



**Minutes of the 103rd Public meeting of the General Osteopathic Council
held on Wednesday 8 May 2019, at Osteopathy House,
176 Tower Bridge Road SE1 3LU**

Confirmed

Chair: Alison White

Present: Sarah Botterill (Chair, Item 14)
John Chaffey
Elizabeth Elander
Bill Gunnyeon
Simeon London
Haidar Ramadan
Denis Shaughnessy
Deborah Smith

In attendance: Steven Bettles, Professional Standards Manager (Items 9 and 10)
Fiona Browne, Director of Education, Standards and Development
Hannah Doherty, Regulation Manager (Item 7)
Kabir Kareem, Quality and Assurance Officer (Items 9 and 10)
Leonie Milliner, Chief Executive and Registrar
Sheleen McCormack, Director of Fitness to Practise
Liz Niman, Head of Communications and Engagement
Matthew Redford, Director of Registration and Resources
Marcia Scott, Council and Executive Support Officer

Observers: Maurice Cheng, Chief Executive, the Institute of Osteopathy (iO)
Belinda Chavasse, Executive Assistant to the CE (iO)

Item 1: Welcome and apologies

1. The Chair welcomed all to the meeting. A special welcome was extended to the Chief Executive, Leonie Milliner, who formally joined the GOSc in March 2019. Maurice Cheng and Belinda Chavasse were also welcomed to the meeting.
2. Apologies were received from Joan Martin.

Item 2: Questions from Observers

3. There were no questions from the observers.

Item 3: Minutes

4. The minutes of the 102nd meeting of Council held on 6 February 2019, were agreed as a correct record.

Item 4: Matters arising

5. Professional Standards Authority (PSA) Performance Review Report 2017-18:
The Chief Executive informed Council that the team were reviewing the 2017-18 report and would report actions to the Audit Committee on 27th June. As at the date of this meeting the 2018-19 report, expected in April, had not yet been received.

Item 5: Chair's Report

1. The Chair gave her report to Council:
 - a. It was noted that this was Leonie's first full meeting of Council as Chief Executive. The Chair had met with Leonie on a number of occasions since the last Council meeting in February and was pleased to note that she had already taken a strong grip on the issues which Council is dealing with. The Chair reported that one immediate task for the new Chief Executive was the finalising of the new corporate plan, which Council would be reviewing later in the meeting, and decide whether further work was required prior to its approval. Council was also reminded that later in the meeting it would be considering a new iteration of performance measurement for fitness to practise.
 - b. The Chair reported to Council that a meeting has been arranged with the Chair and Chief Executive of the PSA, to discuss the PSA/GOsC relationship in depth, so that Council can be assured that the work the GOsC is undertaking is consistent with PSA expectations. The Chair will report back on the outcomes of the meeting at the next Council meeting, by which time it is hoped that the latest PSA report will have been received, alongside the Audit Committee's review of the associated action plan.
 - c. The Chair announced that the process of annual reviews would begin in due course and the Council and Executive Support Officer would begin the arrangements to organise meetings. Council was asked to consider seeking feedback from at least one colleague who had not been asked before. The Chair's own annual review would be conducted by Bill Gunnyeon and Deborah Smith.

Noted: Council noted the Chair's report.

Item 6: Chief Executive's Report

6. The Chief Executive thanked the members of Council, stakeholders and staff for the warm welcome received as she began in her new role. The Chief Executive reported that she had already met a number of stakeholders, as well as having an opportunity to observe an Osteopath in practice, all of which had been highly beneficial as part of her introduction to the profession and the work of the GOsC.

7. The Chief Executive then introduced her report which gave an account of the work undertaken since the last meeting and not reported elsewhere on the agenda.
8. The following points were highlighted:

PSA Review and PSA Standards Pilot

- a. The team are continuing to reflect on the outcome of the 2017-18 PSA report, taking action where concerns have been highlighted. An action plan has been developed to report on actions undertaken and assist in preparing for the 2019-20 review, alongside the 2018-19 review report when it is received.
- b. The PSA Performance Review for 2019-20 is to be set against the 'Standards of Good Regulation 2018' using a new evidence framework. The GOsC has been asked by the PSA to assist in piloting the new standards, which the Chief Executive reported, have changed significantly. It has been agreed that the GOsC will pilot Standard 3 on Equality and Diversity.
- c. It is expected that by the autumn, achievements against the new standards will need to be demonstrated using the new evidence framework.

