



**Minutes of the public session of the 91st meeting of the General
Osteopathic Council held on Thursday 5 May 2016 at 176 Tower Bridge
Road, London SE1 3LU**

Unconfirmed

- Chair: Alison White
- Present: Sarah Botterill
John Chaffey
Jorge Esteves
Bill Gunnyeon
Joan Martin
Kenneth McLean
Haidar Ramadan
Denis Shaughnessy
- In attendance: Russell Bennett, Regulation Manager (Item 7)
Fiona Browne, Head of Professional Standards
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, the Institute of Osteopathy
Bob Davies, Programme Manager, College of Human and Health
Sciences, Swansea University
Penny Sawell, Registrant
Mairead Williams and Camilla Williams, Auditor, Grant Thornton
LLP

Item 1: Apologies

1. Apologies were received from Deborah Smith. The Chair, on behalf of Council, wished Deborah well for a speedy recovery.

Item 2: Questions from observers

2. There were no questions from the observers.

Item 3: Minutes and matters arising

Minutes

3. The minutes of the 90th meeting of Council held on 4 February 2016, were agreed as a correct record.

Matters Arising

4. Item 6: Fitness to Practise Report – Paragraph 19h – Decision Review Group (DRG): Members asked if there had been any progress or moves towards GOsC establishing its own DRG as discussed at the February meeting. Members were advised that once the review findings of the fitness to practise audit were completed the DRG would be given further consideration.

Item 4: Minutes of matters considered electronically since the meeting of Council, 4 February.

5. The Chair explained that on occasion it was necessary to seek Council's agreement to items in the periods between meetings. It was emphasised that coordinating Council's agreement on decisions electronically was rare and would only happen under extraordinary circumstances.

6. Item 1: Appointment of members of the Investigating Committee

The minutes agreeing the appointments of Adam Fiske, Eleanor Harding, Laura Heskins and James Hurden, were agreed as a correct record.

7. Item 2: Appointment of Medical Assessors

The minutes agreeing the appointment of UK Independent Medical as a back-up provider of Medical Assessors to the GOsC, were agreed as a correct record.

Noted: The minutes for the appointments of four members of the Investigating Committee and the appointment UK Independent Medical as a back-up provider of Medical Assessors to the GOsC were noted.

Item 5: Chair's Report

8. The Chair gave her report to Council. The main points were:
 - a. New and returning members were welcomed to the first meeting of the reconstituted Council. The process of familiarising everyone with both the Corporate Strategy and how Council would work together to best effect had already begun, with the induction meeting held in April. Council's seminar session would consider in more depth the discussions following on from the induction, and for an early informal review of how Council are doing and identify those areas where further development might be required.

- b. Since the meeting of Council in February, the Chair had been engaged in bringing to a conclusion the practical issues associated with the reconstitution. It had been important and worthwhile to provide personal feedback to those applicants who had asked for it, especially to registrants. Much of the feedback was provided on a one-to-one basis to enable individuals to ask questions about where they needed to develop so as to improve their chances next time around. There had also been the opportunity to identify the learning and improvement opportunities for the process which have subsequently been discussed with the Remuneration and Appointments Committee and will be progressed later in the year with a further intensive round of appointments in the autumn. Council was advised that a further development day for registrant applicants was planned for the autumn and members were invited to consider lending their support by attending. Details would be made available in due course.
- c. The Chair reminded members that following the induction day Council would need to be on its mettle to address a range of important issues and to make early important decisions. The Chair highlighted agenda items where members were being asked to scrutinise performance, to make decisions about issues of policy and corporate governance, and to oversee the early progress of some of our most important projects in the Corporate Strategy, including the new CPD scheme. The Chair looked forward to working with members on these issues advising that the agenda gave a good indication of the diversity of the agenda that Council would be required to deal with.
- d. The Chair reminded Council that the preparations for the process of annual reviews were underway. For returning members of Council and others elsewhere in the governance structure the process would remain the same and those members were encouraged to review their performance and seek input from colleagues as they have done previously. In terms of the Chair's own review, it had been agreed that this would be conducted by Kenneth and Joan. For new members, the Chair advised that discussions about development objectives would take place in the autumn, once members had had the opportunity to become more familiar with the way Council and its committees works. Arrangements were being made by the Executive to invite new members to Osteopathy House to continue the induction process in ways which will be most helpful individually. For members who might like an earlier discussion with the Chair she would be happy for this to be arranged.

Noted: Council noted the Chair's report.

Item 6: Chief Executive's Report

9. 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. Members were advised that it was too early to report on progress against the 2016-17 Business Plan and Budget.

