



Council
17 July 2018
Committee Annual Reports 2017-18

Classification	Public
Purpose	For noting
Issue	Each Committee is required to report annually on its work to Council.
Recommendation	To note the Annual Reports of: a. Audit Committee b. Policy Advisory Committee c. Remuneration and Appointments Committee
Financial and resourcing implications	None
Equality and diversity implications	None
Communications implications	None
Annex	A. Annual Report of the Audit Committee 2017-18 B. Annual Report of the Policy Advisory Committee 2017-18 C. Annual Report of the Remuneration and Appointments Committee 2017-18
Author	Tim Walker

Annual Report of the Audit Committee 2017-18

Audit Committee Annual Report (1 April 2017 – 31 March 2018)

1. The Audit Committee met on three occasions in the year in June 2017, October 2017 and March 2018.
2. The meeting of Audit Committee in March 2018 was inquorate and absent members provided their comments to the Chair prior to the meeting.
3. The Audit Committee terms of referenced are found at the end of this report.

Financial Audit, auditor evaluation, Annual Report

4. During the year under report the Audit Committee considered the Audit Findings Document for financial year 2016-17. The document set out the key issues affecting the financial results of the GOsC including the preparation of the financial statements. The Committee agreed it was content to note the document and that it should go forward to the Council with the Annual Report and Accounts.
5. The Committee considered, for the fourth time, an auditor evaluation framework for evaluating the performance of the external financial auditors. Audit Committee met with the external auditors in private and questioned the Executive and the external auditors before noting the evaluation document.
6. The Committee received the external financial audit plan for 2017-18 which was agreed outside of the March meeting via email, due to the inquorate meeting.

Statement of internal financial controls

7. Audit Committee received the statement of internal financial controls for annual review. The Audit Committee found the statement useful and noted the content.

Review of principal accounting policies

8. Audit Committee received the principal accounting policies for annual review and suggested amendments to enhance its clarity.

Risk Register

9. At each meeting the Audit Committee reviewed the high level Risk Register which included a report presented by the Chief Executive and Registrar highlighting any movements in the risk level.
10. The Committee has continued to meet with each member of the Senior Management Team throughout the year as part of the regular discussion about the Risk Register, and associated audit activity.

General Data Protection Regulation

11. Throughout the year, the Committee received updates on the proposed approach to updating the GOsC Information Governance Framework to meet the new requirements of the General Data Protection Regulation (GDPR).

Budget Strategy 2018-19

12. The Committee reviewed the 2018-19 budget strategy paper which was approved by Council.

Performance Measurement

13. The Committee received the fifth completed performance measurement matrix and offered comments about how it may be improved for the future.

Audit Committee performance evaluation

14. The Committee completed a self-assessment of its performance which led to several changes throughout the year that included going paperless, shorter papers that still conveyed the key messages of the Executive and the re-formatting of the risk register.

PSA Performance Review and consultation

15. The Audit Committee discussed the PSA Performance Report for the period covering 2016-17. The Committee noted that the GOsC had met all standards for the seventh year in succession.

Internal audit

16. The Committee received internal audit reports which provided updates of progress against the planned internal audit options. The completed internal audits were (1) IT audit, (2) Health and safety audit and (3) PCC audit of 'no case to answer'. The reports included work carried out by GOsC staff as well as work carried out by Bevan Brittan LLP. The Committee received monitoring reports throughout the year on the actions arising from the IT audit.

Monitoring report

17. The Committee received a report at each meeting from the Executive on any fraud notifications, critical incidents, data breaches and corporate complaints. In the year under report the Executive reported to the Committee two corporate complaints, eight data breaches (of varying severity), no critical incidents and no incidents of fraud or attempted fraud.

Forward work plan

18. At each meeting, the Committee received a report from the Executive which set out what items were likely to appear on future Audit Committee agendas. Audit Committee was able to comment upon the proposed future agendas.