Institute of Osteopathy (iO) Roadshow

- d. The Chief Executive reported that GOsC was attending the iO Roadshow at a number of venues around the UK including Coventry, Bristol, Manchester, Perth and Maidstone. The events attended to date were interesting, and GOsC attendance informative and well received.

Publication of Literature Review on Communication and Miscommunication in the context of touch

- e. Two important workshops to coincide with the publication of the literature review took place in Huddersfield on 26 March, and London on 27 March. The Chief Executive encouraged Council members to read the literature review, which considered how best to support patients and practitioners to maintain and enhance positive aspects of touch, and reduce areas of misconception and harm.

Appointments

- f. The advance notice for the appointment of the Chair and two Council members have been submitted to the PSA. The Chief Executive reported that although GOsC had experience in the appointments process for Council members, this is the first time the appointments process for the Chair of Council had been conducted by GOsC. As a consequence, the appointments process is being very closely managed to ensure requirements are being met.

- g. Arrangements have been made with the Cabinet Office's Public Appointments Service to advertise all forthcoming Council and committee appointments which will be helpful in raising awareness of the non-executive recruitment process more widely.

9. Business Plan 2018-19 - Q4

- a. The Q4 Business Plan monitoring report was considered by Council. Council noted a number of projects were coming to completion, and others which would carry over to the 2019-20 Business Plan.
- b. Members were advised that all the activities highlighted as amber at 1.3 – Fitness to Practise, were on track and updates were provided:
- Key Performance Indicators (KPIs): Council noted the delay developing the KPIs as a consequence of the outcome from discussion at February Council, and that KPIs were to be discussed further at this meeting.
 - Rule 19 Procedure: Council noted the consultation has been published.
 - Pool of Expert Witnesses: A joint Regulation/Professional Standards workshop was held attended by the Chairs of the Professional Conduct Committee and representatives from the Patient Group. Details of the resulting feedback and analysis from the workshop will be reported to Council in due course.
- c. It was confirmed that research and work on the Bank of Conditions was underway and a report would be submitted to Council.

10. Financial Report

- a. The Director of Registration and Resources gave his financial report for the year end 31 March 2019.
- i. At its meeting in February 2018 Council approved the Business Plan and Budget 2018-19. The budget forecast a small surplus before designated spending of c. £10,000 and at the year-end 31 March 2019 he reported that the surplus had been delivered.
- ii. The balance sheet is in a healthy position and the cash account is also in a healthy position.
- iii. The investment portfolio recovered from its mid-year dip and members were reminded they had discussed this at the meeting of Council in February 2019. The investment portfolio had reached a valuation at year end of c. £570,000.

b. The audit timeline was set out as follows:

Week commencing 20 May 2019	Financial audit commences
27 June 2019	Audit Committee meeting to consider Annual Report and Accounts and audit findings report
17 July 2019	Council meeting to sign Annual Report and Accounts
30 September 2019	Deadline for laying Annual Report and Accounts before both Houses of Parliament
Post 30 September 2019	Charity Commission submission

Noted: Council noted the Chief Executive’s report.

Item 7: Fitness to Practise Report

11. The Director of Fitness to Practise introduced the report which gave the quarterly update on the work of the department and the GOsC’s fitness to practise committees.
12. Council noted the following points:
 - a. Appeals: Kern v General Osteopathic Council – the appeal was dismissed in its entirety and the appellant ordered to pay the GOsC’s costs. An ex tempore judgement was delivered on the day of the hearing but to date no written judgement has been received.
 - b. Appeals: Beard v General Osteopathic Council – the outcome of this case is still unknown; a confidential draft of the judgement will be handed down in due course.
 - c. The public consultation on the draft Practice Note: Cancellation of Hearing under Rule 19, is currently live. The consultation period is from 21 March until 16 May 2019. The consultation on the Restoration Guidance has also been published.
 - d. Joint chair training of the FtP Chairs of the GOsC and GOC took place on 4 February 2019. The training comprised leadership techniques, the expectations of a chair and facilitating in camera discussions.