10. The Chief Executive highlighted the following:

- a. PSA Performance Review: following the PSA Performance Review, the Chief Executive was pleased to inform members that the GOsC had met all the standards. Members were advised that the GOsC was the second of the health regulators to have been reviewed under the new light-touch process and that meeting the PSA standard was a credit to all within the organisation.
- b. Osteopathic Education Foundation (OEF)/Institute of Osteopathy (iO) Consultation: the Chief Executive had very recently been informed of an agreement in principle between the OEF and the iO to allow the OEF to become the charitable arm of the iO. This would be a significant step for the profession and would allow further inroads into development, research and education. The proposal has gone to consultation and it was the intention that the GOsC would respond positively. The Chief Executive would be happy to make available further details about this initiative to members.

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

- a. PSA Performance Review: members commended the Executive and staff on the outcome of the Performance Review saying it was a credit to the hard work of all.
- b. Department of Health legislation update: members asked if following the discussions with the DH if there was any indication of what was being planned and proposed.

Members were informed that the DH had identified six themes to be reviewed within regulation and would engage with stakeholders over the next few months. It would be autumn before there would be any real progress with legislative reform.

- c. IO/GOsC bilateral meeting: members were pleased to see these meetings were taking place and asked if there were any actions which could be reported as a result of discussions.

In response, the Chief Executive explained that the bilateral meetings were an opportunity to strengthen the relationship and to work together in a number of key areas such as CPD, recruitment and the current advertising complaints issues which impact on both organisations. The Chair added that the relationship also benefits the wider profession such as the work of the Osteopathic Development Group (ODG) and therefore was worth the investment in time.

12. Progress against the 2015-16 Business Plan: the Chief Executive informed members that due to some slippage with projects and plans those areas of the Business Plan marked in amber would carry over to the 2016-17 cycle. It was

highlighted that a registrant survey had been planned but a data analysis project had been conducted in its place. The results from the project would be presented to the Policy Advisory Committee in June.

13. Financial Report: the Head of Registration gave an update on the provisional outturn for the 2015-16 financial year ending 31 March 2016. In his report he highlighted the following:
 - a. The financial audit was currently being undertaken by the GOsC auditors, Grant Thornton LLP. The audit, which for the first time sees the accounts being prepared in accordance with FRS102, was going well and it was hoped that a clean report would be presented to the Audit Committee and Council respectively in due course.
 - b. At the beginning of the financial year the forecast surplus position was £13,000 and at month nine it was reported to Council it had increased to £65,000 due to some underspend in employment cost and departmental activity. The year-end position shows that the GOsC is on track to deliver a surplus of approximately £75,000 for the year. Management accounts showed that core activity had been delivered within budget especially within fitness to practice.
 - c. The audit close-out meeting with Grant Thornton has been scheduled for 8 June 2016. The auditors will prepare the key issues document for the Audit Committee and Council in preparation for the Annual Report and Accounts.

14. In discussion the following points were raised and responded to:
 - a. The Chair reflected that in spite of the pressures on placed on fitness to practise especially in with the continuing campaign of advertising complaints the Executive had managed to work within its budgetary limits. The Regulation team was commended on meeting and continuing to deal with current challenges. Members also commended the Executive on the surplus which had been reported.
 - b. In response to how the challenges for the coming financial year, 2016-17, would be managed members were informed that there would be no significant changes in financial management for the year but continuing scrutiny and maintenance of controls would remain a priority along with continuing Audit Committee and Council oversight.

Noted: Council noted the content of the Chief Executive’s Report.

Item 7: Fitness to Practise Report

15. The Head of Regulation introduced the Fitness to Practise Report which gave the quarterly update on the work of the Regulation Department and the GOsC’s

fitness to practise committees. The following areas of the report were highlighted:

- a. Section 32 cases: on 18 March 2016 a successful prosecution was brought against a former registrant for misuse of title. The court fined him £500 and he was ordered to pay £450 towards the GOsC's costs.
- b. Fitness to practise audits: the findings of the audit conducted by external legal auditors which took place in March and April 2016 are currently under review. The findings will help develop a number of activities so as to improve systems, reporting and the quality of work in this area.
- c. Witness Guidance: members were updated on developments on the Witness Guidance document. It was intended that the document, which has now been given 'Crystal Mark' approval, would not only assist members of the public but registrants also and would stand alongside the suite of guidance documents already available. The Witness Guidance would also be supported by an online virtual tour giving witnesses a visual guide as to how a hearing is organised. It was expected that the document would be finalised and be made available very soon after further editing. The Head of Regulation thanked the Policy and Communications team for all their advice, support and assistance in producing the document.
- d. Advertising complaints: members were informed that of the 231 complaints received 111 had been closed and nine referred to the Investigating Committee. The number awaiting screening had been reduced from 111 to 86 but a further 25 monthly complaints had been received in April and in May.
- e. The Chief Executive added that the advertising complaints were becoming increasingly difficult to resolve without the input of the ASA. The process in place worked well, although it was a little slow, but the Executive are looking to formalise a new closure mechanism to deal with complaints made without evidence from the ASA, and this would be presented to Council in due course.
- f. Judicial Reviews: members were informed that, as reported at the last meeting in February 2016, on 4 January 2016 the GOsC had been served with a number of claim forms stamped by the Queens Bench Division at the Royal Courts of Justice, concerning what appeared to be a claim for damages. This had been successfully resolved with the claims being struck out as being devoid of merit. No costs were incurred by the GOsC.