Membership

19. During the period 2017-2018 the Audit Committee membership comprised:

Name	Member details	Dates of membership	Meetings attended
Chris Shapcott (Chair)	External lay member	All year	3/3
Martin Owen	External lay member	All year	2/3
Denis Shaughnessy	Council lay member	All year	3/3
Haidar Ramadan	Council registrant member	All year	2/3

Cost of the Audit Committee

20. It is estimated that the cost of the Audit Committee and its related activities, excluding staff time, is approximately £20k. This is calculated as follows:

Activity	Cost £
Committee members: fees and expenses	3,037
External audit fees	17,280
Total	20,317

Opinion of the Audit Committee

21. It is the opinion of the Audit Committee that its work during the past year is in line with the purpose and the Terms of Reference of the Committee. The Committee also believes Council can take assurance from this that the organisation has proper and appropriate systems in place to enable it to discharge its statutory responsibilities. The work reviewed by the Committee demonstrates the Executive has a mature approach to financial and non-financial control frameworks and a willingness to implement improvements where identified.
22. Further, Council can take assurance that the controls upon which the organisation relies to manage risk are suitably designed, consistently applied and proportionate.

23. During the course of the year, the Committee has undertaken a wide range of activity as described in the report above. It is the view of the Committee that its approach has been supportive to the Executive while retaining the necessary rigour and challenge. In particular, we would draw Council's attention to our work around the IT audit and the continued scrutiny of risk.

Annual Report of the Policy Advisory Committee 2017-18*Introduction*

1. The role of the Policy Advisory Committee is to contribute to the development of Council policy across the breadth of its work including in education, professional standards, registration and fitness to practise.
2. The Committee performs the role of the statutory Education Committee under the Osteopaths Act 1993. The Committee has a 'general duty of promoting high standards of education and training in osteopathy and keeping provision made for that training under review'. It also has a key role to give advice to the Council about educational matters including the recognition and withdrawal of 'recognised qualifications' (see Sections 11 to 16 of the Osteopaths Act 1993).
3. The terms of reference of the Committee can be found at the end of the report.

Membership

4. The Committee consists of five members of Council and four external appointed members. The members of the Committee are listed at paragraph 43 below.
5. In addition, the member organisations of the Osteopathic Development Group are invited to send an observer with speaking rights to each meeting. Observers may not take part in any part of the meeting where the business is that reserved to the Statutory Education Committee.
6. The Policy Advisory Committee met three times during the period under review – in June 2017, October 2017, and March 2018. This report summarises the work of the Committee. Full minutes of all the meetings have already been reported to Council.

Quality assurance of 'recognised qualifications'

7. During the course of the year, as part of our active approach to advising the Council about the recognition of qualifications, qualification change notifications and ensuring standards, the Committee considered, in relation to all osteopathic educational institutions (OEIs) the following:

Activity	June 2017	October 2017	March 2018
Agreement to RQ specifications (including new RQs, renewal of RQs and monitoring visits)		Two OEIs	One OEI

Activity	June 2017	October 2017	March 2018
Consideration of Education Visitor RQ report (including new RQs, renewal of RQs and monitoring visits)		One OEI	One OEI
RQ change notifications and consideration of reports and evidence submitted in relation to general and specific conditions		Seven OEIs	One OEI
Consideration of annual report analysis (including external examiner reports and internal annual monitoring reports and information about student fitness to practise.)	Seven OEIs		Nine OEIs
Course closure reports		One OEI	

Course closure

8. The Committee noted the final report on the course closure for Leeds Beckett University at the meeting in October 2017. It was reported that all remaining students had progressed and completed requirements for their graduation and it was confirmed that fourteen students had graduated successfully. There were no further issues to report and the course is now closed.
9. The Committee's appreciation for the work done by the team at Leeds Beckett University was noted.

Change of Name

10. The Committee were informed of two name changes to institutions at the meeting in October:
 - a. The British School of Osteopathy had achieved university status and would be known as the University College of Osteopathy.
 - b. The Surrey Institute of Osteopathic Medicine (SIOM) would be known as NESCOL.