Dataset

- e. Two cases were adjourned during the last quarter. In reviewing it was reported that no defining patterns could be identified for the adjournments.

- f. An analysis of Rule 8 cases will be submitted to Council at its next meeting in July.

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

- a. Following attendance at a PSA seminar on FtP research it was shown that the GOsC's approach to addressing issues relating to public confidence in impairment and sanction decisions was not dissimilar to that of other regulators. Any developments would be kept under review. Another PSA conference would be taking place in Edinburgh on 13 May 2019, looking at similar issues. The outcomes will be reported to Council at its meeting in July.
- b. It was confirmed that in developing the GOsC listings protocol, benchmarking against the procedures of other regulators had been undertaken.
- c. It was suggested that further consideration should be given to the deployment of panellists who sit on the Professional Conduct Committee. It was suggested that by listing members up to one year in advance it might be possible to increase the availability of panellists, although it was acknowledged that with the low number of hearings and the target to complete a case within 52 weeks, scheduling hearings too far in advance may result in a larger number of cancellations. Council asked that the Director of Fitness to Practise should review the listings protocol, looking again at how other regulators approach listing hearings, and discuss how best to deploy panellists with the Committee Chair(s). In the discussion Council noted the important differences that informed the development of the GOsC current listings protocol including: the restriction on the size of our pool of panellists; the low number of hearings; the current KPI which requires the completion of a case within 52 weeks (end to end). Council was reminded that the implementation of the current procedure had led to improvements in the process leading to fewer cancellations, a greater fairness in allocating panels to panellists (where possible) with flexibility when and where necessary. Additionally, Council was advised that no complaints had been received from individual panellists or Chairs regarding the listing protocol or the deployment of panellists.
- d. Council noted that the data for the concerns closed refers to those concerns which are closed under the Initial Closure Procedure (ICP) without having progressed to being formal cases.
- e. The Chair enquired if there were enough meetings of the Investigating Committee (IC) to ensure there were no delays in cases being reviewed, or if the IC were reviewing too many cases in one sitting. In discussion, it was suggested that the number of IC meetings might not be driven by caseload. In response it was explained that there were a sufficient number of IC meetings to manage the caseload appropriately, and if not, the evidence would be in the reported KPIs and case progression. In addition, it was

reported to Council that in comparison to other regulators, the IC are given a lot of information in advance, allowing the Committee to make decisions and to progress cases quickly and effectively. It was added that additional IC meetings are scheduled if necessary to ensure KPIs are met and progress cases within the IC caseload.

Noted: Council noted the Fitness to Practise report.

Item 8: Council Fees and allowances; Audit Committee Terms of Reference (ToR)

14. It was noted that the recommendations relating to the Chair's remuneration would not come into effect until 1 April 2020. It was agreed as the Chair's term of office would end on 31 March 2020, there was no conflict of interest and she remained in the meeting for the discussion.
15. The Chief Executive introduced the item which set out the following for the decision for Council:
 - a. Council Fees and allowances
 - b. The Audit Committee Terms of Reference
16. The following points were highlighted:

Council fees and allowance/Appointments and Reappointments

- a. The Council fees and allowances had been considered by the Remuneration and Appointments Committee alongside a substantial amount of evidence to support the recommendation being made to Council. Council noted the only change to the fees and allowances would be that of the Chair of Council with all other remuneration remaining the same.
- b. Council noted the Chair and Committee member appointments process would be managed through the Remuneration and Appointments Committee in accordance with the updated PSA requirements for appointments and reappointments.

Audit Committee (AC) Terms of Reference (ToR)

- c. Council noted that consensus had been reached on an agreed Terms of Reference for the Audit Committee and how its relationship with Council is defined.
- d. It was reported to Council that the Audit Committee planned to review the structure of the Risk Register within the context of the new Corporate Plan, starting with a workshop to be held at the next AC meeting led by an external facilitator to help frame the dialogue around the Risk Register.