16. In discussion the following points were raised and responded to:

- a. Future fitness to practise reporting: members raised a concern about using median measurements for fitness to practise reporting and whether the data gave the clearest picture. It was explained that the reporting was based on

data required by the PSA and was comparative to other regulators. For the purposes of reporting to Council a revised and enhanced performance template would be presented in July which would give a clearer indication in reporting fitness to practise cases. Members were advised that the both the old and new versions would be presented at the next meeting so the transition in how data was presented and reported would be clear.

- b. Section 32: members asked about who Section 32 cases were brought against. It was explained that most Section 32 cases related to registrants who had failed to renew their registration but continued to use the title. Registrants who had been suspended as part of the fitness to practise process but were found to be continuing to practise might also be considered under Section 32. Members were also informed that before a Section 32 case was submitted to the Regulation team a number of checks were made to determine an individual's situation by the Registration team.
- c. Advertising complaints: members asked if the advertising complaints were sent directly to osteopaths as well as the GOsC. It was explained that the campaign focused solely on the GOsC even though the complainant had been advised that in the first instance they should contact the practitioner directly. It was suggested that the campaign might have a wider agenda, and it was agreed that complaints should not detract for other areas of fitness to practise and the GOsC's ability to meet its statutory duties. It was important that Council and the Executive should not lose sight of other important areas such as sexual boundaries and consent. It was confirmed that all complaints are risk assessed.
- d. The distinction between informal and formal complaints was clarified for members. It was explained that for the GOsC any enquiry received is regarded as an informal complaint. A formal complaint is one where there is sufficient information to make progress or where an individual has completed a complaint form. The Executive is aware the technology could be improved and is being reviewed.
- e. It was confirmed that the PSA are aware of the complaints campaign about advertising and further discussions with the PSA are planned.
- f. Members were advised that the cost of managing the advertising complaints had been included in the within the budget and there had also been an increase in staffing resources to manage the workload.
- g. Sexual boundary cases: members asked if there was progress on obtaining data relating to sexual boundary cases across the healthcare professions. It was explained that there was no clear information to date but there had been discussions with other regulators to conduct joint research to look at the issue. It was recognised there was little research or literature on boundaries, consent and communication and so proposals were in the early stages. A report would be brought to Council at a future meeting.

Noted: Council noted the content of the Fitness to Practise Report.

Item 8: Committee Structure and Appointments

17. The Chief Executive introduced the item which concerned the governance arrangements for policy development with the new Council.
18. It was explained that as part of the new approach to the GOsC's policy advisory functions it was proposed that the Education and Registration Standards Committee (ERSC) and the Osteopathic Practice Committee (OPC) would be combined to form a single policy-focused committee, the Policy Advisory Committee. This was in part due to a smaller membership of Council following its reconstitution, but also because the committees had not worked as optimally as had been envisaged.
19. It was emphasised that there would still be requirement for the GOsC to meet its statutory duty relating to the functions of the Education Committee as stated in the *Osteopaths Act* and this was highlighted in the Terms of Reference for the Policy Advisory Committee.
20. As part of the changes the introduction of four observers with speaking rights would be included in the structure of the Policy Advisory Committee. The organisations who the observers would represent would be:
 - The Institute of Osteopathy (iO)
 - Council of Osteopathic Education Institutions (COEI)
 - National Council for Osteopathic Research (NCOR)
 - The Osteopathic Alliance (OA)

To summarise, the Committee would comprise:

- Five members of Council – two who would be osteopaths and three lay members. One of the lay members to be appointed by Council as Chair of the Committee.
 - Four members who are not members of Council.
 - One co-opted member of the OPC.
 - Four speaking observers.
21. The Chair added that with regards to the appointment of the Chair of the statutory Education Committee, it was her duty to make the nomination to Council for their agreement.
 22. The new Committee was viewed as an opportunity to broaden discussions and early policy input. Members were assured that areas reserved for private discussion would remain and mainly relating to education matters, recognition or withdrawal of qualifications, appointment and performance management of education visitors, and requirements for provision of information about the

institutions. The four observers would not be entitled to participate in the private sessions of the meeting.

