking to renew its current Recognised Qualification for:
 - a. Bachelor of Osteopathy
 - b. Master of Osteopathy
41. Council was informed additional conditions had been proposed for the institution as shown at paragraph 17: sections A – C, had been
42. In discussion the following points were made and responded to:
 - a. Members were informed that the conditions were placed on an institution lasted throughout the period of the renewal. The timetable for implementation was contained in the institution’s action plan.
 - b. Members were informed that the issue relating to number of new patients and their follow up was contained in the PAC minutes and would be requested as part of the institution’s annual reporting.

Agreed: Council agreed to renew the recognition of the qualifications, Bachelor of Osteopathy and Master of Osteopathy, awarded by the College of Osteopaths subject to the conditions outlined in paragraphs 16 and 17 from 1 May 2017 until 30 April 2022, and to seek approval of the recognition from the Privy Council.

Item 13: Continuing Professional Development (CPD) – Update

43. The Chief Executive introduced the item which provided an update on the implementation of the CPD Scheme. Council was also asked to consider and agree waiving the procurement requirements in relation to the development of the CPD resources website.
44. It was highlighted that there have been discussions on the risk framework for the scheme implementation and a paper would be brought to the meeting of the PAC in March 2017 and then for consideration by Council subsequently.
45. Council was informed that the GOsC plans to develop a CPD microsite to support the implementation of the scheme the cost of which will be in the region of £22k. The GOsC Procurement Policy requires that a tendering process is conducted for projects in excess of £5k and Council was asked to forego this requirement as the GOsC has had a successful relationship with the web design company Design to Communicate Ltd since 2015, who have an understanding of the GOsC’s business requirements. Members were advised that to invite

companies to tender would cause delay with the implementation of the CPD scheme.

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

CPD update

- a. Members commented on the aspect of collaborative working and wondered if there was an opportunity to integrate aspects of peer mentoring between the Osteopathic Development Group and the CPD Scheme. The Chief Executive agreed with the idea, but commented that a challenge for the CPD scheme was about peer discussion which had caused some concern although it was not expected to be implemented until 2020-21. Until that time there were many ways for mentoring to be supported.
- b. Members asked whether, given the amount of IT reliance within the project, the Executive were happy with the support and resources that would be available. The Chief Executive responded that there were three aspects to consider:
 - i. in terms of the supplier it was about the presentation and web design technology. GOsC had a lot of in-house expertise in dealing with web suppliers and technology.
 - ii. in relation to the e-portfolio there was still some discussion being conducted relating to e-portfolios but this would be owned by the profession. The concept is currently being tested by the Early Adopters of the CPD Scheme.
 - iii. in relation to electronic submissions the GOsC were looking to change this and would be working with the current supplier to work on implementation. Although it was not thought that there were any major gaps if it became necessary, looking forward, expertise would be bought in.

CPD microsite – tender

- c. Members asked how the amount proposed compared with what had been spent previously with the proposed supplier. Members were advised that approximately £5k had been spent on the interactive consultation website. The £22k proposed related to the volume and complexity of the project commensurate with work that had been undertaken previously.
- d. It was agreed that waiving the procedure as set out in the Procurement Policy would also save on time not only in terms of staff resources but having to undertake the procurement process.
- e. The Chair commented that if Council approve the tender waiver there should be proportionate controls, a clear specification and maintenance of the budget which would be subject to Council oversight and scrutiny.

- f. There would be a further update at the next meeting of Council.

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

Agreed: Council agreed to waive the tender requirements for the development of the CPD resource website.

Item 14: Update of the work of the Osteopathic Development Group (ODG)

47. The Chief Executive introduced the item which provided an update on the work of the Osteopathic Development Group and the eight projects that the group is undertaking. There was solid and positive progress across all projects and that feedback had been very encouraging.
48. The Chief Executive of the iO also commented that he was very pleased with progress and the encouraging outcomes achieved through collaborative working.
49. In discussion the following points were made and responded to:
- a. Members expressed some uneasiness with the investment and what was described as a 'loosely constituted collaboration'. Members were reminded that Council had approved the budget £42k for a number of projects as described in the paper and there was governance across the projects to ensure controls. It was added that Council had discussed in depth and had been willing to take the risk with the ODG. It was suggested that redefining the group as a 'collaboration' might be preferable especially in light of the GOsC's application for charitable status.
 - b. It was commented that the work was very encouraging and looking forward could lead to creating more international collaboration. It was also asked how public partners could be encouraged to take on developmental roles to enhance their effectiveness. The Chief Executive responded that there has always been a clear route back to public involvement in working with the ODG and the Public Patient Partnership group has been involved in this. The GOsC had to be cautious in not placing too much of the organisation's perspective on the work and it was important to influence and rather than assert too much control.
 - c. Members asked if there were written definitions of what the projects should achieve. The Chief Executive advised that there was documentation on the projects but delivery was an area which still required improvements. A number of projects and progress to date were outlined and further reports would be brought to Council in the future.
 - d. Members agreed that the collaboration was a worthwhile and valuable undertaking but there were difficulties in assessing. The Chair commented

that the profession has come a long way since the establishment of the ODG. The challenge for the GOsC and its stakeholders is to recognise the GOsC has a strong role to play and to exert influence in terms of governance. It was suggested that as the same players had been involved in the ODG since the start whether there was scope to for bringing new voices. An important area would be in relation to advanced clinical practice.

- e. The Chief Executive summarised that there had been a lot of self-examination by the ODG and there was growing ambition as shown with the work of the iO. There were areas where proposals could be brought to Council to support other initiatives for example there have been discussions with the iO and COEI to support the capacity of COEI in its development along with the academic and clinical faculties of the OEIs.

Noted: Council noted the contents of the report.

Item 15: Registration Report

- 50. The Head of Registration and Resources introduced the item which gave an update of registration activity covering the six month period from 1 April 2016 to 30 September 2016.
- 51. The Head of Registration and Resources thanked his team for their hard work which was reflected in the report presented to Council.
- 52. The Chair also commended the team on a clear and informed report.

Noted: Council noted the content of the report.

Item 16: Investment Update

- 53. The Head of Registration and Resources introduced the item which concerned the Council's decision to move the investment portfolio from Standard Life Wealth. The Executive concluded that Brewin Dolphin should become the new investment management firm.
- 54. There was every confidence that Brewer Dolphin would provide an improved service on the GOsC's investment portfolio. It was suggested and agreed that Brewer Dolphin should be in attendance at the presentation of the Annual Report in 2017.

Noted: Council noted that Brewin Dolphin has been selected as the GOsC's new investment managers.

Item 17: Minutes of the Policy Advisory Committee – 13 October 2016

- 55. The Chair of the Policy Advisory Committee commented that with a substantive agenda the meeting had been challenging. All members had engaged and contributed to the substantial discussions.

Noted: Council noted the minutes of the Policy Advisory Committee.

Item 18: Minutes of the Remuneration and Appointments Committee (RaAC) – 30 June 2016

56. The Chair had no additional comments on the meeting.

Noted: Council noted the minutes of the Remuneration and Appointments Committee.

Item 19: Minutes of the Audit Committee (AC) – 30 June 2016

57. Members of the Audit Committee commented that the meeting with the auditors had been frank and very useful.

Noted: Council noted the minutes of the Audit Committee.

Any other business

58. There was no other business.

Date of the next meeting: 1 February 2017 at 10.00.