Agreed: Council agreed the recommendations of the Remuneration and Appointments Committee relation to Council fees and allowances as set out.

Agreed: Council agreed Audit Committee Terms of Reference (ToR).

Noted: Council noted the process for reappointment of Council members.

Item 9: European School of Osteopathy (ESO): Renewal of Recognised Qualification

17. Elizabeth Elander and John Chaffey declared an interest and left the meeting for the duration of the discussion.
18. It was agreed that the discussion about the ESO would remain public. Members were advised that care should be taken when referencing aspects of the report that might be sensitive. If there were aspects of the report considered sensitive and required discussion, then Council would enter into private session in accordance with the requirements outlined in the Standing Orders.
19. The Professional Standards Manager introduced the item which concerned the European School of Osteopathy, renewal of its current Recognised Qualifications (RQ) for the:
 - a. Master of Osteopathy – four years full-time
 - b. Bachelor of Science (Hons) Osteopathy – four years full-time
20. The following points were highlighted:
 - a. The Policy Advisory Committee (the statutory Education Committee – the Committee) at its meeting in October 2018 requested a turnaround plan from the ESO. An updated action plan, turnaround plan and independent report were provided for the Committee’s March 2019 meeting.
 - b. The Committee were impressed with the speed and comprehensive nature of the actions put in place and felt suitably assured to recommend the renewal of the RQ. The Committee Chair added that the Committee had felt it needed to be robust in its concerns relating to the institution and welcomed their acknowledgement and response to the seriousness of the issues and concerns raised by the Committee. The work of the Professional Standards team was also acknowledged in helping ESO to achieve and demonstrate the necessary changes.
21. In discussion the following points were made and responded to:
 - a. Council were given assurances that there would be continuous monitoring of the institution and an action plan to ensure that the progress demonstrated stayed on track. It was recognised that the turnaround and action plans would be challenging but the ESO had implemented and provided evidence for a number of the proposed actions.

- b. It was confirmed that the action plan sets out the timetable for the conditions to be met and is monitored by the Committee and the team.
- c. It was confirmed that the institution had commissioned an independent review. The Independent Reviewer was an individual familiar with the osteopathic profession and education structure.
- d. The Council considered the leadership, governance and management structure. It was stated that Council should be assured that the Committee had robustly reviewed the ESO situation and had considered whether the RQ should be renewed or not at a previous meeting. Under new leadership, the ESO has recognised the changes needed and was meeting the challenge as demonstrated with considerable evidence. The carefully phrased conditions were being kept under close review on an ongoing basis. In the event that evidence were to emerge of slippage, the Committee could still recommend withdrawal of the RQ to Council.
- e. It was recognised that there had been changes to governance, and that the new structure enhanced and strengthened what was in place.

Agreed: Council agreed to renew the recognised qualification Master of Osteopathy and the Bachelor of Science (Hons) Osteopathy awarded by the European School of Osteopathy, subject to the conditions as set out from 1 September 2019 to 31 August 2024, and to seek approval from the Privy Council.

Item 10: London School of Osteopathy (LSO): Renewal of Recognised Qualification

- 22. Elizabeth Elander declared an interest and left the meeting for the duration of the discussion.
- 23. The Quality Assurance Liaison Officer introduced the item which concerned the London School of Osteopathy which was seeking renewal of its current Recognised Qualifications for:
 - a. Master of Osteopathy
 - b. Bachelor of Osteopathy (Hons)
- 24. The following points were highlighted:
 - a. A correction to the recommendation was noted relating to the period set for the RQ and was amended to read:
...from 1 September 2019 until 31 August 2024...
 - b. The report findings were positive, and the Visitors had recommended approval without specific conditions. Strengths included good feedback mechanisms, the embedding of the importance of the patient values within the curriculum and across the School's activities, the use of well-informed

non-osteopathic tutors to assist students' understanding of areas external to osteopathic practice and a positive working relationship with the awarding body, Anglia Ruskin University.