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

- a. Members endorsed the recommendations but asked, in relation to the Terms of Reference, whether the Executive were satisfied with the expertise of the suggested appointees to the Committee. It was agreed this was an important point and when considering the competencies of the independent members for appointment and ensuring appropriate resourcing this would be discussed by the Remuneration and Appointments Committee. The Chief Executive added that ultimately it would be the Committee's decision to seek additional expertise if it was required but the current members had been appointed for their education expertise. With their terms ending in March 2017 the remit for the new appointments could be made broader.
- b. It was explained that the observers with speaking rights would sit with the Committee and contribute to discussion. It was suggested that more communication about the remit of the Committee would be useful for the profession's buy-in.
- c. Members were assured that due consideration would be given to the work programme and the agenda for the Committee to ensure appropriate time was allowed for discussion at the meetings. Although the Committee's agenda was considered manageable, it would be kept under review.
- d. The Executive is aware of the capacity issues for participating organisations and it was recognised there would need to be some consideration to ensure appropriate support for the individuals participating as observers. This would be dependent on the frequency of attendance by individuals and the agenda planning. It was agreed that consistency and continuity in attendance would be an advantage for the individual observers. The organisations which had been given speaking rights would need to work with their constituencies to ensure that participation would be managed effectively.
- e. It was not envisaged that conflicts of interest would be an issue as the observers would not be party to discussions on items on the private agenda. Members also raised some concern about individuals or organisations attending for their own interest, but members were advised that it would be for the observers and the GOsC to make the process work. The Chair added that the GOsC had a good track record for innovation and it was for the profession to see this development as an opportunity to move forward. The new Committee was about the evolution of the new Council.

Council agreed and noted the following recommendations:

- a. **Council agreed to establish a new Policy Advisory Committee with the terms of reference as set out at Annex B.**

- b. **Council noted the appointment of members of the GOsC's committees for 2016-17 as set out at Annex C.**
- c. **Council agreed the appointment of Dr Bill Gunnyeon as Chair of the Policy Advisory Committee.**
- d. **Council agreed the co-option of Manoj Mehta to the Policy Advisory Committee from 1 April 2016 to 31 March 2017.**

Item 9: Communication and Engagement Strategy

24. The Head of Policy and Communications introduced the item which concerned the proposal for a new Communications and Engagement Strategy to support the effective delivery of the GOsC Corporate Strategy 2016-19. The Chief Executive gave a short presentation showing how the strategy linked to the three strategic objectives and goals of the [Corporate Strategy 2016-19](#):
- **Strategic objective 1:** to promote public and patient safety through patient-centred, proportionate, targeted and effective regulatory activity
 - **Strategic objective 2:** to encourage and facilitate continuous improvement in the quality of osteopathic healthcare
 - **Strategic objective 3:** to use our resources efficiently and effectively, while adapting and responding to change in the external environment.
25. The Head of Policy and Communication then highlighted the following:
- a. There would be an emphasis on partnership working. The GOsC would keep monitoring the profession and stakeholders, to ensure confidence in the organisation is maintained.
 - b. It had been shown that osteopaths working in isolation were an issue, therefore there would be an emphasis in supporting learning communities with the profession, and also there would be continuing engagement with the public which remained crucial.
 - c. There would be a focus on finding new, innovative and cost effective ways to engage with the public, stakeholders and registrants.
 - d. The strategy is a working document. It is a flexible and adaptable so as to meet future challenges. The strategy would be consistently monitored to respond to a changing environment.
26. In discussion the following points were raised and responded to:
- a. Members agreed the Communication and Engagement Strategy was impressive but asked if it was deliverable and would be kept within budget. It was explained that the strategy was part of the Business Plan and had been budgeted for accordingly. The Head of Registration and Resources

added that for larger projects funds had been allocated from reserves which would support the strategy and other projects such as the CPD scheme. It was also added that communications played a critical role in the GOsC with at least 20% of the budget supporting communications initiatives. It was stressed that good communications were vital in influencing and supporting change and therefore was well resourced and also cost effective.

- b. Members asked what was planned to help develop the wider osteopathic community. It was explained that a community model such as the Regional Groups had been beneficial to the profession and was still evolving. Regional groups and other similar forums were reaching out to sole practitioners to build the community by sharing experiences and learning.
- c. In response to a question on evaluation members were advised that regular reviews and monitoring would be conducted to evaluate progress through sector surveys and feedback.

Agreed: Council agreed the Communication and Engagement Strategy 2016-19 as set out in the annex.