Quality Assurance Review

11. Detailed discussions on the review of quality assurance took place in October 2017 and March 2018. It was recognised that the quality assurance system had reached a more mature level supporting the growth of the quality management systems of the education institutions.
12. Key changes presented to the Committee were:
 - The removal of expiry dates from Recognised Qualifications to allow more flexibility when scheduling Visit dates
 - The publication of conditions or requirements
 - Exploring a closer relationship between the annual reporting process and the five yearly visit
 - The management of concerns policy
 - Exploring good practice
 - A more risk based approach to quality assurance.
13. It was agreed that taking an innovative approach to quality assurance would require further consideration but this would not be within the timescale of the current QA contract and also not until the challenges of the external quality assurance environment had settled.
14. The QA consultation outcomes would clarify the position for making the proposed changes to the way quality assurance is conducted.
15. The QA procurement process and the indicative timetable would be further considered before a proposal was put before Council.

Osteopathic Practice Standards (OPS) Review

16. The Committee was given detailed reports in June, October 2017 and March 2018, on the progress of the revisions to the current OPS published in 2012.
17. Following the consultation process which took place between August and October 2017 the final draft of the OPS was submitted to the PAC at its March meeting and it was agreed that the updated document should be recommended to Council for final approval. The timetable for publication of the OPS remains on track for September 2018 with implementation in September 2019.
18. It was noted that the work of the Stakeholders Reference Group (SRG) had been invaluable in ensuring that the work undertaken in updating the Standards had been a collaborative process which, in particular, is reflected in the consensus reached in relation to standards B1 – Philosophy and principles, and C6 – Promotion of Public Health.

Continuing Professional Development (CPD)

19. The Committee was given detailed progress reports on the new CPD scheme at the meetings in June, October 2017 and March 2018. The scheme, designed to focus on themes of engagement, support and community, with significant importance placed on peer review, continues to be on track and is scheduled to come into effect in the autumn of 2018.
20. A presentation on the CPD evaluation survey and the communication implications was given at the meeting in March. The survey analysis demonstrated a raised awareness of the scheme amongst respondents although the level of preparedness amongst registrants varied.
21. During in-depth discussions the Committee concerns were addressed about registrants who may not be engaging with or be fully aware of the new CPD scheme. Concerns were also addressed about the impact of both the CPD Scheme and the publication of the updated OPS being launched at the same time and the communications implications. It was agreed that for the presentation of the CPD update at the meeting of Council there should be more detail on the communications aspect of the report.

Amendments to the CPD Rules

22. The Committee received updates on the progress of changes to the legislation required for the new CPD scheme to be implemented. The changes would require approval by Privy Council and be laid before Parliament.

Professional Standards Projects: The Literature Review and Values Standards and regulation in context

23. At the meeting in October 2017 the Committee received updates on the boundaries and the values projects.
24. The Committee was pleased that the research into boundaries and the literature review were underway but raised questions about the values project, its governance, direction and purpose. It was agreed that there had been positive outcomes from the project such as its input to the revised OPS but it was agreed it would be useful for Council to review the project at its meeting in January 2018.
25. It was also agreed that the full costs of the GOsC's contribution and partner contributions to the projects be made clear for future reference.

Registration assessment review

26. The Committee received updates on the registration assessment review in October 2017 and March 2018.

Registration Assessment review: Consultation on changes to fees charged to international applicants and mutual recognition

27. The Committee noted the report and acknowledged that qualifications obtained by international applicants had not been quality assured by GOsC and that it was therefore necessary to test an applicant's competency before admission to the Register. It was noted that the cost of processing international applications did not reflect the work involved and, although the purpose of the change to the fees was to recoup this cost, it was the statutory duty of the GOsC to consult with its constituents, including stakeholders and the PSA, on this issue.

Mutual Recognition

28. The Committee were asked to consider the following questions in the discussion on mutual recognition and the registration assessment process.
- Were there any gaps in the background research so far?
 - Were there any examples of mutual or registration assessment in other sectors that should be considered?
 - What questions should be addressed in order to create a more efficient and effective registration assessment process?
29. The review would test whether the system in place was the correct approach and to streamline the registration process. The developments for training and supporting registration assessors would include e-learning tools and face to face meeting which would have a positive impact on the assessor team.
30. The importance of mutual recognition was recognised and a move for stronger collaboration with non-UK organisations was supported but the importance of English language proficiency was also stressed. It was also recognised that mutual recognition was especially beneficial to those countries which have robust education and registration systems.
31. It was also noted that the introduction of the revised OPS in 2019 and the potential implications of leaving the European Union were areas which would require consideration when reviewing registration assessments.