- c. Areas for development which will be monitored as part of the Annual Report, included the requirement to complete and update the module handbook; to make learning outcomes more specific and to develop a system to ensure that external examiner reports are disseminated to students and the faculty in more detail.

Agreed: Council agreed to renew the Recognised Qualifications Master of Osteopathy and Bachelor of Osteopathy (Hons) awarded by the London School of Osteopathy from 1 September 2019 until 31 August 2024, subject to the general conditions outlined and to seek approval of the recognition from Privy Council.

Item 11: Review of principal accounting policies and accounting estimates and judgements

25. The Director of Registration and Resources introduced the paper which described minor revisions to the principal accounting policies and accounting estimates and judgements recommended by the Audit Committee at its meeting on 21 March 2019.

26. The following points were highlighted:

- a. It was confirmed that the Audit Committee had considered and that a thorough discussion had taken place about the accounting policies and accounting estimates and judgements at its meeting on 27 March 2019.
- b. The changes set out have been amended in line with best practice and with advice from the auditors, Crowe.

Noted: Council noted the minor revisions to the principal accounting policies and accounting estimates and judgements, as recommended by the Audit Committee at its meeting on 21 March 2019.

Item 12: Registration Report

27. The Director of Registration and Resources introduced the report which provided an update of registration activity covering the six-month period from 1 October 2018 to 31 March 2019.

28. It was noted that the Registration team are meeting service level agreements and targets.

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

- a. Internal Market Information (IMI) system alerts: There was confidence that the possible withdrawal of the IMI system post-EU Exit would not impact on

systems for checking registrants as there were systems in place to share and exchange information with other competent authorities. All alerts received by the Registration team are checked and over a 12-month rolling period c.3,800 alerts had been received with no further action by the GOsC.

- b. Members noted the increase in alerts received, c.500 for the reporting period, asking if with current staff resources the checking was sustainable. It was agreed that the requirement to check IMI system alerts was labour intensive, but the number of alerts fluctuate and the number for the reporting quarter was high. It was noted that the alerts received by the GOsC also include those for other health regulators and do not necessarily apply as the number of osteopaths holding dual registration is relatively low.
- c. CPD Annual Summary Form Audits: It was explained that the number of audits shown for the year to 31 March 2019 were consistent with previous years. The audits which fell into category B were returns by registrants who, usually after a conversation with a member of the Registration team, could provide a more comprehensive and articulate demonstration of CPD learning. It was added that registrants who did not submit a form would be removed from the register for non-compliance. Removal for an improper submission was rare as these would be followed-up by Registration team. The introduction of the new CPD Scheme will include additional checks by seeking verification of hours and activities undertaken.
- d. Reasons for resignations: It was noted that the table at paragraph 12 did not correlate with reasons cited and agreed that the correct table would be circulated in due course to include:
 - Family reasons
 - Full-time study
 - No reason provided
- e. Removals from the Register: It was explained that to mitigate against possible fraudulent CPD submissions under the new three-year scheme, a registrant submitting their annual renewal form would be required to declare the activity undertaken in the previous 12-months. For example, if zero CPD hours is recorded this would represent a 'red flag' and further advice would need to be provided. An additional safeguard is that starting from October 2019, audit samples will be taken from submissions which will review and seek verification on the number of CPD hours and activity taken. It was suggested that for the purposes of reporting to Council an additional sentence could be included about how the scheme mitigates against possible fraudulent reporting of CPD.
- f. It was agreed that the Registration report could be disaggregated to show more clearly reporting for the year and reporting the most recent quarter. It was added that the introduction of the new CPD Scheme would instigate a different and clearer way of reporting. It was also suggested the Registration

report should include additional information on how the Register is growing and whether a possible reduction in the number of Osteopathic Education Institutions would lead to a fewer students moving onto the Register. Council noted that Higher Education across the board was an area where there were a number of challenges and should be monitored carefully. It was also requested that data showing the breakdown of the register by age would be useful to members.