Item 10: Evaluation of 2016-19 Corporate Strategy

27. The Chief Executive introduced the item which sought agreement from Council on proposals for evaluation measures in the period of the 2016-19 Corporate Strategy.
28. It was explained that the previous evaluation measures used for the 2013-16 Corporate Plan used a balanced scorecard approach. In considering the new strategy a number of methods to measure the GOsC's effectiveness as a regulator would be balanced across three main areas:
 - Ensuring that our statutory duties are met and that we have the confidence of the public and registrants for what we do
 - Providing demonstrable public value from the outcomes of our work, both internal activity and that delivered in partnership with others
 - Operating effectively as an organisation, including making effective use of resources to achieve our objectives.
29. The Audit Committee were supportive of the approach suggesting there should be a limit on the number of measures and what further measures could be used to judge efficiency and effectiveness.
30. Some of the measures listed are already made available to the PSA but a new area for evaluation would be measuring feedback from stakeholders which had not previously been done. Other areas highlighted for 2016-19 were research measuring the impact of regulatory interventions through patient outcomes and also the development of quality measures to demonstrate efficiency.

31. In summary the Chief Executive said that the GOsC was ambitious and good at challenging itself in this area and, as a small organisation, needs to find a balance in what is achievable. This was work in progress and should be seen as a reflective exercise for Council.
32. In discussion the following points were raised and responded to:
- a. Members asked about the periodicity of the stakeholder surveys, would conducting these annually be meaningful? It was explained that there were a number of areas for periodic evaluation. It would be the intention to report on evaluation measures annually to Council. Also there are areas which are already reported to the PSA as part of the Performance Review. There would be some areas that would not be reported annually such as the registrants' survey but some consideration would need to be given to the periodicity of a reporting. The number of GOsC stakeholders who would be targeted in the survey was relatively small and therefore it would be helpful to conduct on annual basis to ensure GOsC was performing. Feedback from stakeholders' on the proposal would be explored and taken into account.
 - b. Members asked how the GOsC would determine if the Corporate Strategy is on track and whether there were specific milestones to check how the GOsC was progressing against the strategy. It was explained that the proposed evaluation measurements are for the period of the Corporate Strategy. The Business Plan was the tool which would be used to monitor progress against specific projects but it was agreed that there should be a way to reflect and evaluate progress during the course of the Corporate Strategy.
 - c. Members also asked if there was a way to capture how the GOsC's communications were influencing and progressing in supporting the work of the wider osteopathic community. Members were informed that it was hoped this data that might be captured through the proposed stakeholder survey.
 - d. It was suggested that the CPD Scheme might be an opportunity to collect data on what registrants are doing to meet requirements as was done with the revalidation pilot. The Chief Executive explained that an ongoing project, rolling over from the 2015-16 Business Plan, to develop a study on the state of CPD and understand what registrants were currently doing, then moving forward with the implementation of the new CPD scheme, see whether the introduction of the scheme changes the nature of registrants' CPD.
 - e. It was agreed that PSA learning points would be included at 1.4 of the proposed evaluation measures.
 - f. So as not to be viewed as underperforming, it was suggested that the wording at 1.3 needed to be clear in what was being conveyed.
 - g. In response to a comment relating to 3.1 the Chief Executive explained the PSA collects quarterly data from the GOsC and they would be publishing

comparative data in eight key areas, and that the wording at 3.1 down to 'number of successful judicial review applicants' were those of the PSA.

- h. Members were advised that the evaluation report would be presented to Council on an annual basis.

Agreed: Council agreed the approach to evaluation of the 2016-19 Corporate Strategy.

Item 11: Principal Accounting Policies

33. The Head of Registration and Resources introduced the item which concerned how the GOsC financial statements for financial year 2015-16 would be prepared in accordance with Financial Reporting Standard 102 (FRS102).
34. As part of the preparation it was appropriate for Council to agree the principal accounting policies to be reported in the 2015-16 Annual Report and Accounts. The policies would be kept under review by the Audit Committee on an annual basis and reported to Council.
35. Members were advised that the policies had been reviewed at the meeting of the Audit Committee, 23 March 2016, which was supportive of the policy. Some minor changes would be made:
- to amend the wording relating to investments;
 - to remove the description relating to JANE (Joint Arrangement which is Not an Entity) from future reports as this no longer applied as National Council for Osteopathic Research (NCOR) which now holds charitable status and no longer entirely funded by the GOsC.
36. In discussion the following points were made and responded to:
- a. Members asked about the staff pension scheme and if this was included in the accounts. It was explained that the staff pension scheme was an independent group pension plan with no liability for Council.
- b. Members requested clarification under the policy section 'Going Concern' in reference to deficit at 31 March 2105. It was explained that the deficit position related to the 2014-15 financial year and the increased expenditure in fitness to practise costs. The surplus position is for the current financial year. It was important that the principal accounting policy reflects this and for Council to be comfortable that it has the correct financial structure in place to ensure that the business is seen as a going concern.