National Council of Osteopathic Research (NCOR) Complaints Data analysis 2016-17

32. The Committee considered the independent analysis of data collected annually between 2013 and 2016 by the GOsC and providers of professional indemnity insurance.
33. Issues highlighted from the data collected were:

- the decrease in complaints about sexual impropriety
 - the rise in number of osteopaths failing to maintain professional indemnity insurance
 - the continuing dominance of issues relating to communication and consent.
34. It was noted that the data from the NCOR report would be disseminated to the wider osteopathic community and that the data would also be a valuable tool in the development of presentations and resources for the introduction of the new CPD scheme.

Hearings and Sanctions Guidance

35. The Committee considered the draft Hearings and Sanctions Guidance at its meeting in June 2017 for recommendation to Council for consultation. The guidance booklets had been written specifically for registrants about the complaints and hearings process and the changes proposed would enhance transparency and consistency in the decision making of the Professional Conduct Committee (PCC) whilst ensuring sanctions by the Committee was both targeted and proportionate.
36. The pre-consultation engagement included input from the GOsC Fitness to Practise Forum which includes PCC Chairs and members, and the GOsC Legal Assessors. Feedback from the pre-consultation was used to inform the guidance.
37. The Committee welcomed the guidance commenting on its transparency and accessibility.

Draft Standard Case Management Directions

38. The Committee considered the draft Standard Case Management Directions which was proposed at the meeting in October 2017 and would have a significant impact on the management and progress of fitness to practise cases if implemented by:
- Engendering confidence that the regulator is acting fairly and fulfilling its disclosure obligations
 - Ensuring fairness by ensuring that unusual points of law or fact are identified in good time so that full and considered argument can be advanced
 - Assisting in the decision making of panels by identifying issues to reduce the considerable stress of litigation upon all the participants (respondents, witnesses, lawyers and panellists)
 - Avoiding the calling of witnesses whose evidence is not challenged
 - Reducing the risk of last minute adjournments arising out of the late disclosure of evidence
 - Reducing the risk of wasting costs by listing cases for longer than is needed
 - Reducing the risk of cases going part heard.

39. Discussions had taken place with the defence organisations to ensure external input from interested parties and help to achieve greater compliance to shape the practice note and also encourage buy-in to the initiative.
40. The Committee welcomed the introduction of the Standard Case Management Directions and it was confirmed that all interested parties would be expected to follow the guidance and would be held to account if they did not.

Investigating Committee (IC) Guidance

41. At the meeting in October 2017, the Committee was invited to consider the draft Investigating Committee Decision Making Guidance which had been updated and modified to enable the IC to make consistent, fair and proportionate decisions.
42. The key changes included:
- Providing detailed guidance on the IC's role and function (including conflicts of interest)
 - Being clearer about the process for reaching decisions
 - Detailed guidance on issuing advice
 - Providing reasons
 - Incorporating the threshold criteria within the draft guidance document
 - Executive recommendations.

Membership

43. During the period April 2017 to March 2018 the Policy Advisory Committee membership comprised:

Name	Member details	Meetings attended
Dr Marvelle Brown	External lay member	3/3
John Chaffey	Council registrant member	3/3
Bob Davies	External lay member	3/3
Elizabeth Elander	Council registrant member	2/3
Dr Bill Gunnyeon (Chair)	Council lay member	3/3
Dr Joan Martin	Council lay member	3/3
Professor Raymond Playford	External lay member	3/3
Alison White	Council lay member	3/3
Nick Woodhead	External lay member	2/3