- g. It was explained that non-practising registrants (defined as registrants out of clinical contact with patients for 3-months or more continuously in the registration year) do pay a fee, albeit at a reduced rate. This group includes people taking maternity/paternity leave, people who have declared ill health, people taking a sabbatical or travelling. To return to practise an individual must make a declaration and, in some cases, go through the return to practise process if their period of non-practise is longer than two years. It was stressed that if it was found that a non-practising registrant was seeing patients the matter would be referred to the Fitness to Practise team for investigation.

Noted: Council noted the Registration Report.

Item 13: Minutes of the Policy Advisory Committee (PAC) – 13 March 2019

30. The PAC Chair reported that the public meeting had been shorter than usual. The Committee had agreed that, due to some sensitivities in relation to commercial confidentiality, two items which had been listed on the public agenda be moved to the private session for discussion.

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

Item 14: Minutes of the Remuneration and Appointments Committee – 21 March 2019

31. The Chair declared an interest which related to the implementation of the process to recruit and appoint the next Chair of the GOsC and which was included in the minutes of the Remuneration and Appointments Committee. It was agreed that Sarah Botterill would act as Chair for the discussion.
32. Council were given an update on the progress of the appointments process to date. The following points were highlighted:
 - a. Details of the appointments process for the Chair and Council members have been submitted to the PSA for approval.
 - b. The recruitment process for the Chair will begin July 2019, with interviews taking place in October 2019.
 - c. The role will be open to both lay and registrant applications and the aim would be to reach as wide an audience as possible seeking regional and

political balance. Adverts for each role would be published in either the 'Times' or the 'Guardian' and osteopathic publications. The roles would also be advertised on the Public Appointments website.

- d. Registrants expressing an interest in the role of Chair would have an opportunity to meet with the Chief Executive and registrants expressing an interest in the role of Council member would have an opportunity to meet with the Chief Executive and a Registrant Council member to discuss and ask questions about the roles.
- e. The agreed recruitment panel are:
 - Bronwen Curtis (independent): [post meeting note; Bronwen Curtis has been replaced by John Pullford]
 - Anna Van de Gaag (independent, chair)
 - Sarah Botterill (Council, Lay)
 - Haidar Ramadan (Council, Registrant)

The panel will undergo training to better understand the GOsC, its strategic direction and the recruitment process. Training with an HR consultant in competency-based assessment will also be provided allowing the panel time to develop as a group.

- f. During the initial sifting process documentation will be anonymised, and protected characteristics will be removed from the application forms and curriculum vitae (CV) including addresses. Applicants will be informed about the process and asked not to refer to protected characteristics in their application.
- g. An Equality Impact Assessment has been undertaken by Ian Muir, independent lay member of the Remuneration and Appointments Committee, and his recommended amendments incorporated.
- h. Privy Council have also been advised about the recruitment process for the new Chair of Council. Although there is no action to be taken at this point the advice from Privy Council is that the GOsC should be alert to and take into consideration the Parliamentary timetable and when Parliament will be sitting in order that the appointment can be approved.

33. The following points were made and responded to:

- a. It was acknowledged there were difficulties in encouraging experienced registrants to consider membership of Council and its committees. Registrants did not always equate experience gained in roles outside of the profession, for example, as a Chair of a school's board of governor or other similar roles, with the skills and competencies required for non-executives.

- b. It was suggested that an article in the 'Osteopath' magazine could highlight the type of experience/s which would be useful for registrants who might consider a role as a Chair or Council member of the GOsC.
- c. A number of suggestions to encourage registrant applications included:
 - coaching in the recruitment process including completing the forms;
 - provision of assistance and advice from the Institute of Osteopathy;
 - registrant Council members acting as mentors and tapping into the osteopathic community to develop those interested;
 - encouraging registrants to attend Council meetings as observers

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

Item 15: Minutes of the Audit Committee – 21 March 2019

34. The minutes of the Audit Committee were noted.

Noted: Council noted the minutes of the Audit Committee.

Item 16: Any other business

35. There was no other business.

Date of the next meeting: 17 July 2019 at 10.00