Noted: Council noted the mechanism for keeping the principal accounting policies under review.

Agreed: Council agreed the principal accounting policies for publication in the Annual Report and Accounts subject to the minor amendments as outlined in the table at paragraph 10 of the report.

Item 12: Review of allowances

37. The Chief Executive introduced the item which concerned the review of allowances and expenses for non-executives. The following were highlighted:

- a. It was explained that unlike the Investigating Committee (IC) the Professional Conduct Committee/Health Committee (PCC/HC) did not receive a reading fee as the reading of their bundles is done on the day of a hearing. With the introduction of electronic bundles in advance, it was considered appropriate by the Remuneration and Appointments Committee to introduce a £75 reading fee for the PCC/HC payable per hearing. Because the bundles can vary widely in their content and in the time to read the Head of Regulation would review this on a case by case basis.
- b. The cancellation fee is paid where a hearing runs short or is cancelled. It was found that in comparison to other regulators the GOsC's cancellation fee was very generous and it was therefore recommended it should be brought into line with others in the sector. Members were assured that the GOsC wherever possible would seek to avoid the cancellation of a hearing so as to minimise inconvenience to all parties and costs.
- c. To bring the current expenses policy into line with other regulators, the claim for up to £30 for an evening meal would be amended to exclude alcohol. It was seen as a sensible revision and a reflection of best practice.

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

- a. Members sought clarification of how the Cancellation Policy would work. It was explained that the policy would be in two parts. Prior to a hearing a half fee payment would be made where there was 0-5 days notice. A hearing cancelled after it had commenced the full fee would be paid 0-1 days noticed and then half fee for 2-5 days' notice.
- b. Members were advised that costs could not be recovered where parties had defaulted unless the case was one which had been taken to High Court.

Council agreed:

- a. To introduce a reading fee for the PCC/HC hearings to be paid at the discretion of the Head of Regulation.**
- b. To amend the cancellation fee policy as set out at paragraph 8 of the report.**

- c. To amend the subsistence policy to exclude the purchase of alcoholic drinks.**

Item 13: Investment Review

39. The Head of Registration and Resources introduced the item which concerned the review of the current GOsC investment strategy which has been in place for five years. The review was summarised as follows:
- a. The GOsC invested £500k in a stock market portfolio and £500k in a 120 day bond during 2011. At the time of the Council agreed that the investment should be monitored on a regular basis and reviewed after five years.
 - b. The investments were made to protect the cash asset and at 31 March 2016 the market value of the portfolio stood at £569k. The total value of the bond for the same period stood at £559K. This meant the investment had achieved what was intended when it had been set up.
 - c. A strong reserve position has been built up so that the GOsC can withstand unforeseen events such as the deficit in 2014-15.
 - d. The average cash position over the last two years has been approximately £430k and as at the end of March 2016 the GOsC had not had to draw down funds from investments, never had to use any overdraft facility nor did it have any outstanding mortgage debt.
 - e. The Chair added that the GOsC investments had generated considerable debate at previous meetings of Council especially in relation to ethical investment and also if the fund was the correct approach for the GOsC. The paper was an opportunity for Council to explore and consider the shape of the decision paper to be presented at the July 2016 meeting.
40. In discussion the following points were raised and responded to:
- a. It was suggested by members that it was not for Council to consider ethical investments except where they might undermine the reputation of the GOsC. Members also considered that the performance of the investment demonstrated that there was no need for any immediate concern and the overriding concern would be to protect the asset value.
 - b. Members wondered whether the possibility of changes to legislation should be taken into consideration in relation to the period of time set for investments. Members also mentioned the implications for GOsC's investments if the organisation were successful in its application for charitable status and how this might impact on future investments. Members were reminded that in considering the GOsC proposals to seek charitable status the question of investments had been raised and discussed.

- c. The Chair emphasised that this was an important issue and asked that the Executive thoroughly explore the considerations to ensure that Council can make an informed decision when the item is returned to Council in July.

Council noted the following:

- a. **The stock-market investment and its performance as at 31 March 2016.**
- b. **The 120-day bond investment and its performance as at 31 March 2016.**
- c. **That GOsC holds cash reserves in its current and deposit account to mitigate against unforeseen events.**
- d. **The steps being undertaken by the Executive in readiness for a decision paper being presented to Council in July 2016.**
- e. **Feedback would be provided by Council to the Executive to inform the July 2016 Council decision paper.**