44. Five new members were welcomed to the Committee whose terms began on 1 April 2017 – Dr Marvelle Brown, Bob Davies, Elizabeth Elander, Professor Raymond Playford and Nick Woodhead.
45. In addition the Council of Osteopathic Educational Institutions (COEI), the Institute of Osteopathy (iO), the National Council for Osteopathic Research (NCOR) and the Osteopathic Alliance (OA) are invited to send observers with speaking rights to contribute to those parts of the agenda that are not reserved to the statutory Education Committee. During the course of the year the Committee welcomed to various meetings: Dr Dawn Carnes (NCOR); Maurice Cheng (iO); Amberin Fur (OA); Fiona Hamilton (COEI); Austin Plunkett (NCOR); and Dr Kerstin Rolfe (COEI).
46. Members' allowances and expenses for the Committee in 2017-18 were £9,888 (2016-17 – £12,875)

Annual Report of the Remuneration and Appointments Committee 2017-18

1. The Committee met on three occasions in 2017-18, in June, October and March.

Staff pay

2. The Committee approved an across the board increase for GOsC staff of 3%, taking into consideration: the inflationary trend over the previous 12 months; affordability; and pay trends in the identified market.
3. The Committee also approved the discontinuation of the Performance Related Pay Progression Scheme in 2018-19, noting that it was a discretionary scheme, reviewed annually by the RAAC, and has not acquired contractual rights.

Staff survey

4. The Committee noted the issues raised by staff and the actions taken for improvement, including a commitment by the Executive to undertake a full review of reward and recognition.

Council effectiveness

5. The Committee reviewed the Council effectiveness questionnaire prior to its circulation to Council members and commissioned staff to undertake the survey independently of the Chair and Chief Executive. The results were considered by Council at its development day.

Members' allowances and expenses 2017-18

6. The Committee considered the fees payable to registration assessors for the work undertaken when doing complex registration assessments and agreed to increase the fee to the standard day rate of £306 (or half day where appropriate) plus expenses for all international registration assessments.
7. The Committee considered the remuneration of fitness to practise chairs and agreed to maintain the current approach to payment for fitness to practise committee chairs and panel chairs but to introduce a logging/claims system so that the additional work can be fairly remunerated. It was also agreed to review the remuneration of all chairs at the next review of Council remuneration in 2019-20.

Appointments

8. The Committee considered appointment processes for the following:
 - a. Professional Conduct Committee
 - b. Panel Chairs for Investigating Committee, Professional Conduct Committee

and Health Committee.

9. The Committee considered re-appointment processes for members of:

- a. Investigating Committee
- b. Professional Conduct Committee
- c. Audit Committee.

Survey of recent registrant applicants for non-executive roles

10. The Committee reviewed the results of a survey of recent registrant applicants for non-executive roles at the GOsC, as well as those who attended recruitment open days.
11. The Committee agreed that on going engagement with potential applicants to increase skills, and also the need to ensure that feedback to unsuccessful applicants provides support and encouragement for future applications.

Staff turnover

12. The staff turnover percentage was 18% for the period 1 Apr 2017 to 30 March 2018 (27% in 2016-17).

Committee membership

13. Membership of the Committee during the year was as follows:

Name	Member details	Dates of membership	Meetings attended
Alison White (Chair)	Council lay member	All year	2/3
Sarah Botterill	Council lay member	All year	3/3
Deborah Smith	Council registrant member	All year	3/3
Simeon London	Council registrant member	All year	3/3
Ian Muir	External lay member	All year	3/3

Cost of Remuneration and Appointments Committee-related work

14. It is estimated the costs of running the Remuneration and Appointments Committee and its related activities, excluding staff time, is approximately £5k in 2017-18 compared to £22k in 2016-17, reflecting the lower level of non-executive recruitment activity in the year. This is calculated as follows set out below along with the employment costs of the GOsC.

Annex C to 10

Committee-related	Costs 2017-18 £	Costs 2016-17 £
Committee members: fees and expenses	977	709
Governance appointments	4,114	21,054
Total	5,091	21,763
Total GOsC employment costs		
Wages and salaries	1,097,742	1,146,523
Social security costs	118,253	117,105
Other pension costs	96,088	102,723
Recruitment	29,069	23,492
Learning and development	30,023	29,187
Other employment costs	15,478	16,066
Total	1,386,653	1,435,096