Item 14: CPD Implementation Groups' Terms of Reference

- 41. The Head of Professional Standards gave a short presentation setting out the purpose of the CPD project, charting its development, its links with the Communications and Engagement Strategy and the next steps towards the scheme's implementation.
- 42. The Head of Professional Standards then introduced the item which set out the proposed governance structures for the implementation of the CPD scheme. Members were informed that the purpose of the governance structure was to ensure that the CPD scheme agreed by Council would be implemented efficiently and effectively and also build a community of osteopaths to support each other, promote patient safety and enhance the quality care avoiding unintended consequences. It was stated that the structure needed to be simple, supportive and also flexible.
- 43. It was also noted that where reference was made to the Delivery Board this should be read as Partnership Board.
- 44. The purpose of the governance structure and its terms of reference had been considered at the meeting of the Osteopathic Practice Committee (OPC) on 3 March 2016 and the comments from that meeting had been incorporated. It was noted that the Partnership Board of stakeholders would now report to the Senior Management Task group who would in turn report to the Council.
- 45. In discussion the following points were raised and responded to:

- a. Members commented that the terms of reference should be explicit about the management of the budget by SMT. It was also suggested that it would be helpful to identify the decision criteria beforehand. It was agreed that budget management should be made explicit in the terms of reference. In relation to the decision criteria, Council's decision was to implement the full model but a phased approach to implementation might be needed. The criteria would not necessarily relate to the model as a whole but relate to the phased approach. It was agreed that the timing of phase 1 and phase 2 would be clarified.
- b. Members raised some concern that reporting lines were not entirely clear and might lead to conflicts in the advice from the CPD reporting groups to SMT. The Chair explained the concerns which had been raised at the meeting of the OPC. To resolve the issue, a reporting line would be inserted indicating cross-referencing between the CPD Partnership Board and the CPD Reference Group, both of which would report to the SMT CPD Task Group.
- c. Members asked if the evaluation and impact assessment of the project would be a one-off or a continuous process. It was also asked how decision making would be managed between meetings of the Policy Advisory Committee and Council. It was envisaged that evaluation and impact assessment, and the financial and risk reporting would be ongoing processes which would be reported to every meeting. In terms of the timing of reporting to Council this still needed to be reviewed.
- d. Members asked what would be gained in the way of information from the early adopters. It was explained that the specification for this needed to be developed but further discussion was required by SMT and the Partnership Board on this. The specification would need to go through a number of processes before being taken to Council but the key was to ensure testing of the final resources before going live.
- e. Members asked if there was a risk that those who might be speaking observers on the Policy Advisory Committee could be conflicted if they sit on the Partnership Board. Members were advised that participants attending the PAC would not have voting rights and participation was about having input in decisions to be made by Council. Involvement of stakeholders in PAC and the CPD scheme was a way of broadening out the base of participation and engagement. It was added that the CPD project was too big to be undertaken by the GOsC alone and needs the buy-in of the stakeholders to implement.

Council agreed:

- a. The terms of reference for the Senior Management Team Task Group.**
- b. The terms of reference for the CPD Partnership Board.**

Council noted:

- c. The table summarising advice and decision making within the project work streams.**
- d. The flowchart describing the CPD Project Governance Structure.**

Item 15: Registration Assessments – alignment with the European Directive on the Recognition of Professional Qualifications

- 46. The Head of Professional Standards introduced the item which concerned GOsC's compliance with the EU Directive 2005/36/EU on the recognition of professional qualifications as amended by EU Directive 2013/55/EU. The GOsC guidance has been reviewed and the process made more streamlined. Whereas previously only the qualifications of an applicant had been reviewed the process now included qualifications, education and work experience, and CPD which could contribute to a stage 1 assessment.
- 47. There has been a consultation on the process and feedback had been requested from applicants who had undergone the process and applicants from other regulators. All measures to ensure compliance with the Directive had been undertaken.
- 48. In discussion the following points were raised and responded to:
 - a. Members asked about the period of adaptation and whether a registrant who fails the aptitude test can go on an adaptation period. It was explained that applicants tend to choose to take an aptitude test because it's quicker and easier to arrange. If an applicant chose the period of adaptation they would need to go to an OEI where a bespoke programme would be developed for them.
 - b. In relation to the forms shown at annexes c and f, members asked that where there was reference to 'nationality' the word 'certified' should be included on the list of required documentation.
 - c. Members asked what the risks were if the GOsC did not comply with the Directive. Members were advised infraction proceedings might be taken but the numbers of applicants the GOsC managed were very small and therefore this was unlikely to happen. If there was an issue it could be dealt with quickly as the communication with applicants was very good. It was also pointed out that the risk of someone getting on to the register who shouldn't, was unlikely as the registration process was rigorous. The risk to the GOsC was that the process was open to challenge where, if someone was rejected, they could appeal the decision. It was confirmed that the appeal would go to the Registration Appeals Committee.

- d. Members asked if any reciprocal arrangements had been established with other European countries. It was explained that this process had not begun as yet but discussions were planned with Portugal and France.

Agreed: Council agreed the revised registration assessment process for applicants with EU rights.

Item 16: Registration Report

49. The Head of Registration and Resources introduced the item which provided Council with an update of registration activity covering the six-month period from 1 October 2015 to 31 March 2016. The following areas were highlighted:
- a. The service level agreement for the registration of new applicants from receipt to completion of application continued to be met. This is five working days for UK applicants and 90 working days for overseas applicants.
 - b. There had been a significant rise in the number of online applications which has seen an increase from 30% to 70% of renewals being completed on-line. It was also reported that introducing a system allowing registrants to self-declare compliance in holding professional indemnity insurance electronically would be underpinned by an audit later in the year.
 - c. Feedback from the new registrants' survey of 2015 had proved positive and had helped to inform improvements of the registration process. Members were advised that the reports are available on the GOsC website.
 - d. There had been a number of inter-regulatory meetings which have been positive. The GOC and the GMC were interested in the GOsC approach to Enhanced Checks for Regulated Activity and the HCPC had met with the Head of Registration and Resources to discuss the GOsC approach to for registrants who wish to return to the register after a period out of practice.
50. In discussion the following points were raised and responded to:
- a. Members asked what the reasons were for not renewing online before the current tool had been introduced. It was explained that the previous tool had not been user-friendly for registrants or for staff.
 - b. Members were advised that the only cost incurred in complying with the Internal Market Information (IMI) system alerts revised by EU Directive 2013/55/EU was that of staff time. There was no financial cost to the GOsC in complying with this aspect of the Directive.
 - c. Members asked for more information about registrants who returned to the register. It was explained that there were different reasons for a registrant to leave the register: some voluntary for personal reasons; some removed for non-compliance of CPD; and others for non-payment of the fee. All

registrants wishing to return to the register would need to go through the same process to register: by completing an application form; providing references both character and health; obtaining an enhanced check of regulated activity and providing evidence of CPD. If a registrant was off the register for two years or more, they would need to go through the return to practice process, involving completion of a self-reflecting questionnaire and also undertaking an assessment conducted by two experienced osteopaths from a pool of assessors used for this purpose.

Noted: Council noted the content of the report.

Item 17: Equality and Diversity Annual Report

51. The Chief Executive introduced the item which reported on the GOsC's work relating to equality and diversity in 2015-16.
52. Members were informed that equality and diversity training for members would take place later in the year and the approach used would be from a behavioural perspective which had been very useful in previous training.
53. In discussion the following points were raised and responded to:
 - a. Members asked if equality and diversity details are collected from registrants. It was explained that when individuals join the register this information is collected. It was added that information in this area across the register is patchy as historically the same data has not always been collected and providing the information is optional. An exercise has recently been completed to look at factors relating to the fitness to practise process and it has been noted there is insufficient data relating to equality and diversity and this is being rectified.
 - b. It was also noted that issues of diversity in appointments has been a constant challenge for the Remuneration and Appointments Committee and it remains a challenge to find innovative ways of addressing the issue.

Noted: Council noted the content of the report.

Item 18: Minutes of the Education and Registration Standards Committee (ERSC) – 3 March 2016

54. Members of the former Education and Registration Standards Committee had no additional comments relating to the minutes of the meeting.

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

Item 19: Minutes of the Osteopathic Practice Committee (OPC) – 3 March 2016

55. Members asked for clarification relating to case examiners. It was explained that due to legislation all cases are required to go to the Investigating Committee (IC). As the GOsC would be unlikely to get a section 60 order to introduce case examiners, to improve the efficiency of the fitness to practise process, a pilot would be conducted to increase the use of screeners and the reports they produce for the IC. This would mean the IC could review more cases and potentially improve its efficiency.

Noted: Council noted the minutes of the Osteopathic Practice Committee.

Item 20: Minutes of the Remuneration and Appointments Committee (RaAC) – 17 March 2016

56. The Chair of the Remuneration and Appointments Committee had no additional comments to those already discussed earlier in the meeting.

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

Item 21: Notes from the meeting Audit Committee (AC) – 23 March 2016

57. The Chair explained that the meeting of the Audit Committee had been inquorate as apologies had been received from the two Council members of the Committee.

58. Osteopathy House revaluation: members asked if the AC would review the questions raised at the meeting of Council, February 2016, with regards to the revaluation discussion. The Chief Executive responded that the AC had received the same information as Council and were happy with the approach which the Executive had taken. It was also advised that the proper procedures had been followed relating to the building and that there would be an enhanced disclosure in the Annual Report and Accounts.

59. GOsC charitable status: members were informed that there had been no further progress in the GOsC seeking charitable status.

Noted: Council noted the minutes of the Audit Committee.

Any other business

60. There was no other business.

Date of the next meeting: Tuesday 12 July 2016 at 10.00